

VT Health Care Innovation Project Population Health Work Group Work Plan

Objectives	Tasks	Timeline/ Due	Responsible Parties	Approve/ Endorse	Status	Comments
Develop Population Health Plan (CDC/CMMI)	Develop outline for a population health plan that is project wide and not just for the PHWG Draft work plan for the Population Health Work Group based on plan	Year One Q3 - Q4 Year Two Q1 - Q2	Heidi	Steering (Georgia)	Aug 2014 mtg. initial review by Pop Health Work Group Need to develop mechanism for consideration for entire project	
Develop shared understanding of factors contributing to population health outcomes	Define "population health" Share frameworks for identifying the major contributors to population health Create materials that show connection between social determinants, population health and clinical measures Seek common definition throughout the project and by all work groups	Year One Year Two Q1	PHWG (Heidi) DLTSS (Julie + Erin) Care Models (Erin + Pat) Payment Models (Richard and Kara)	PHWG Steering (Georgia)	Completed for PHWG <ul style="list-style-type: none"> Definition adopted Socio-ecological framework adopted Shared with QPM Share Pop Health 101 materials with other work groups	Definitions and principles adopted by PHWG. Need to share through other project work groups and Steering Committee. Steering Committee to review and offer feedback before finalized as underpinning for Accountable Health Community
	Share core concepts and outline with all work groups and Steering Committee	Year Two Q1	Heidi w/staff from other work groups	Steering (Georgia)		
	Develop work plan to ensure collection of information, exploration of topics, etc. Collect and organize materials	Year Two Q1	Heidi for PHWG Georgia for integrated work plans	Steering (Georgia)		

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Measures Develop consensus on population health measures	Collect existing sets of "population health" measures currently used in VT, CDC and/or by CMMI,	Year One Year Two Q1	PHWG (Heidi) Heidi, Pat and Alicia	PHWG	Initial identification of set completed On-going collection of Year One data	
	Create plan to ensure tracking on performance related to core measures from CMMI (obesity, tobacco and diabetes)	Year Two Q1	Heidi, Pat and Alicia	Steering Committee		Need to bring measures to QPM work group and Steering Committee for inclusion in Year 3 measures
	Review current process for selecting ACO (Medicare) measures and preliminary set for expanded ACO (Medicaid and commercial insurers) in 2014	Year One Year Two	Pat Jones Pat Jones		Completed	
	Recommend appropriate set of measures for ACOs for Years Two and Three	Year One Year Two	 Heidi, Pat, Alicia and Georgia	 QPM Steering	Completed Year One <ul style="list-style-type: none"> Criteria for selection of measures adopted Measures recommended Measures adopted/approved Year Two <ul style="list-style-type: none"> Focus on 3 areas required by CMMI (obesity, tobacco and diabetes) 	
	Identify and support integration of population health measures for other models being tested and other delivery system reforms					
	Work with evaluation team to integration population health measures in project evaluation	Year Two Q1	Annie P	Steering?		

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Payment Models	Review of current payment models Share population health frameworks with Payment Models Work Group	Year Two Q1 PHWG to PM PM to PHWG	Richard , Kara and Amanda		Invite work group c-chairs or staff to provide presentation	
Episodes of Care	<ul style="list-style-type: none"> Review model being tested Analyze strengths and limitations in integration of population health Identify best lever and strategy to include payment for and/or activity related to population health 	Year Two Q2	Kara, Richard and Mandy			Review 23 episodes (high utilization and high variation); compare with pop-based data and risk/protective factors; prioritize preventable health outcomes
Pay for Performance (P4P)	<ul style="list-style-type: none"> Review model being tested Analyze strengths and limitations in integration of population health Identify best strategy to include payment for and/or activity related to population health 	Dec 2014 Invite Craig Jones	Kara Suter Prevention Institute		Not expanding beyond Blue Print this year. See Care Models below.	Blueprint may be one component of foundational model for Accountable Health Community
Shared Savings/ACOs	<ul style="list-style-type: none"> Review model being tested Recommend criteria and measures Identify how savings can be shared w/pop health prevention partners Analyze strengths and limitations in integration of population health 		Kara Suter OneCare CHAC Green Mtn.		Georgia provided a quick overview at the Oct 2013 meeting	Create overview of ACO, TACO and AHC Identify features that address principles for integrating population health and primary prevention
Financing Options paying for prevention	Identify promising financing vehicles that promote financial investment in population health interventions	Year Two Q2	Jim Hester			
	Produce analytics on the options being explored in other communities and nationally; conduct SWOT in Vermont		Jim			
	Provide recommendations to other VHCIP committees to consider link with payment models being tested	Year Two, Q3	Jim, Heidi, Kara, Richard and Mandy			

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Care Models	Identify opportunities to include population health and broad range of community prevention partners in delivery models	July 2014	Blueprint NVRH Mt. Ascutney		Initial presentation at July 2014 meeting	Need to develop matrix of existing care models and features for improving population health
	Share population health frameworks with Care Models Work Group	Year One	Co-Chairs		Completed	
	Explore options to build upon Blueprint delivery system <ul style="list-style-type: none"> • How best build on CHT Structure? • Look at strengths of “Integrated Health Team” Consider a whole family approach • Addressing root causes and community at large 	Dec 2014 Invite Craig Jones (BP) and leaders from 3 ACOs			Consider Regional Care Mgmt proposal Identify opportunities to include primary prevention and community at large	
	Review ACO system of care		OneCare CHAC Green Mtn.		Identify opportunities to include population health in innovations tested	
	Care Models Integrated Community Learning Collaborative	Nov 2013 Year 2 Qtr1	Heidi, Pat and Erin	CMCM work group	Identify PHWG members in 3 learning communities Link Health Dept District Office in 3 communities	
	Review recipients of Provider Grants for opportunities to include pop health	Year 2 Qtr1	Heidi, Pat and Erin		Provide additional technical support to St. Albans Review the Brattleboro application	
	Review other innovations for systems of care for population health – other SIM states, IOM Population Health, etc.					

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Accountable Community for Health	Examine models that connect payment models & system of care for population health improvement Review theoretical models of community health systems to improve population health	Year One	PHWG		October presentation on TACOs by CHCS November presentation by WA State Innovation Project	
	Look at examples <u>outside Vermont</u> for promising practices of the integration of integration of clinical care, mental and behavioral health, and primary prevention	Year One Q4 - Year Two Q2	Prevention Institute	PHWG		
	Identify <u>Vermont exemplars</u> : community integration of clinical care, mental and behavioral health, and primary prevention	Year One Q4 - Year Two Q2	Prevention Institute	PHWG		
	Share models of integration to improve population health outcomes with communities interested in testing out change	Year Two Q3	Prevention Institute	PHWG		
	Share the work with other VHCIP committees to consider link with payment and care models being tested in VT	Year Two Q3	Co-chairs	Other work groups		