STATE OF CONNECTICUT State Innovation Model Healthcare Innovation Steering Committee

Meeting Summary May 12, 2016

Location: Capitol Room 310, 210 Capitol Avenue, Hartford

Members Present: Tamim Ahmed; Jeffrey G. Beadle; Mary Bradley; Roderick L. Bremby; Patrick Charmel; Anne Foley; Mario Garcia (for Raul Pino); Suzanne Lagarde; Alta Lash; Courtland G. Lewis; Robert McLean; Michael Michaud (for Miriam Delphin-Rittmon); Ron Preston (for Bruce Liang); Jan VanTassel; Victoria Veltri; Deremius Williams; Michael Williams; Thomas Woodruff

Members Absent: Nancy Wyman; Catherine F. Abercrombie; Patricia baker; Terry Gerratana; Frances Padilla; Robin Lamott Sparks; Katharine Wade

Call to Order and Introductions

Acting Chairwoman Victoria Veltri called the meeting to order at 3:01 p.m. Participants introduced themselves. It was determined a quorum was present.

Public Comment

Neal Lustig of the Pomperaug Health District provided public comment on the role of local health departments in the development of health enhancement communities (see public comment here).

Minutes

Motion: to approve the summary of the March 10-2016 Steering Committee meeting – Alta Lash; seconded by Jan VanTassel.

Discussion: none. *Vote: all in favor.*

Motion: to approve the summary of the March 30, 2016 Steering Committee webinar – Alta Lash; seconded by Jan VanTassel.

Discussion: none. *Vote: all in favor.*

Population Health Council Nominees

Jeffrey Beadle provided an update on the status of the Consumer Advisory Board's process in selecting nominees. The CAB has decided to make an additional attempt to achieve broader diversity and to make sure certain stakeholders are represented. Mario Garcia said that, in discussions, they have come to the conclusion that they should include housing representation. Alta Lash asked whether the Consumer Advisory Board would select the housing representative. Dr. Garcia said yes. It was noted that the housing candidate would ideally have a background in legal services or someone with experience in homelessness or low income housing. Jan VanTassel suggested the representative have experience in both housing and health. Dr. Garcia later clarified that the Personnel Sub-Committee will be making the nomination. After some discussion, there were no objections to the Personnel Sub-Committee assuming this role.

Motion: to add a slot on the Population Health Council composition for a housing representative – Alta Lash; seconded by Jan VanTassel.

Discussion: none.

Vote: all in favor.

Ms. Lash noted that she had reservations about not going back to the community and recommended that a broad net be cast by either committee to ensure that there are candidates with strong community roots around housing.

Dr. Garcia said the other issue was race and ethnic diversity. It was suggested that DPH do additional outreach for the CAB to make appointments. Mr. Beadle said they planned to meet with DPH to make sure their objectives are in sync.

Robert McLean presented the Personnel Sub-Committee's recommendations for appointment to the Population Health Council. Michael Williams noted there was no racial diversity in the Personnel Sub-Committee's nominations. Dr. McLean said they did not have much diversity to choose from. Ms. Veltri said there may be a need to have a discussion about how to have a more comprehensive recruitment. Dr. Schaefer recommended they meet with key partners including the CAB and to review current practices to see how they might be modified. Ms. Veltri also suggested they analyze the levels of diversity on existing councils.

Motion: to approve the recommendations of the Personnel Subcommittee for appointment to the Population Health Council – Jan VanTassel; seconded by Mary Bradley.

Discussion: none.

Vote: all in favor; Michael Williams abstained.

Healthcare Innovation Steering Committee Nominees

Dr. McLean reported that the Personnel Subcommittee was recommending Joseph Quaranta from Community Medical group fill the current vacancy on the Steering Committee for an Advanced Network representative. Dr. Schaefer noted that they sought a physician representative from an Advanced Network that was not tied to a hospital.

Mr. Beadle reported that the Consumer Advisory Board was recommending Sharon Langer from Connecticut Voices to Children to fill the vacancy created by the departure of Jane McNichol.

Motion: to approve the recommendations of the Consumer Advisory Board and the Personnel Subcommittee for appointment to the Healthcare Innovation Steering Committee – Deremius Williams; seconded by Jan VanTassel.

Discussion: none. *Vote: all in favor.*

Advanced Medical Home Presentation

Anne Elwell and Michele Kelvey-Albert, Qualidigm, and Sara Guastello, Planetree, provided an overview of the Advanced Medical Home initiative (see presentation here). Deremius Williams asked whether there was a broad collection of practices involved and not just those tied to hospitals. Ms. Kelvey-Albert said yes. Ms. VanTassel asked whether quality determinations were based on staff perception. Ms. Kelvey-Albert said they are based on staff and physician perception on the quality of care they provide. She added they will get to outcomes as they get to quality measures but noted that assessments do not look at quality measures. Dr. McLean asked whether they were surveying physicians to determine whether they were buying into the program. Ms. Guastello said they were surveying every member of the care team; she noted that physician leadership is key to buy in.

Tamim Ahmed asked for clarification on how they were identifying patients for case management as it appeared they were only identifying patients at oral health risk. Ms. Kelvey-Albert said that

case management was an area that offices need further work on. The appendix to the AMH has areas of emphasis that practices are asked to work on. She noted that oral health is not a major point of emphasis. They are focusing on identifying high risk patients.

Dr. McLean asked whether the practices know what the standards are. Ms. Kelvey-Albert said they would know parts of the standards. They use language that would make sense in the real world. Engaged physician leaders do know the standards; they educate their staff on the standards and on patient centeredness. She said at least half are engaged and that should increase towards the end. Mr. Beadle asked about the geographical distribution of the practices and whether there were rural practices represented. Ms. Kelvey-Albert said they are in most of the state's counties but not in the state's Quiet Corner. She added that the newest cohort included practices in the Willimantic area. Mr. Beadle also asked whether there whether there was a lack of coordination or a lack of care when it came to behavioral health. Ms. Kelvey-Albert said it was both, particularly in Fairfield County. There is difficulty in making referrals and the practices don't always get information back from those specialists.

Suzanne Lagarde asked how they determine whether practices are engaged and what lessons they have learned to transition more practices to the AMH. Ms. Kelvey-Albert said that from what they have heard and seen, the Advanced Network infrastructure makes a difference. It is hard for independent practices to do this work on top of all of their other responsibilities. It is difficult to transition to advanced primary care without support. Dr. Lagarde asked how they could help those independent practices. Ms. Kelvey-Albert said there needed to be an incentive for them to do it. There are other resources available, such as working with community partners. She said building financial incentives will help push the state along. Dr. Schaefer said that to get beyond those in Advanced Networks, those independent practices will need to hear more from practices that have made the transition. Dr. McLean noted that CMMI's Comprehensive Primary Care Plus initiative will provide a large influx of funding for this work and have an impact.

Operational Plan for Year 2

Jenna Lupi, provided an overview of the Operational Plan for Year 2. The work streams discussed included the Advanced Medical Home program, the Community and Clinical Integration Program, Value Based Insurance Design, and Population Health.

Faina Dookh provided an overview of the AMH plan. Thomas Woodruff noted that there is a parallel process going on in the commercial market that is not reflected and said they need to coordinate the AMH with what is going on in the commercial marketplace. Ms. Lash said that the commercial payers are represented on the Practice Transformation Task Force and that they have indicated they are using more shared savings contracts. She added that all of the work needs to come together so that the state has money to pay for these initiatives. Ms. Dookh indicated that she could update the presentation to show how the entire state will move towards alternative payment models.

Dr. Lagarde asked whether Federally Qualified Health Centers could not participate in CCIP. Ms. Dookh said that FQHCs that are affiliated with the Community Health Center Association of CT could not participate because they fall under the Practice Transformation Network Grant. Any FQHCs not affiliated with the Practice Transformation Network Grants can participate in CCIP.

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Ms. Veltri informed the Committee about the Better Health Conference on June 3rd at Foxwoods Casino. Mr. Beadle noted that the Consumer Advisory Board is sponsoring a Rural Healthcare

Forum in northwestern Connecticut that day. There is also a Behavioral Health Listening Session scheduled for May $19^{\rm th}$ in Bridgeport.

Motion: to adjourn – Robert McLean; seconded by Jan VanTassel. The meeting adjourned at 5:03 p.m.