



Connecticut Healthcare Innovation Plan

State Innovation Model Initiative

STATE OF CONNECTICUT

*Presentation to the Healthcare Innovation Steering
Committee*

June 26, 2014

Practice Transformation Task Force Update

AMH Standards

Executive Team



State Representative: **Robert Zavoski**, MD, DSS

Payer Representative: **Joseph Wankerl**, Cigna

Provider Representative: **Rebecca Mizrachi**, APRN, Norwalk CHC

Consumer and Advocate Representative: **Lesley Bennett**

Introductions

SIM level setting background information and mission statement

Practice Transformation Task Force expectations and scope

Discussion on national standards vs. CT specific standards

Discussion for SIM Steering Committee

Recommendation

	Advantages	Disadvantages
National Medical Home	<ul style="list-style-type: none"> •Standards established •Large market share •Recognition process established •Technical program assistance •Many CT practices already enrolled 	<ul style="list-style-type: none"> •Practice burden •Less flexibility to change •Static process •ROI •Does not focus on community integration •Add on criteria needed
CT AMH	<ul style="list-style-type: none"> •State Driven •Best of breed approach •Flexible •Focus on specific elements and goals •Common standards for payers 	<ul style="list-style-type: none"> •Unknown costs •Establishing criteria and infrastructure to recognize & evaluate practices •Time to implement •Building all technical assistance and training programs •Will this make reliable measures

Primary Care Transformation Strategy

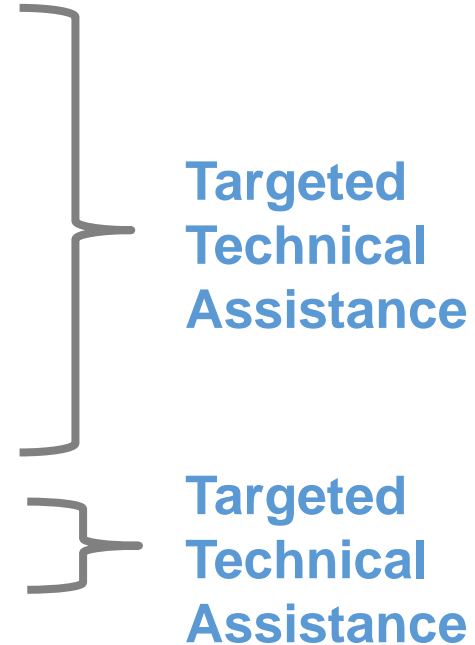
Proposed approach – 6/12/14

- + Integrated delivery systems
 - + Large medical groups
 - + Clinically Integrated Network
 - + Independent Practice Associations
 - + Federally Qualified Health Center (FQHC)
- Advanced Network
- FQHC
- + Small to mid-size practices (not participating in payment reforms)
-
- A diagram showing a list of healthcare models. The first five items are grouped by a large right-facing curly bracket labeled 'Advanced Network'. The sixth item, 'Federally Qualified Health Center (FQHC)', is grouped by a smaller right-facing curly bracket labeled 'FQHC'. A sixth item, 'Small to mid-size practices (not participating in payment reforms)', is listed below the other groups without a bracket.

Proposed approach – 6/12/14

- + Integrated delivery systems
- + Large medical groups
- + Clinically Integrated Network
- + Independent Practice Associations
- + Federally Qualified Health Center (FQHC)

- + Small to mid-size practices (not participating in payment reforms)



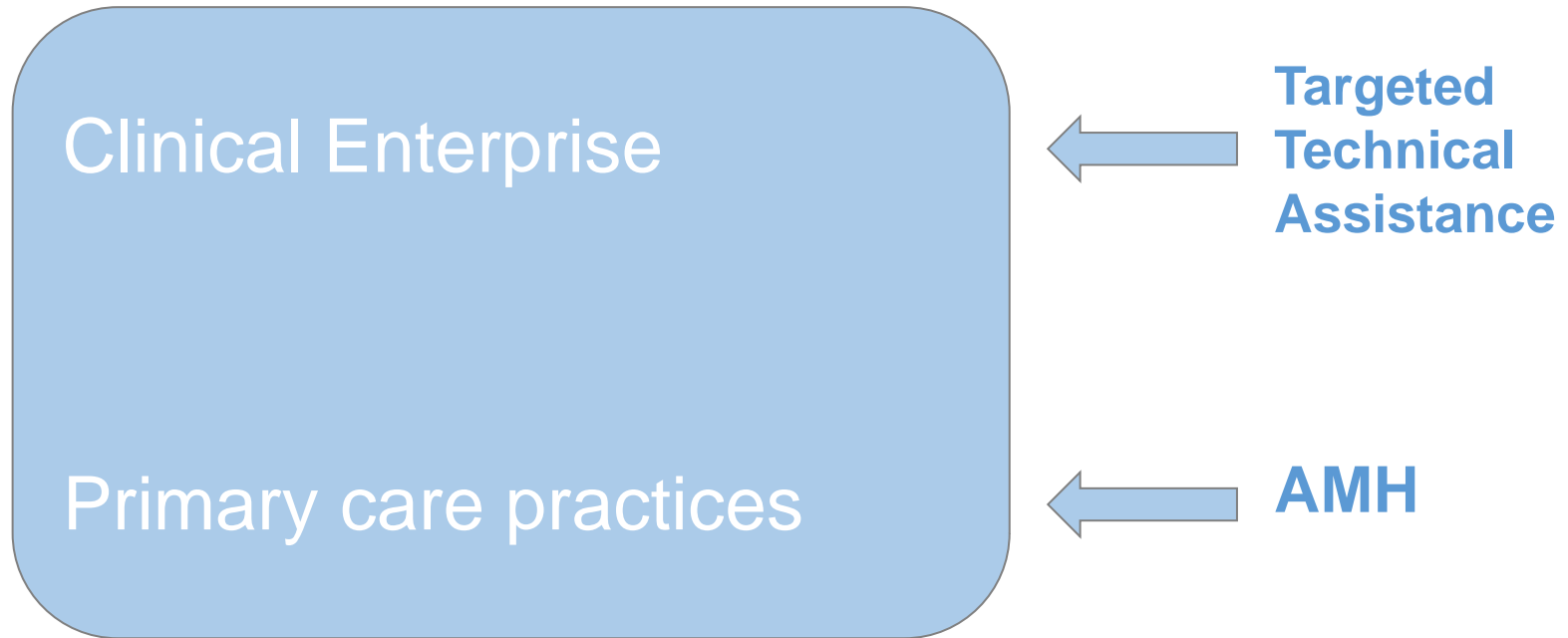
**AMH &
Geo-community**

Revised approach – 6/24/14

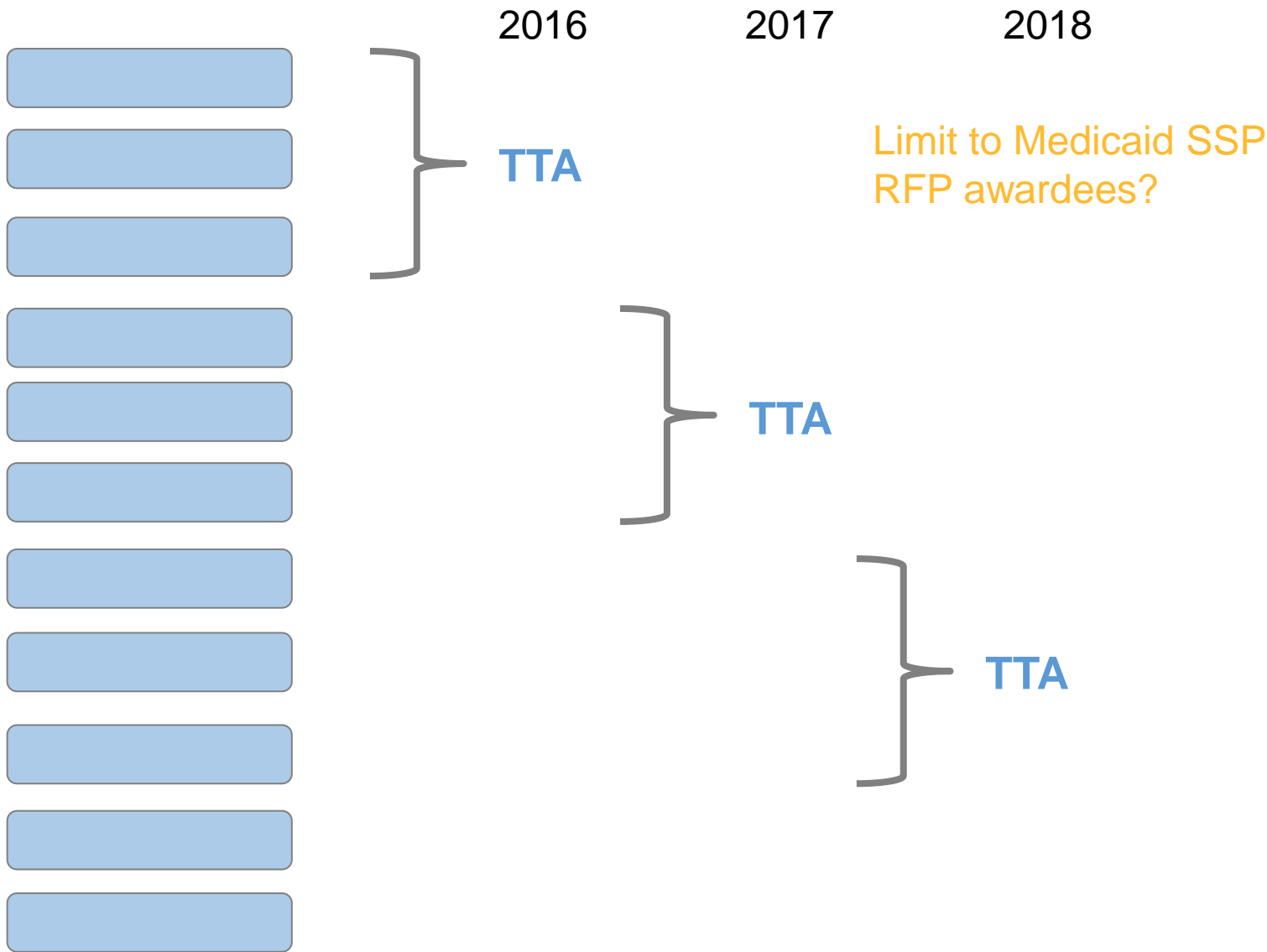
- + CSMS effort to organize statewide ACO – 2015
- + Eliminate or reduce emphasis on geo-community
- + Change focus for AMH glide path support

Advanced Networks

Revised approach – 6/26/14

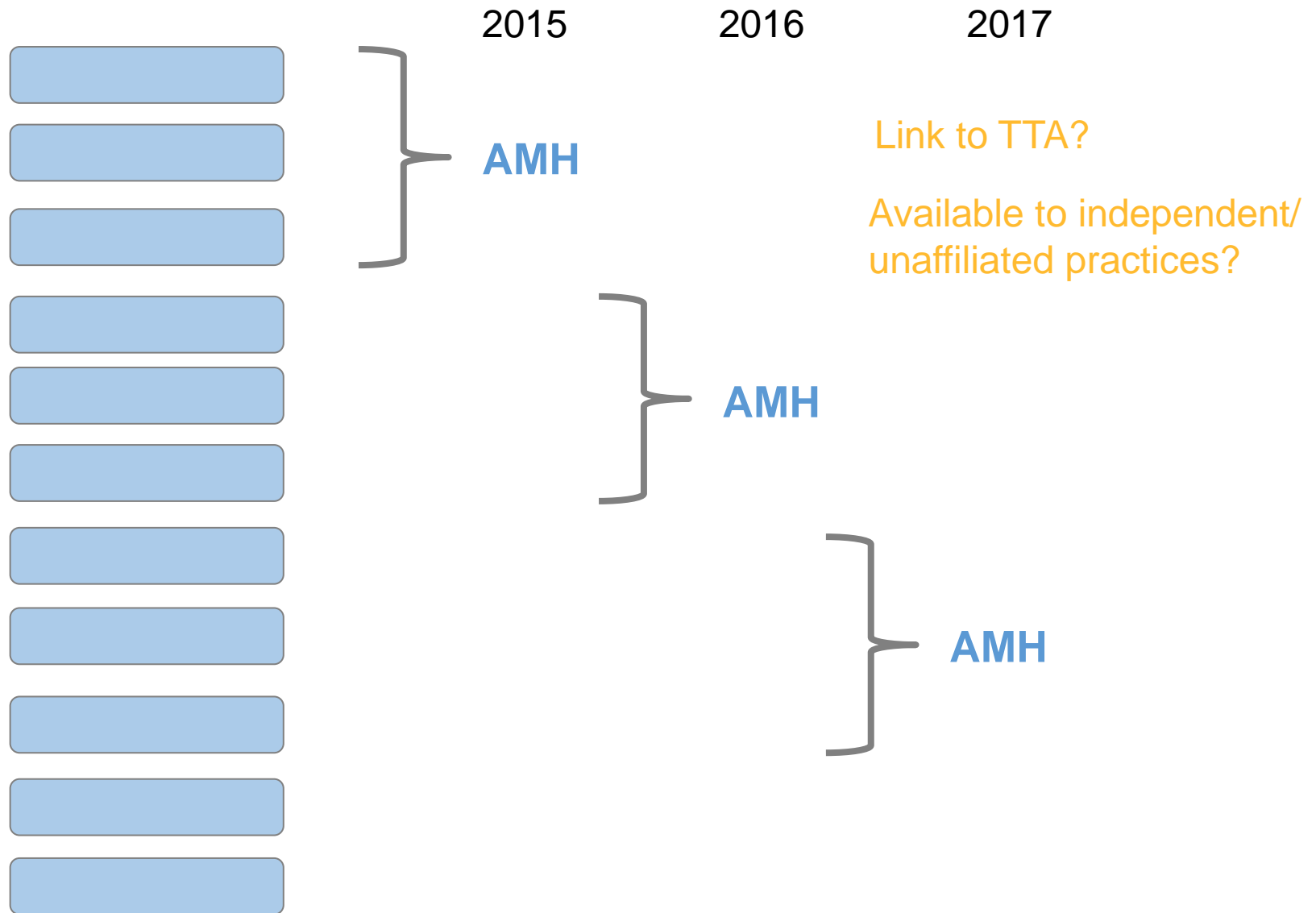


Advanced Networks – Targeted Technical Assistance



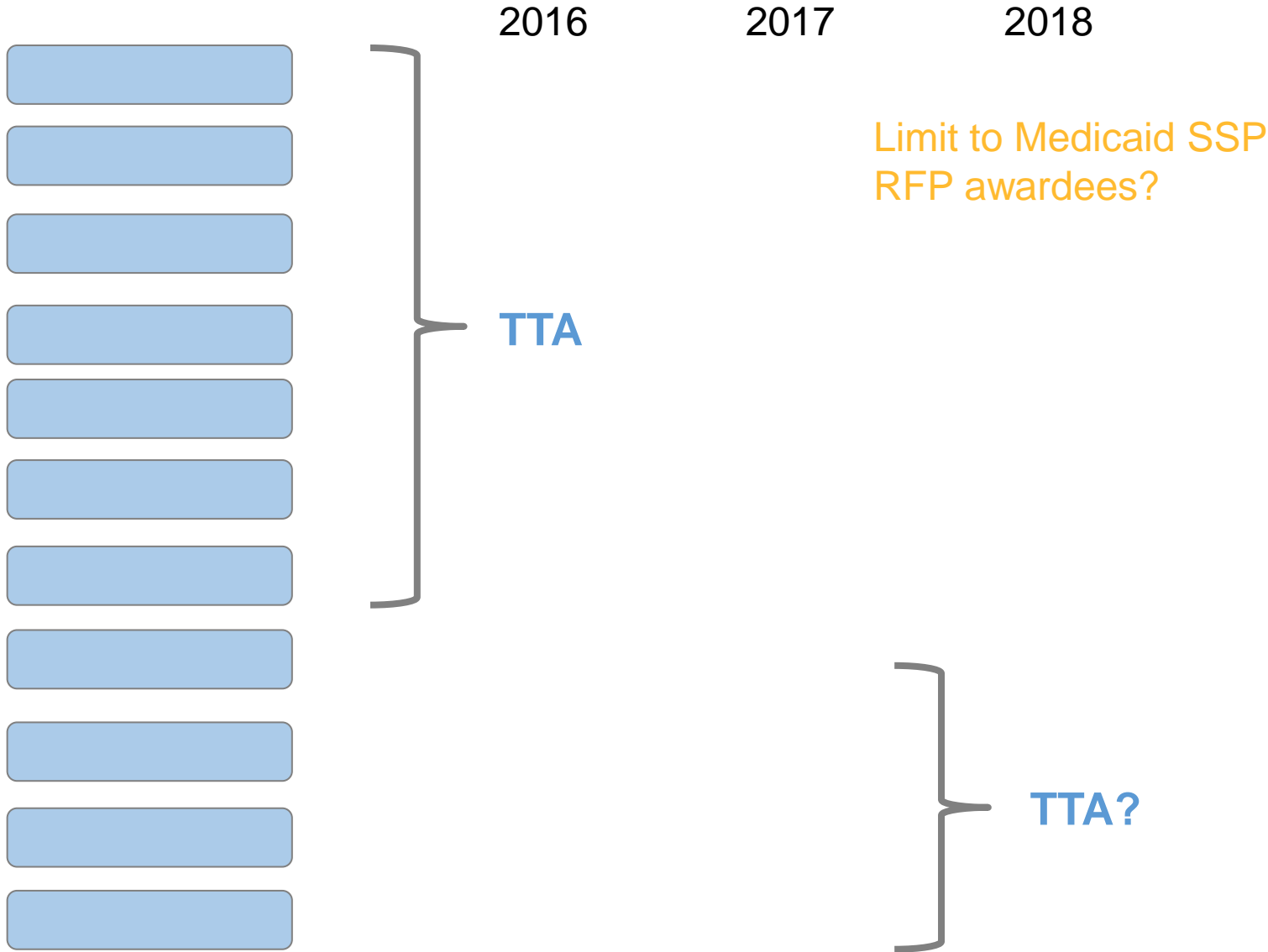
Draft for discussion – pre-decisional

Advanced Networks – Advanced Medical Home



Draft for discussion – pre-decisional

FQHCs – Targeted Technical Assistance



SIM Model Test Application – Section Review

- + Plan for Population Health
- + Healthcare Delivery System Transformation Plan
- + Payment and Service Delivery Model
- + Leveraging Regulatory Authority
- + Health Information Technology
- + Stakeholder Engagement
- + Quality Measure Alignment
- + Monitoring and Evaluation Plan
- + Alignment with State and Federal Innovation