VT Health Care Innovation Project
Work Force Work Group Meeting Minutes

Date of meeting: Wednesday, July 9th 2014; 2:00 PM to 4:30 PM EXE - 4th Floor Conference Room, Pavilion Building, Montpelier, VT

Attendees: Mary Val Palumbo and Robin Lunge, Co-Chairs; Georgia Maheras, AoA; Dawn Philibert, VDH; Peter Cobb, VNAs of VT; Stephanie Pagliuca, Bi-State Primary Care; Tom Alderman, Dept. of Education; Rick Barnett, VT Psychological Assoc.; Charlie MacLean, UVM; Madeline Mongan, VMS; Chris Winters, OPR; Mat Barewicz, Dept. of Labor; Bryan O'Connor, Annie Paumgarten, GMCB; Lori Lee Schoenbeck, Molly Backup, David Blanck, Consumer Representative; Amy Coonradt, Amanda Ciecior, Beth Tanzman, DVHA; Marlys Waller, VT Council of Developmental and Mental Health Services; Jennifer Woodard, DAIL; Janet Kahn, CAHCIM; David Adams, FAHC; Nelson Lamothe, Project Management Team.

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Welcome and Introductions	This meeting was called to order at 3:04 by Robin Lunge.	
Approval of Meeting Minutes	Stephanie Pagliuca moved to approve the minutes from the June 18th meeting and Mat Barewicz seconded.	
Presentation: Vermont Blueprint for Health	Beth Tanzman presented on the Blueprint from Health. The following were questions in reference to Attachment 3: • Discussion around who is benefiting from work done in the State around health IT infrastructure, and the difference between those practice that are a PCMH and those that are still independent physician practices. • Mat Barewicz asked about panel size for practices and how they determine what the right number of patients at their practice is – and how large the CHT needs to be in the area. There is no quantitative data around that right now, more just looking at how many	

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	attributed patients there are in general. As more practices become enrolled, Blueprint scales up the number of community care teams. • Question about who hires the community care teams. Local administrative entities do, or allow individual practices or hospitals to hire their own. However, individually hired care teams must still work toward state wide goals and initiatives • Question on slide 6 about how many practices the providers shown are attributed to, Beth answered that they all belong to the 121 practices with Blueprint. • The only payer for the hub and spoke model around Opioid dependence in the State is Medicaid. • Stephanie Pagliuca asked how staffing is done in communities and for the CHTs. There is no set of requirements from the Blueprint, it is decided at the community level what they need. • Question about where the funding is coming from to support the program leaders and extenders in place. There are a number of funders being used to run this program, although it does not limit providers in their ability to care for individuals. • Madeline Mongan asked about practice facilitators and where they operate. They are a combination of hired by Blueprint as contractors and hired by the central administrative entities. The positions are ongoing, and will not have their funding phased out. • David Adams asked about coordination with OneCare, Beth explained to the group how there are constant coordination and collaboration efforts in place as new information and protocols are released, in order to avoid duplication of efforts between ACOs and the Blueprint. • Question about future relationship between ACOs and Blueprint. Beth responded that there is so much integration of health care entities in the state that it is difficult to differentiate where the line in provider networks and healthcare systems is. Robin Lunge agreed that the structure of care is evolving and participation in leadership has been strong. • Molly Backup requested that there are more efforts made to streamline processes between ACOs and Blueprint. • Georgia Maheras asked about gaps in service and how they are trying to remedy it, i.e.	

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	using telemedicine. The Blueprint is pretty limited in any new concepts such as telemedicine and their ability to buy the time of a provider needed to do that. • Stephanie Pagliuca asked if communities are reshaping workers to fill in the gaps in care. Responded that yes, many communities are doing this and creating their own healthcare professional types to meet community needs. Mary Val Palumbo spoke about the need to train nurses for the future, and that is a large concern for the nursing population. • Molly Backup spoke about bringing in a psychiatrist to her practice for a short period each month to see patients and speak with providers about any questions they might have regarding mental illness. They have found it helpful to bring in a mental health professional to speak with staff, even for short period of time. • David Blanck asked if the FQHCs have dental workers. Not all but many do. David suggested using the care coordinators to help Medicaid patients make sure they attend their dental appointments, and that it could help reduce the very high no show rate of Medicaid patients to dental appointments. • Marlys Waller asked about the lack of Washington County Mental Health on slide 10. Beth reported that there could be a number of reasons as to why it was left off the map.	
Symposium Subcommittee Update	Amy Coonradt updated the group on the workforce symposium. The date for the event will be sometime in November, the proposed speakers are Erin Fraher, Tom Lee or someone from CMMI. Topics being discussed are around re-engineering the workforce and the future skill sets needed. It will most likely half a day-long session with two speakers. The whole group with then break off into workgroups to discuss what is working so far in communities, what isn't working and what the group thinks workforce needs in terms of skillsets will be in the future. Workgroups will then issue recommendations to group as a whole and include these recommendations in the required report to legislature.	
Discussion: prioritizing budget requests to the Governor	Robin Lunge laid out the foundation of this discussion to give comments around the current budget expenditures related to healthcare workforce. Workgroup is to look at pros and cons of asking for a lump sum of money for the workgroup to fund proposals as they see fit or recommend that specific proposals be funded. • Madeleine Mongan requested that workgroup members get the materials package one week ahead of time and that voting items be made clear to workgroup members.	

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	• Molly Backup asked when the recommendations need to be made by. Robin Lunge said the sooner the better, but the work group could push a vote to next month's meeting and still be able to get recommendations in for consideration for next year's budget. • All proposals are 'new money' to this workgroup. The budget is a "zero sum" game, in which we will have to take money away from something else in order to fund any of these proposals. Mary Val Palumbo voiced that workgroup has been asked to recommend some options to the governor and there will be a strong consideration of anything put forth. • Madeline Mongan asked for clarification around the current package of proposals distributed for this meeting. Response was that these proposals have all come before the group before—there are no new proposals represented here. • Lori Lee Schoenbeck expressed concern that there was not a representative request for proposals sent out. Dawn Philibert presented on Workforce line items currently in FY 2015 budget, the following comments were made: • Robin Lunge asked about loan forgiveness, if it is written in statute. Charlie MacLean said she was correct and gave a brief overview of the history and details of this statue. Beth asked if the funds are used every year. Yes, they are with perhaps very little carry over for the next year if next year is anticipated to be a tough recruiting year. This fund is also for any type of provider in the healthcare field, not just physicians. • Tom Alderman felt that the workgroup is not equipped to do a cost benefit analysis and take money from other programs. Robin Lunge said that the workgroup does have a charge to provide recommendations. Molly Backup felt it would be foolish to speak poorly of any other program, and instead to recommend expanding all current funding as well as workgroup suggestions. • Stephanie Pagliuca reported that Bi-State has been in support of current line items, and does not feel like they should be reduced in funding. • Charlie MacLean supports the educational funding • J-1 Visa waivers are underused in Vermont – each state is allotted ~30, and Vermont rarely uses more than 5 of them per year. • Madeline Mongan asked if the number of Vermonters for the NHSC could be expanded.	

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	The workgroup said that is not likely because of VT size and overall health status. • Charlie MacLean spoke about how successful the Freeman gift has been for physicians in VT, perhaps finding a way to extend this program or come up with something similar would be beneficial. Discussion of average loan debt for providers then took place. Robin Lunge asked about other recruitment tools that work well: • There is a strong relationship to where residency is completed. Desire to expand medical education in the state as much as possible • Mary Val Palumbo said the current list is lacking any k-12 initiatives. Previous discussions revolved around getting kids certified at an early age, or interested in healthcare. 'Pipeline' or Career and Technical Education activities could be better funded • Charlie MacLean questioned how to retrain current workforce, and sees that as a potential solution • Madeline Mongan asked about TAACCCT funding from the Dept. of Labor. This funding is not specific to healthcare but could be used for it. Money is awarded to post-secondary school to team up with local training centers. Mat Barewicz reported that information about available workforce money in the state is difficult to compile and attain. Madeline Mongan would like to know what certificate programs VT has in place right now. Workgroup felt certification for health coaches, community health workers or medical coders would be a great benefit to state. Further discussion around how to tap into this potential career realignment area took place. • Beth Tanzman asked about any businesses and their need to reinvest in the community, if there is anything to leverage there. • Molly Backup felt that the discussion needs to be fleshed out more, but would like to see proposals to provide students with a positive experience directly at a site that needs healthcare workers. Also, likes the idea of having shorter training programs to directly train healthcare workers for areas needed. • Mary Val Palumbo reminded the group to follow predecessors and their recommendations around workforce issues. If asking for a pot of money, there needs to be some discussion around how educated the workgroup has become on the topic and an outline of how proposals would be evaluated.	

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	• Tom Alderman likes the idea of writing a proposal to the governor and requesting a pot of money. We can then start an RFP process, stating grants available pending funds so when the workforce receives any money, the workgroup will already be ahead of the game. • Dawn Philibert reminded the group request should be over and above current budget healthcare workforce line items Robin Lunge summarized the decisions of this workgroup. It was decided that the workgroup would like to apply for a pot of money out of the budget for the next fiscal year, and will not take away from any existing funding. A brief draft will be written and voted on at the next meeting. • Mat Barewicz made a disclaimer that there is Dept. of Labor funding available now and will be happy to give more information to anyone if interested. • Workgroup will have to eventually discuss current proposals submitted. Mary Val Palumbo suggested piloting the tool created to score proposals. Scores for pilot test will only be used internally, and currently existing proposals will be included in any final evaluation of proposals if another RFP goes out. • Additionally, it was discussed that a letter should be drafted to those proposers who had submitted the current proposals, informing them that the work group is not at a stage where it can fund proposals yet and also to inform them of the process the work group has devised for these and future proposals/asks.	
Public Comment/ Next Steps/ Wrap Up	There was no public comment The next meeting will be Wednesday, August 20, 2014 3:00 PM – 5:00 PM at EXE - 4th Floor Conf Room, Pavilion Building, Montpelier	Staff - Formal letters will be sent to first round proposals Staff - Draft of request for portion of FY 2016 budget All - Test the scoring guide on the three proposals available

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		Mat Barewicz – Will send out information on WET/ACCDfund