QPM Work Group Agenda 10-27-14

VT Health Care Innovation Project
Quality and Performance Measures Work Group Meeting Agenda

October 27, 2014; 10:00 AM to 12 Noon
Pavilion Building 4th Floor Conference Room, Montpelier, VT
Call-In Number: 1-877-273-4202 Passcode: 420323867

Item #	Time Frame	Topic	Relevant Attachments	Decision Needed?
1	10:00-10:05	Welcome and Introductions; Approval of Minutes	Attachment 1a – August QPM Minutes Attachment 1b – September QPM Minutes	YES – Approval of Minutes
2	10:05-10:20	Updates • Year 2 ACO Shared Savings Program Measures Review Process • Processes for Reviewing: o Targets and Benchmarks o Gate and Ladder Methodology ***Public Comment***		
3	10:20-11:10	ACO Improvement Efforts Related to Medicare and Vermont Commercial/Medicaid Shared Savings Program Measures (Health*first* and CHAC) ***Public Comment***	Attachment 3a – Health*first* Presentation Attachment 3b – CHAC Presentation (these attachments will be sent when available)	
4	11:10-11:30	Revised QPM Work Plan ***Public Comment***	Attachment 4 – Revised QPM Work Plan	
5	11:30-11:55	Year 1 Measure Reporting ***Public Comment***		
6	11:55-12:00	Next Steps, Wrap-Up and Future Meeting Schedule		

Attachment 1a - QPM Minutes 8-25-14

VT Health Care Innovation Project
Quality & Performance Measures Work Group Meeting Minutes

Date of meeting: August 25, 2014, 9:30 am-12 pm, 4th Floor Conf. Room, Pavilion Building, Montpelier.

Agenda Item	Discussion	Next Steps
1. Welcome and Introductions; Approval of Minutes	Cathy Fulton called the meeting to order at 10:02 am. Georgia Maheras performed the member attendance roll call (please see attached attendance sheet). Heather Skeels moved to approve the minutes and Aaron French seconded. There was no further discussion and the motion carried with four abstentions.	
2. Updates: ACO attribution, Alignment of Blueprint and ACO measure results, Other payment models	Pat Jones discussed the ACO attribution estimates: 65,691 attributed lives for Medicare (across all three ACOs) 34,500 attributed lives for commercial/BCBSVT (across all three ACOs) 50,000 attributed lives for Medicaid (across two participating ACOs) The GMCB has not taken action on the issue of whether OBGYNs will serve as a source of attributed patients. This will continue to be a topic of discussion for future program years. Pat provided information on integration of Blueprint & ACO Measures: - The GMCB and the Blueprint are having discussions about how best to integrate claims-based ACO measures into practice and HSA-level profiles. - Meetings are taking place at the leadership level and to be completed by the end of August. Goal is to align information where possible. - Blueprint profiles do not currently include measures related to chart review or all of the measures used for payment. Measures are reported to provide information for practice-level decision making. Georgia provided an update on other payment models:	

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	Pay for Performance: Due to the rescission, the funds for the Pay for Performance program are no longer in Medicaid's budget. Episodes of Care: Payment Models work group received a presentation on Medicaid data and contractors are currently loading commercial data. More information will be discussed at the next meeting. Paul Harrington noted that as a provision of the ACA, primary care providers were paid Medicare rates for Medicaid services in 2013 and 2013. As this provision will not be in place for 2015, VMS has requested that Medicaid funds be used to backfill this difference in reimbursement rates. Paul asked Georgia to look in to the availability of information related to this request.	**Georgia will follow up with administration to see if there are updates on this request.**

3. Year 2 and Commercial ACO Shared Savings Measures	At the Steering Committee's request (and a request from BCBSVT), the group discussed the feasibility of using patient experience survey measures for Payment in Year 2, and reviewed the written comments relating to Year 2 measures. The group also reviewed measures in the pending category that were not voted on in the July meeting. The Steering Committee's final decision on measures for Year 2 will be made Sept. 3, 2014.
	
	Attachment 3a is a presentation given to the Steering Committee, and has since been updated with new summary slides.
	
	Attachment 3b includes a summary of organizational positions by measure
	- Vote of QPM work group at July 29th meeting and a summary of comments
	- Includes measures that were not reviewed and/or voted on in this work group
	- New Requests:
	  o BCBSVT asked that the patient experience composites be removed from reporting to payment in Year 2
	  o Dr. Peter Reed asked QPM to include measures around social determinants of health
	  o VDH asked that all measures be considered that group did not have time to vote on at the previous meeting
	
	Attachment 3c includes a summary of comments received by organization or individual.
	
	Attachment 3d includes the full text of all comments submitted to the Steering Committee. This was not printed for the meeting but was included in the meeting materials shared electronically.
	
	<u>Patient Experience Survey:</u>	

Agenda Item	Discussion	Next Steps
	- The SIM grant is funding the patient experience survey. Recommendation to use the survey already being used by the Blueprint PCMHs to avoid confusion and reduce administrative burden. - Last year 27,000 adult and child surveys went out and they expect something similar this year. - Response rate is about 30%. Surveys are sent in a two wave mailing. - This is a sample population survey. Not all practices will participate. - For example, Fletcher Allen practices field a different visit-based survey (CG CAHPS). It has similar questions, and FAHC will add custom questions, but we can't bundle their results with the results of the annual PCMH CAHPS. - Medicare is fielding a survey for their Shared Savings Program (lengthy, questions more relevant to Medicare population). It is possible for patients to receive multiple surveys but not likely. - There are two composites (including the proposed DLTSS composite) that consist of custom questions that will not have national benchmarks now; we are working with the survey vendor to investigate availability of national benchmarks for the other 8 composites that are not based on custom questions. - Survey will roll out to practices in a phased approach and needs to be fielded for 45 days. Raw survey results will be delivered to the practices within a few weeks after the survey closes. - The survey will be fielded annually for each practice, in the same month every year. - The majority of ACOs' PCPs need to participate in this survey but 100% participation was not required. The Steering Committee asked the work group to considering moving these measures from reporting to payment in Year 2. The group discussed and agreed that there is not yet enough information available as to what the response rate will be and whether the participating practices' populations will be representative of the Medicaid and Commercial ACO populations. The group agreed that these measures should be given priority consideration for Year 3 when information from the first year is available. Preliminary results from the survey will be available soon and discussions can begin at that time regarding to the feasibility of moving these measures to Payment. <u>Pending Measures:</u> Pending measures that were proposed for promotion but were not voted on by QPM during the July meeting were discussed: <u>Controlling Blood Pressure:</u> VDH requested inclusion in the Reporting Measure set, noting this is a key indicator in chronic disease prevention. The concern is that patients are being over-managed/medicated	

Agenda Item	Discussion	Next Steps
	because of current clinical guidelines. As guidelines are changing, the measure specifications are likely to change as well. The group discussed and agreed this measure is a high priority but is best left in Pending until clinical guidelines are revised. Diane Leach moved that all pending measures be reviewed in the Year 3 measures discussion. Paul Reiss seconded. The motion was tabled to continue the discussion of additional Pending measures. <u>Care Transition Record Transmission:</u> The rationale to keeping this in Pending is there are no current benchmarks or experience collecting the measure in Vermont. Transferring of records between certain providers is not something that can easily be achieved at present given federal laws (42CFR Part 2). This also poses a burden for practices where Electronic Health Records (EHRs) are not currently in use, or where electronic records are primarily used for charting (e.g. SNFs). The HIE work group is working on enhancing record transmission capability with a Universal Transfer Form. <u>Transition Record with Specified Elements Received by Discharged Patients:</u> The group discussed and acknowledged that this is an important measure but because the information would not flow through claims it may be difficult to track. The work group discussed alternate strategies for addressing patient engagement in the care process: - Measure the delivery of follow-up care that happens after discharge - Measure patient understanding of discharge instructions via a patient experience survey The group re-visited Diane's motion wherein all pending measures will be considered for priority review in the next year. A roll call vote was taken by Georgia and the motion carried unanimously.	
4. Targets and Benchmarks for Year 2 Payment Measures	This topic will be reviewed at the next meeting.	
5. Updates on Clinical Data Collection	This topic will be reviewed at the next meeting.	
6. Next Steps, Wrap up, and Future Meeting Schedule	**Next meeting:** Monday, September 22, 2014, 10 am-12 pm, 4th Floor Conf. Room, Pavilion Building, Montpelier.	

VHCIP QPM Work Group Attendance List 8-25-14

C	Chair
IC	Interim Chair
M	Member
MA	Member Alternate
A	Assistant
S	Staff
X	Interested Party

First Name	Last Name		Title	Organization	QPM
Peter	Albert			Blue Cross Blue Shield of Vermont	MA
April	Allen		Director of Policy and Planning	AHS - DCF	X
Bill	Ashe		Executive Director	Upper Valley Services	X
Ena	Backus			GMCB	X
Michael	Bailit			Bailit-Health Purchasing	X
Susan	Barrett		Executive Director	GMCB	X
Jaskanwar	Batra			DMH	M
Kate	Bazinsky			Bailit-Health Purchasing	X
Charlie	Biss			AHS - Central Office - IFS	X
Catherine	Burns		Director of Quality for Mental Health	HowardCenter for Mental Health	M
Deb	Chambers			MVP Health Care	M
Amanda	Ciecior		Health Policy Analyst	AHS - DVHA	S
Peter	Cobb		Executive Director	VNAs of Vermont	X
Connie	Colman		Quality Improvement Director	Central Vermont Home Health and Hospi	M
Amy	Coonradt		Health Policy Analyst	AHS - DVHA	X
Amy	Cooper		Executive Director	Accountable Care Coalition of the Green	M
Alicia	Cooper	ALC	Quality Oversight Analyst	AHS - DVHA	S
Jude	Daye			Blue Cross Blue Shield of Vermont	A
Yvonne	DePalma		Senior Director of Centralized Suppor	Planned Parenthood of Northern New En	M
Robin	Edelman	Robin Edelman	Health Systems Program Administrat	AHS - VDH	X
Audrey	Fargo		Administrative Assistant	Vermont Program for Quality in Health Ca	A
Aaron	French		Deputy Commissioner	AHS - DVHA	M
Catherine	Fulton	C Fulton	Executive Director	Vermont Program for Quality in Health Ca	C/M
Joyce	Gallimore	Joyce G.	Director, Community Health Payment	BI State Primary Care/CHAC	M
Lucie	Garand		Senior Government Relations Special	Downs Rachlin Martin PLLC	X
Christine	Geiler		Grant Manager & Stakeholder Coord	GMCB	S
Bryan	Hallett				X
Paul	Harrington	PCH	President	Vermont Medical Society	M
Kathleen	Hentcy		Health Care Integration Liaison	DMH	X

Bard	Hill		Director - Policy, Planning & Data Uni	AHS - DAIL	X
Craig	Jones		Director	AHS - DVHA - Blueprint	X
Pat	Jones			GMCB	S/M
Frances	Keeler		Director	AHS - DAIL	M
Heidi	Klein		Heidi Klein	AHS - VDH	M
Kelly	Lange		Director of Provider Contracting	Blue Cross Blue Shield of Vermont	X
Patricia	Launer		Clinical Quality Improvement Facilitat	Bi-State Primary Care	MA
Diane	Leach	Diane M Leach	VP Quality	Northwestern Medical Center	M
Diane	Lewis			AOA - DFR	A
Deborah	Lisi-Baker		Disability Policy Expert	Unknown	X
Vicki	Loner		Director of Quality and Care Manage	OneCare Vermont	M
Nicole	Lukas		Cancer & Cardiovascular Disease Pre	AHS - VDH	X
Georgia	Maheras			AOA	S
David	Martini			AOA - DFR	M
Marybeth	McCaffrey		Principal Health Reform Administrato	AHS - DAIL	X
Kim	McClellan		Director of Quality Improvement	Northwest Counseling and Support Servic	X
Richard	McCoy			AHS - VDH	X
Kate	McIntosh		Medical Director	Vermont Information Technology Leaders	M
Kimberly	McNeil		Payment Reform Policy Intern	AHS - DVHA	X
Darcy	McPherson		Program Technician	AHS - DVHA	X
Jessica	Mendizabal			AHS - DVHA	S
Robin	Miller			AHS - VDH	MA
Anna	Noonan		Vice President	Jeffords Institute for Quality, FAHC	M
Susan	Onderwyzer		Quality & Care Management Director	AHS - DMH	M
Annie	Paumgarten	Annie Paumgarten	Evaluation Director	GMCB	X
Laura	Pelosi		Executive Director	Vermont Health Care Association	C/M
Luann	Poirer		Administrative Services Manager I	AHS - DVHA	X
Betty	Rambur		Board Member	GMCB	X
Allan	Ramsay		Board Member	GMCB	X
Paul	Reiss		Executive Director,	Accountable Care Coalition of the Green	M
Lila	Richardson	Lila Richardson	Attorney	VLA/Health Care Advocate Project	M
Jenney	Samuelson	✓	Assistant Director of Blueprint for He	AHS - DVHA - Blueprint	X
Rachel	Seelig	Rachel Seelig	Attorney	VLA/Senior Citizens Law Project	M
Julia	Shaw		Health Care Policy Analyst	VLA/Health Care Advocate Project	MA
Kate	Simmons		Director, VT Operations	Bi-State Primary Care/CHAC	MA
Colleen	Sinon		VP of Quality Programs	Northeastern Vermont Regional Hospital	X
Shawn	Skaflestad	SS	Quality Improvement Manager	AHS - Central Office	M

Heather	Skeels		Project Manager	Bi-State Primary Care	M
Richard	Slusky		Payment Reform Director	GMCB	MA
Joe	Smith			MVP Health Care	MA
Jennifer	Stratton			Lamolle County Mental Health Services	M
Kara	Suter		Reimbursement Director	AHS - DVHA	X
Julie	Tessler		Executive Director	Vermont Council of Developmental and M	X
Cynthia	Thomas			AHS - DVHA	MA
Win	Turner				X
Teresa	Voci				X
Nathaniel	Waite			VDH	X
Anya	Wallack		Chair	SIM Core Team Chair	X
Marlys	Waller			Vermont Council of Developmental and M	X
Norm	Ward		Medical Director	OneCare Vermont	MA
Julie	Wasserman	JW	VT Dual Eligible Project Director	AHS - Central Office	X
Monica	Weeber			AHS - DOC	M
Robert	Wheeler		Vice President & CMO	Blue Cross Blue Shield of Vermont	M
Bradley	Wilhelm		Senior Policy Advisor	AHS - DVHA	X
Jennifer	Woodard		Long-Term Services and Supports He	AHS - DAIL	X
Cecelia	Wu		Healthcare Project Director	AHS - DVHA	X
Dave	Yacovone		Commissioner	AHS - DCF	X
Mike	Maslack				X
Catalina	Piedrahita	CP	Public Hlth Advisor	VDH / CDC	

VHCIP QPM Member Roll Call

C	Chair
IC	Interim Chair
M	Member
MA	Member Alternate
A	Assistant
S	Staff
X	Interested Party

Attendance
plus emails to Chrissy
plus attendance sheet

First Name	Last Name			Title	Organization	QPM
Amy	Cooper	X		Executive Director	Accountable Care Coalition of the Green Mountains	M
Paul	Reiss	X	Arrived at 10:08 am	Executive Director,	after minutes Accountable Care Coalition of the Green Mountains	M
Shawn	Skaflestad	✓		Quality Improvement Manager	AHS - Central Office	M
Frances	Keeler	✓		Director	AHS - DAIL	M
~~Susan~~ Dr.	~~Underwood~~ Batra-	X		Quality & Care Management Director	AHS - DMH	M
Monica	Weeber	X			AHS - DOC	M
Aaron	French	✓		Deputy Commissioner	AHS - DVHA	M
Cynthia	Thomas	X			AHS - DVHA	MA
Heidi	Klein	✓			AHS - VDH	M
Robin	Miller	X			AHS - VDH	MA
David	Martini	X			AOA - DFR	M
Patricia	Launer	X		Clinical Quality Improvement Facilitat	Bi-State Primary Care	MA
Heather	Skeels	✓		Project Manager	Bi-State Primary Care	M
Joyce	Gallimore	✓		Director, Community Health Payment	Bi-State Primary Care/CHAC	M
Kate	Simmons	X		Director, VT Operations	Bi-State Primary Care/CHAC	MA
Peter	Albert	X			Blue Cross Blue Shield of Vermont	MA
Robert	Wheeler	X		Vice President & CMO	Blue Cross Blue Shield of Vermont	M
Connie	Colman	✓ ~~X~~ →	Peter Cobb MA	Quality Improvement Director	Central Vermont Home Health and Hospice	M
Jaskanwar	Batra	X			DMH	M
Pat	Jones	✓			GMCB	S/M
Richard	Slusky	X		Payment Reform Director	GMCB	MA
Catherine	Burns	X		Director of Quality for Mental Health	HowardCenter for Mental Health	M
Anna	Noonan	X		Vice President	Jeffords Institute for Quality, FAHC	M
Jennifer	Stratton	X			Lamoille County Mental Health Services	M
Deb	Chambers	X			MVP Health Care	M
Joe	Smith	X			MVP Health Care	MA
Diane	Leach	✓		VP Quality	Northwestern Medical Center	M

Vicki	Loner	X		Director of Quality and Care Manager	OneCare Vermont	M
Norm	Ward	✓		Medical Director	OneCare Vermont	MA
Yvonne	DePalma	X		Senior Director of Centralized Suppor	Planned Parenthood of Northern New England	M
Laura	Pelosi	✓		Executive Director	Vermont Health Care Association	C/M
Kate	McIntosh	X		Medical Director	Vermont Information Technology Leaders	M
Paul	Harrington	✓		President	Vermont Medical Society	M
Catherine	Fulton	✓		Executive Director	Vermont Program for Quality in Health Care	C/M
Lila	Richardson	✓		Attorney	VLA/Health Care Advocate Project	M
Julia	Shaw	X		Health Care Policy Analyst	VLA/Health Care Advocate Project	MA
Rachel	Seelig	✓		Attorney	VLA/Senior Citizens Law Project	M

Minutes

1° Heather Skeels
2° Aaron French

VHCIP QPM Member Roll Call

C	Chair
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MA	Member Alternate
A	Assistant
S	Staff
X	Interested Party

First Name	Last Name		Title	Organization	QPM
Amy	Cooper X		Executive Director	Accountable Care Coalition of the Green Mountains	M
Paul	Reiss X		Executive Director,	Accountable Care Coalition of the Green Mountains	M
Shawn	Skaflestad	A	Quality Improvement Manager	AHS - Central Office	M
Frances	Keeler	✓	Director	AHS - DAIL	M
Susan	Onderwyzer		Quality & Care Management Director	AHS - DMH	M
Monica	Weeber			AHS - DOC	M
Aaron	French	✓	Deputy Commissioner	AHS - DVHA	M
Cynthia	Thomas			AHS - DVHA	MA
Heidi	Klein	✓		AHS - VDH	M
Robin	Miller			AHS - VDH	MA
David	Martini			AOA - DFR	M
Patricia	Launer		Clinical Quality Improvement Facilitat	Bi-State Primary Care	MA
Heather	Skeels	✓	Project Manager	Bi-State Primary Care	M
Joyce	Gallimore	✓	Director, Community Health Payment	Bi-State Primary Care/CHAC	M
Kate	Simmons		Director, VT Operations	Bi-State Primary Care/CHAC	MA
Peter	Albert			Blue Cross Blue Shield of Vermont	MA
Robert	Wheeler		Vice President & CMO	Blue Cross Blue Shield of Vermont	M
~~Connie~~	Peterlobb Colman	A	Quality Improvement Director	Central Vermont Home Health and Hospice	M
Jaskanwar	Batra			DMH	M
Pat	Jones	✓		GMCB	S/M
Richard	Slusky		Payment Reform Director	GMCB	MA
Catherine	Burns		Director of Quality for Mental Health	HowardCenter for Mental Health	M
Anna	Noonan		Vice President	Jeffords Institute for Quality, FAHC	M
Jennifer	Stratton			Lamoille County Mental Health Services	M
Deb	Chambers			MVP Health Care	M
Joe	Smith			MVP Health Care	MA
Diane	Leach	✓	VP Quality	Northwestern Medical Center	M

Vicki	Loner		Director of Quality and Care Manager	OneCare Vermont	M
Norm	Ward	✓	Medical Director	OneCare Vermont	MA
Yvonne	DePalma		Senior Director of Centralized Suppor	Planned Parenthood of Northern New England	M
Laura	Pelosi	A	Executive Director	Vermont Health Care Association	C/M
Kate	McIntosh		Medical Director	Vermont Information Technology Leaders	M
Paul	Harrington	✓	President	Vermont Medical Society	M
Catherine	Fulton	✓	Executive Director	Vermont Program for Quality in Health Care	C/M
Lila	Richardson	✓	Attorney	VLA/Health Care Advocate Project	M
Julia	Shaw		Health Care Policy Analyst	VLA/Health Care Advocate Project	MA
Rachel	Seelig	A	Attorney	VLA/Senior Citizens Law Project	M

Motion: All pending meas be put on priority for disc for next year.

review everything on the pending meas. list

1° Diane

2° Paul

VHCIP QPM Member Roll Call

C	Chair
IC	Interim Chair
M	Member
MA	Member Alternate
A	Assistant
S	Staff
X	Interested Party

First Name	Last Name		Title	Organization	QPM
~~Amy~~	~~Cooper~~		Executive Director	Accountable Care Coalition of the Green Mountains	M A
Paul	Reiss	✓	Executive Director,	Accountable Care Coalition of the Green Mountains	M
Shawn	Skaflestad	✓	Quality Improvement Manager	AHS - Central Office	M
Frances	Keeler	✓	Director	AHS - DAIL	M
~~Susan~~	~~Onderwyzer~~		Quality & Care Management Director	AHS - DMH	M A
~~Monica~~	~~Weeber~~			AHS - DOC	M
Aaron	French	X	Deputy Commissioner	AHS - DVHA	M
~~Cynthia~~	~~Thomas~~			AHS - DVHA	MA
Heidi	Klein	✓		AHS - VDH	M
~~Robin~~	~~Miller~~			AHS - VDH	MA
~~David~~	~~Martini~~			AOA - DFR	M
~~Patricia~~	~~Launer~~		Clinical Quality Improvement Facilitat	Bi-State Primary Care	MA
Heather	Skeels	✓	Project Manager	Bi-State Primary Care	M
Joyce	Gallimore	✓	Director, Community Health Payment	Bi-State Primary Care/CHAC	M
~~Kate~~	~~Simmons~~		Director, VT Operations	Bi-State Primary Care/CHAC	MA
~~Peter~~	~~Albert~~			Blue Cross Blue Shield of Vermont	MA
~~Robert~~	~~Wheeler~~		Vice President & CMO	Blue Cross Blue Shield of Vermont	M
~~Connie~~ Peter	~~Gelman~~ Cobb	✓	Quality Improvement Director	Central Vermont Home Health and Hospice	M
~~Jaskanwar~~	~~Batra~~			DMH	M
Pat	Jones	✓		GMCB	S/M
~~Richard~~	~~Slusky~~		Payment Reform Director	GMCB	MA
~~Catherine~~	~~Burns~~		Director of Quality for Mental Health	HowardCenter for Mental Health	M
~~Anna~~	~~Noonan~~		Vice President	Jeffords Institute for Quality, FAHC	M
~~Jennifer~~	~~Stratton~~			Lamoille County Mental Health Services	M
~~Deb~~	~~Chambers~~			MVP Health Care	M
~~Joe~~	~~Smith~~			MVP Health Care	MA
Diane	Leach	✓	VP Quality	Northwestern Medical Center	M

~~Vicki~~	~~Loner~~		Director of Quality and Care Manager	OneCare Vermont	M
Norm	Ward	X	Medical Director	OneCare Vermont	MA
~~Yvonne~~	~~DePalma~~		Senior Director of Centralized Suppor	Planned Parenthood of Northern New England	M
Laura	Pelosi	✓	Executive Director	Vermont Health Care Association	C/M
~~Kate~~	~~McIntosh~~		Medical Director	Vermont Information Technology Leaders	M
Paul	Harrington	✓	President	Vermont Medical Society	M
Catherine	Fulton	✓	Executive Director	Vermont Program for Quality in Health Care	C/M
Lila	Richardson	✓	Attorney	VLA/Health Care Advocate Project	M
~~Julia~~	~~Shaw~~		Health Care Policy Analyst	VLA/Health Care Advocate Project	MA
Rachel	Seelig	✓	Attorney	VLA/Senior Citizens Law Project	M

Attachment 1b - QPM Minutes 9-22-14

VT Health Care Innovation Project
Quality & Performance Measures Work Group Meeting
Minutes

Date of meeting: September 22, 2014, 10:00 am-12 pm, 4th Floor Conf. Room, Pavilion Building, Montpelier.

Agenda Item	Discussion	Next Steps
1. Welcome and Introductions; Approval of Minutes	Cathy Fulton called the meeting to order at 10:06 am. A roll call attendance was taken. A quorum of voting members was not in attendance; the minutes from the August 25, 2014 meeting will be held for approval until the October 27, 2014 meeting.	
2. Updates	1. Steering Committee and Core Team Discussions of Recommended Measures. a. The Steering Committee voted at their September 3rd meeting to send the measure recommendations without support or opposition to the Core Team. b. Measures are currently under consideration by Core Team. Public comment period closes September 23rd- comments can be directed to Alicia Cooper and Pat Jones. c. After Core Team makes recommendations, the GMCB will consider them—likely in October. 2. Clinical Data Collection, including VITL Gap Analysis. a. Hoping to have a presentation on Gap Analysis scheduled for November. There may be some preliminary discussion of the results at the HIE meeting on Wednesday. 3. GMCB Approved Changes to Measure-Related ACO Shared Savings Program Standards. a. Presentation to GMCB two weeks ago (attachment 2B) which outlines technical changes resulting in no comments or controversy. b. Medicaid's contract language does not include language related to the changes outlined in the attachment. c. The work group was provided with input on the definition of meaningful improvement (attachment 2C).	

Agenda Item	Discussion	Next Steps
	d. This will come to the group for specific discussion later in the year.	
3. Review of Data Submission and Analytics Timeline for Year 1 SSP Measures	Michael Bailit reviewed attachment 3, the timeline which represents when information will be available to the work groups for the first performance year. The effective dates for the performance year preceded the signing dates of the ACO contracts. Granularity of reports to drill down to participants, providers, and institutions: the reports to be prepared by Lewin will not be that granular; reporting will occur at the ACO level. Lewin has the ability to drill down and allow the GMCB and DVHA to request ad-hoc reports but that is not the intention with these reports. The expectation is that the ACOs will perform analysis to understand where the points of improvements for their provider participants. Sampling is for clinical data based measures. The other analyses based on claims are for all attributed lives. For clinical data based measures, Lewin will provide a list of names in January 2015 and ACOs will provide information on quality performance in April 2015. Diane Leach asked for the data to be more at the detailed level when the reports are first generated.	
4. Review of QPM Work Plan/Update on Payment Models	Alicia Cooper reviewed the work plan and noted what has been completed thus far. The work groups have been asked to update the work plans to coincide with the update of the VHCIP Operational Plan. Due to the statewide rescission, funding is no longer available to implement an Episode of Care program during this year, though there may be funding to do so in subsequent years. The work group may still be asked to review measures for an Episode of Care model, but the timing may change depending on overall VHCIP priorities. Paul recommended changing the timelines to reflect that we will only review targets, benchmarks, and the Gate and Ladder methodology once we've received Year 1 results from the analytics contractor. Diane recommended adding a review of measures that were chosen in Year 1 to see if their intended use in the program was achieved. Diane also recommended cataloging the different reporting activities that will be carried out for the ACO SSP. Heidi Klein recommended adding reference to the work group's interaction with the overall VHCIP evaluation work. Annie Paumgarten noted that he evaluation consultant will work directly with QPM work group. At this point it is too early to say what specific tasks will be requested of the work group.	

Agenda Item	Discussion	Next Steps
	Diane asked whether there will be a dashboard for tracking ACO performance over time. Performance will be tracked during the life of the program. Lewin was originally going to develop a baseline for all measures to see how they've changed over time. With BCBS, however, it was not possible to define a baseline population given the limited historical claims data available on beneficiaries obtaining coverage through the exchange. DVHA has been working calculating baseline performance for attributed Medicaid populations and hopes to have that information available in the next few months. Even without baseline performance data, performance can be compared to national benchmarks.	
5. Targets and Benchmarks for Year 2 Payment Measures	Alicia Cooper reviewed the presentation Year 1 Quality Gates & Ladders (attachment 5). Shawn Skaflestad clarified that current performance on Payment measures in Vermont is relatively poor compared to national performance. Paul asked why a '0,2,3' point scale was chosen for measures without national benchmarks (rather than the '1,2,3' point scale used for other measures). Alicia noted that there had been concerns about awarding a point for statistically significant decline in performance relative to a baseline year; for that reason, declines are awarded no points. The work group has been asked to review targets, benchmarks, and the gate and ladder for year 2 once there is a better idea for what the measure set will look like. Recommendations will go to the Payment Models work group for further consideration. Concerns were expressed that Year 1 baseline data will be unavailable when beginning the Year 2 discussion. Delaying the discussion until that time would likely need Steering Committee and Core Team approval, and it would likely affect the amendments to the ACO contracts for Year 2. The work group will have additional discussion on this topic at the October meeting. The group will need clarification around the specific tasks to be undertaken at that time. More information will be available after the Core Team and GMCB make their final decisions at their upcoming meetings. Inquiries were made about validation processes for program measures. There is a provision that allows for an audit check of the ACOs' self-reported clinical measures; there is also a process for addressing concerns about the accuracy of Lewin's calculation of the claims based measures being used for payment. Additional concerns were noted about the accuracy of quality information that could be collected via claims (rather than by record abstraction).	

Agenda Item	Discussion	Next Steps
6. Next Steps, Wrap up, and Future Meeting Schedule	**Next meeting:** Monday, October 27, 2014, 10 am-12 pm, 4th Floor Conf. Room, Pavilion Building, Montpelier.	

VHCIP QPM Work Group Attendance List 9-22-14

C	Chair
IC	Interim Chair
M	Member
MA	Member Alternate
A	Assistant
S	Staff
X	Interested Party

First Name	Last Name		Title	Organization	QPM
Peter	Albert			Blue Cross Blue Shield of Vermont	MA
April	Allen		Director of Policy and Planning	AHS - DCF	X
Bill	Ashe		Executive Director	Upper Valley Services	X
Ena	Backus			GMCB	X
Michael	Bailit			Bailit-Health Purchasing	X
Susan	Barrett		Executive Director	GMCB	X
Jaskanwar	Batra			AHS - DMH	M
Kate	Bazinsky			Bailit-Health Purchasing	X
Charlie	Biss			AHS - Central Office - IFS	X
Catherine	Burns	CB	Director of Quality for Mental Health	HowardCenter for Mental Health	M
Deb	Chambers			MVP Health Care	M
Amanda	Ciecior		Health Policy Analyst	AHS - DVHA	S
Peter	Cobb		Executive Director	VNAs of Vermont	X
Connie	Colman		Quality Improvement Director	Central Vermont Home Health and Hospi	M
Amy	Coonradt		Health Policy Analyst	AHS - DVHA	X
Amy	Cooper		Executive Director	Accountable Care Coalition of the Green	M
Alicia	Cooper	ALC	Quality Oversight Analyst	AHS - DVHA	S
Jude	Daye			Blue Cross Blue Shield of Vermont	A
Yvonne	DePalma		Senior Director of Centralized Suppor	Planned Parenthood of Northern New En	M
Rick	Dooley				X
Robin	Edelman		Health Systems Program Administrat	AHS - VDH	X
Audrey	Fargo		Administrative Assistant	Vermont Program for Quality in Health C	A
Aaron	French		Deputy Commissioner	AHS - DVHA	M
Catherine	Fulton		Executive Director	Vermont Program for Quality in Health C	C/M
Joyce	Gallimore		Director, Community Health Paymen	Bi-State Primary Care/CHAC	M
Lucie	Garand		Senior Government Relations Special	Downs Rachlin Martin PLLC	X
Christine	Geiler		Grant Manager & Stakeholder Coord	GMCB	S
Bryan	Hallett				X

VHCIP QPM Work Group Roll Calls 9-22-14

√ = Yes

C	Chair
M	Member
MA	Member Alternate

Member		Member Alternate		Minutes Approval			
First Name	**Last Name**						**Organization**
Jaskanwar	Batra	Kathy		√			AHS - DMH
Catherine	Burns			√			HowardCenter for Mental Health
Deb	Chambers	Joe	Smith				MVP Health Care
Connie	Colman						Central Vermont Home Health and Hospice
Amy	Cooper						Accountable Care Coalition of the Green Mountains
Yvonne	DePalma						Planned Parenthood of Northern New England
~~Aaron~~	~~French~~	Cynthia	Thomas	√			AHS - DVHA
Catherine	Fulton			√			Vermont Program for Quality in Health Care
Joyce	Gallimore	Kate	Simmons				Bi-State Primary Care/CHAC
Paul	Harrington			√			Vermont Medical Society
~~Pat~~	~~Jones~~	Richard	Slusky				GMCB
~~Frances~~	~~Keeler~~	Bard	Hill	√			AHS - DAIL
Heidi	Klein	Robin	Miller				AHS - VDH
Diane	Leach						Northwestern Medical Center
Vicki	Loner	Norm	Ward	√			OneCare Vermont
David	Martini						AOA - DFR
Kate	McIntosh						Vermont Information Technology Leaders
Anna	Noonan						Jeffords Institute for Quality, FAHC
~~Laura~~	~~Pelosi~~						Vermont Health Care Association
Paul	Reiss						Accountable Care Coalition of the Green Mountains
Lila	Richardson	Julia	Shaw	√			VLA/Health Care Advocate Project
Rachel	Seelig			√			VLA/Senior Citizens Law Project
Shawn	Skaflestad			√			AHS - Central Office
Heather	Skeels	Patricia	Launer	√			Bi-State Primary Care
Jennifer	Stratton						Lamoille County Mental Health Services
Monica	Weeber						AHS - DOC
Robert	Wheeler	Peter	Albert				Blue Cross Blue Shield of Vermont – Theresa

27 Theresa Voci - BCBS

12 present

Paul	Harrington	PCH	President	Vermont Medical Society	M
Kathleen	Hentcy		Health Care Integration Liaison	DMH	X
Bard	Hill		Director - Policy, Planning & Data Uni	AHS - DAIL	MA
Craig	Jones		Director	AHS - DVHA - Blueprint	X
Pat	Jones			GMCB	S/M
Frances	Keeler		Director	AHS - DAIL	M
Heidi	Klein	Heidi Klein		AHS - VDH	M
Kelly	Lange		Director of Provider Contracting	Blue Cross Blue Shield of Vermont	X
Patricia	Launer		Clinical Quality Improvement Facilita	Bi-State Primary Care	MA
Diane	Leach	DML	VP Quality	Northwestern Medical Center	M
Diane	Lewis			AOA - DFR	A
Deborah	Lisi-Baker		Disability Policy Expert	Unknown	X
Vicki	Loner		Director of Quality and Care Manager	OneCare Vermont	M
Nicole	Lukas		Cancer & Cardiovascular Disease Prev	AHS - VDH	X
Georgia	Maheras			AOA	S
David	Martini			AOA - DFR	M
Mike	Maslack				X
Kim	McClellan		Director of Quality Improvement	Northwest Counseling and Support Servic	X
Richard	McCoy			AHS - VDH	X
Kate	McIntosh		Medical Director	Vermont Information Technology Leader	M
Kimberly	McNeil		Payment Reform Policy Intern	AHS - DVHA	X
Darcy	McPherson		Program Technician	AHS - DVHA	X
Jessica	Mendizabal			AHS - DVHA	S
Robin	Miller			AHS - VDH	MA
Anna	Noonan		Vice President	Jeffords Institute for Quality, FAHC	M
Annie	Paumgarten		Eveluation Director	GMCB	X
Laura	Pelosi		Executive Director	Vermont Health Care Association	C/M
Luann	Poirer		Administrative Services Manager I	AHS - DVHA	X
Betty	Rambur		Board Member	GMCB	X
Allan	Ramsay		Board Member	GMCB	X
Paul	Reiss		Executive Director,	Accountable Care Coalition of the Green	M
Lila	Richardson	Lila Richardson	Attorney	VLA/Health Care Advocate Project	M
Jenney	Samuelson		Assistant Director of Blueprint for He	AHS - DVHA - Blueprint	X
Rachel	Seelig	[illegible]	Attorney	VLA/Senior Citizens Law Project	M
Julia	Shaw	[illegible]	Health Care Policy Analyst	VLA/Health Care Advocate Project	MA
Kate	Simmons		Director, VT Operations	Bi-State Primary Care/CHAC	MA

Colleen	Sinon		VP of Quality Programs	Northeastern Vermont Regional Hospital	X
Shawn	Skaflestad		Quality Improvement Manager	AHS - Central Office	M
Heather	Skeels		Project Manager	Bi-State Primary Care	M
Richard	Slusky		Payment Reform Director	GMCB	MA
Joe	Smith			MVP Health Care	MA
Jennifer	Stratton			Lamoille County Mental Health Services	M
Kara	Suter		Reimbursement Director	AHS - DVHA	X
Julie	Tessler		Executive Director	Vermont Council of Developmental and M	X
Cynthia	Thomas			AHS - DVHA	MA
Win	Turner				X
Teresa	Voci				X
Nathaniel	Waite			VDH	X
Anya	Wallack		Chair	SIM Core Team Chair	X
Marlys	Waller			Vermont Council of Developmental and M	X
Norm	Ward		Medical Director	OneCare Vermont	MA
Julie	Wasserman		VT Dual Eligible Project Director	AHS - Central Office	X
Monica	Weeber			AHS - DOC	M
Kendall	West				X
Robert	Wheeler		Vice President & CMO	Blue Cross Blue Shield of Vermont	M
Bradley	Wilhelm		Senior Policy Advisor	AHS - DVHA	X
Cecelia	Wu		Healthcare Project Director	AHS - DVHA	X
Erin	Flynn		DVHA		
Kathy	Hurley		MH-HC INTEG DIR	DMH	

Attachment 4 - Revised QPM Work Plan

DRAFT 10/20/14 – Work Plan for VHCIP Quality and Performance Measures Work Group

Objectives	Supporting Activities	Target Date	Responsible Parties	Status of Activity	Measures of Success
Group logistics: charter, membership, meeting schedule, etc.	• Review and refine draft charter • Review membership list for gaps • Obtain signed conflict of interest statements • Develop 2013-2014 meeting schedule • Identify resource needs and how to meet those needs	January 2014	Staff; co-chairs; work group members	DONE • Charter approved • Membership list developed • Conflict of interest policy presented	• Final Charter • Comprehensive membership list • Signed conflict of interest statements • 2014 meeting schedule • Resources adequate to accomplish objectives
Obtain consultant to assist with selected work group activities	• Identify activities that could benefit from consultant expertise • Determine if RFP needed or if existing vendor can perform work • Engage in RFP process and/or recommend vendor • Execute contract or contract amendment • Work with successful vendor to develop scope of work and accomplish specified activities	January 2014	Staff; co-chairs; work group members	DONE • Scope of work developed • Recommendation to retain existing vendor sent to Core Team	• Contract or contract amendment in place
Recommend process for reviewing and modifying SSP measures to VHCIP Core Team and GMCB	• Review and comment on draft process • Develop revised process • Vote on process • Send recommendation to VHCIP Core Team	January 2014	Staff; co-chairs; work group members	DONE • Recommendation made to Steering Committee, Core Team and GMCB	• Adopted process for review and modification of SSP measures
Review SSP pending and new measures and make Year 2 recommendations to VHCIP Steering Committee, Core Team and GMCB	• Carefully consider measure selection criteria and applicability of MSSP measure specifications • Develop recommendations for VHCIP Steering Committee, Core Team and GMCB	March 2014-July 31, 2014	Staff; co-chairs; work group members; consultant	DONE • Recommendation made to Steering Committee, Core Team and GMCB	• Recommendations to VHCIP Steering Committee, Core Team and GMCB
Review existing SSP Payment, Reporting, Monitoring and Evaluation Measures and make Year 2	• Consider payer and provider data availability, data quality, pilot experience reporting the measure and any reporting barriers, ACO performance, and any	April 2014-July 31, 2014	Staff; co-chairs; work group members; consultant	DONE • Recommendation made to Steering Committee, Core	• Recommendations to VHCIP Steering Committee, Core Team and GMCB

Objectives	Supporting Activities	Target Date	Responsible Parties	Status of Activity	Measures of Success
recommendations to VHCIP Steering Committee, Core Team and GMCB	changes to national clinical guidelines • Develop recommendations for VHCIP Steering Committee, Core Team and GMCB			Team and GMCB	
For all measure sets, identify implementation needs (e.g., learning collaboratives, electronic and other information, provider engagement) and potential resources to meet those needs.	• Review measure sets to identify implementation needs • Identify mechanisms and resources to meet implementation needs	November 2014 Presentation from VITL on HIE Gap Analysis; Ongoing	Staff; co-chairs; work group members; consultant	HIE Gap Analysis should help inform implementation needs	• Written recommendations, including proposed learning collaboratives, HIE needs, provider engagement activities, implementation resources
Review SSP Payment Measures targets and benchmarks and make Year 2 recommendations to VHCIP Steering Committee, Core Team and GMCB	• For each Payment Measure, consider whether the benchmark employed as the performance target should remain constant or change for the next pilot year • Consider setting targets that increase incentives for quality improvement.	~~April 2014-July 31, 2014~~November 2014-January 2015	Staff; co-chairs; work group members; consultant		• Recommendations to VHCIP Payment Models Work Group, Steering Committee, Core Team and GMCB
~~Review~~Provide input to Payment Models Work Group on Year 2 "Gate and Ladder" methodology for determining impact of quality results on calculation of shared savings ~~and make Year 2 recommendations to VHCIP Steering Committee, Core Team and GMCB~~	• Review methodology proposed to calculate points • Review methodology to assign scores based on points • Review methodology for creating Gates and Ladders	~~May 2014-July 31, 2014~~November 2014-January 2015	Staff; co-chairs; work group members; consultant		• ~~Recommendations~~Input to VHCIP Payment Models Work Group, Steering Committee, Core Team and GMCB
Review reports on SSPs from Analytics Contractor	• Review report of M&E claims based measures (M&E 12-23), due Nov. 7 • Review report of Core claims based measures (Core 1-13), due Nov. 22	December 2014-January 2015	Staff; co-chairs; work group members; consultants		• Work group members informed of 6-month SSP claims-based performance results
	•				•

Objectives	Supporting Activities	Target Date	Responsible Parties	Status of Activity	Measures of Success
Design SSP reporting materials and dashboards	• Develop reporting formats for different audiences (ACOs, providers, consumers)	January-June 2015	Staff; co-chairs; work group members; consultants		• Final reporting formats
Review Year 2 SSP measures and make Year ~~2~~3 recommendations to VHCIP Steering Committee, Core Team and GMCB	• Carefully consider measure selection criteria and measure specifications • Develop recommendations for VHCIP Steering Committee, Core Team and GMCB	January~~. 2015~~ - July 2015	Staff; co-chairs; work group members; consultant		• Recommendations to VHCIP Steering Committee, Core Team and GMCB
Review VHCIP Evaluation Plan	• Evaluation contractor presents evaluation plan • Work group provides feedback on evaluation plan	February 2015	Evaluation Contractor; Evaluation Director; Work Group members		• Work group members informed of evaluation plan
Review reports on SSPs from Analytics Contractor	• Review report of M&E claims based measures (M&E 12-23), due Jan. 21 • Review report of Core claims based measures (Core 1-13), due Feb. 22	March-April 2015	Staff; co-chairs; work group members; consultants		• Work group members informed of 9-month SSP claims-based performance results
Review reports on SSPs from Analytics Contractor	• Review report of all M&E measures (M&E 1-23), due Aug. 29 • Review report of all Core measures (Core 1-29), due Aug. 31	September-October 2015	Staff; co-chairs; work group members; consultants		• Work group members informed of Year 1 SSP performance
Obtain update on VHCIP Evaluation Plan	• Evaluation contractor presents update on evaluation activities	December 2015	Evaluation Contractor; Evaluation Director		• Work group members informed of evaluation activities
When requested by Payment Models Work Group, recommend measures for Episode of Care reforms to Payment Models Work Group, VHCIP Steering Committee, Core Team and GMCB	• Identify measure selection criteria • Review potential measures • Consider alignment with existing measure sets • Recommend measure set to VHCIP Steering Committee, Core Team and GMCB	TBD	Staff; co-chairs; work group members; consultant		• Recommendations to VHCIP Payment Models Work Group, Steering Committee, Core Team and GMCB
When requested by Payment Models Work Group,	• Identify measure selection criteria • Review potential measures	~~December 2014 June~~	Staff; co-chairs; work group		• Recommendations to VHCIP Payment Models

Objectives	Supporting Activities	Target Date	Responsible Parties	Status of Activity	Measures of Success
recommend measures for Pay for Performance reforms to Payment Models Work Group, VHCIP Steering Committee, Core Team and GMCB	• Consider alignment with existing measure sets • Recommend measure set to VHCIP Steering Committee, Core Team and GMCB	~~2015 (estimated)~~TBD	members; consultant		Work Group, Steering Committee, Core Team and GMCB
Coordinate and collaborate with other work groups	• Identify activities led by other work groups that relate to activities of the QPM Work Group • Develop mechanisms for reporting about related activities to other work groups, and for obtaining information about related activities from other work groups	Ongoing	Staff; co-chairs; work group members; other work groups		• Well-coordinated and aligned activities among work groups
Develop understanding of current measurement activities in Vermont, in other states, and nationally	• Identify entities and programs that engage in quality and performance measurement • Identify focus of their work and related measures • As requested by work group, ask selected entities to attend work group meetings to describe their activities in greater detail • Summarize information in writing	Ongoing	Staff; co-chairs; work group members; consultant; organizations engaging in measurement		• Written summary of current measurement activities • Aligned measure sets