



**Vermont Health Care Innovation Project  
Practice Transformation Work Group Meeting Minutes**

**Pending Work Group Approval**

**Date of meeting:** April 5, 2016; 10:00 AM to 12:00 PM; Red Oak Room, State Office Complex, 280 State Drive, Waterbury, VT

Agenda Item	Discussion	Next Steps
<p><b>1. Welcome, Introductions</b></p> <p><b>Approval of minutes</b></p>	<p>Deborah Lisi-Baker opened the meeting at 10:03.</p> <p>A roll call was taken and a quorum was present.</p> <p>Sue Aranoff made a motion to approve the minutes of the last meeting by exception; Dale Hackett seconded the motion. The minutes were approved with 3 abstentions: Trinkia Kerr, Sam Liss and Maura Graff.</p>	
<p><b>2. Accountable Community for Health, Peer Learning Lab Update</b></p>	<p><b>Accountable Community for Health, Peer Learning Lab Update</b></p> <p>Heidi Klein – Director of Health Surveillance; Vermont Department of Health</p> <p>Heidi Klein presented on the Accountable Communities for Health, Peer Learning Lab. She began with an overview of the concept of Accountable Communities for Health and discussed how the VHCIP has approached the idea of how we might create an accountable community for health in Vermont.</p> <p>Following on the work of the Prevention Institute and the creation of the report that was completed as part of Phase I of this project, we decided to pursue a peer learning model. Vermont has several communities who are interested in taking the next step in the process and they are all at different points of developing at least some of the components of an accountable community for health.</p> <p>The lab is designed to facilitate a forum where these communities can learn from one another by participating in in-person learning events interspersed with webinars.</p> <p>Dale Hackett asked about how this type of work might be sustained in the long term? Heidi responded that New and innovative payment models may allow us to be creative around how we currently fund</p>	

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	<p>things. Additionally, alternative funding sources could help support this type of model. For example, Jim Hester is part of a work group that is investigating ways to find alternative funding models to help impact the social determinants of health. Laural Ruggles reinforced the complexity of our current payment models, and illustrated this by noting the large volume of disparate funding streams her local designated mental health agency receives from Medicaid alone.</p> <p>Sam Liss asked Heidi to elaborate on the goal of addressing the social determinants of health through an accountable communities for health model. Heidi responded that under the community collaboratives there are work groups state wide that are thinking how to improve things like housing, transportation and other social determinants of health. One positive development that is occurring in the community collaborative teams is the involvement of leadership from key organizations that are working together to set priorities for the community as a whole.</p>	
<p><b>3. Update on the Medicaid Pathway</b></p>	<p><b>Update on the Medicaid Pathway</b>  <b>Michael Costa, Deputy Director of Health Care Reform and Selina Hickman, Director of Health Care Operations and Quality at the AHS Secretary's Office</b></p> <p>Michael Costa began with a brief update on the All Payer Model and reviewed the slides in the meeting packet starting on page 18.</p> <p>Vermont is negotiating with the federal government (CMS) to work out the details that would eventually form the basis for an all payer waiver for Vermont. He highlighted that we also want to start changing the way that we talk about health care reform so that we keep the goal in sight: An integrated health system that can achieve the Triple Aim.</p> <p>Sue Aranoff asked whether the all payer model approach must include an ACO because the model in Maryland does not utilize one. Michael responded that it does not, but that Vermont has determined that in order to encourage provider led reform, and to increase the likelihood that we will gain CMS approval, an ACO model has been determined to be the way forward for Vermont.</p> <p>Dale Hackett asked why DVHA is issuing an RFP soliciting ACO involvement in the all payer model while AHS central office is overseeing the Medicaid Pathways initiative. Michael and Selina responded that in this scenario DVHA is the 'payer' in State Government that is looking to contract with an ACO for payments related to those services that are similar to Medicare A&amp;B services. However, DVHA and AHS more broadly cover a wide range of services outside of that definition. The Medicaid Pathways initiative is a critical step to understanding how to expand the all payer model to include additional services over time.</p> <p>Ben Watts from the Department of Corrections offered several points to include in the conversation:</p>	

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	<ol style="list-style-type: none"> <li>1) The notion of the Triple Aim – ‘Staffing/Workforce’ can be considered a 4th Aim.</li> <li>2) New York State has the ability to pay for services for incarcerated individuals who are within 30 days of release under a Medicaid waiver. It would be very beneficial to include this benefit under any new waivers that are being negotiated on behalf of the State of Vermont.</li> <li>3) Alignment of incentives – it appears there are not enough financial incentives for DAs They are beginning to be included in reform conversations, but the payments have not yet followed.</li> <li>4) PCPs and DAs – these should be seen as the front line in delivering care.</li> </ol> <p>Michael Costa expressed appreciation for the observations and likened the tasks to creating a doorway: our job is to build the door – can we make it attractive enough for the DAs (among others) to walk through it?</p> <p>Selina Hickman next reviewed the Medicaid Pathway slides in the materials packet – starting on page 29.</p> <p>She noted that there is a great deal of work needed to make this initiative possible. For example, the work group that is reviewing the designated agency and mental health services has allotted 6 months for that work and up to a year to implement the payment model.</p> <p>Dale asked about the providers who are participating in the ACO Shared Savings Program – it’s mostly the groups of hospitals and physicians and community providers who are participating.</p> <p>Maura Graff also asked about the “TBD” category of departments – what are the plans for including them? Selina responded that this is primarily a human resources issue in that we don’t have enough people to work on everything at once and that the TBD was meant more to refer to the timing. It seems that several of the departments listed are indeed already engaging in the process.</p> <p>Selina described the slide on page 32 of the materials packet and noted that the first column that is colored green should really be about a third of the whole picture as it represents more of the total than it graphically appears to show. This slide is meant to show how complicated the model and its implementation will be as all the items must be in alignment in order to be eligible for payment under the model.</p> <p>Patricia Singer pointed out that the DMH 1115A waiver already includes both hospital and community based care payments – and they manage it within their utilization reviews.</p> <p>Sam Liss asked if the model of care incorporates not only the concept of person/family <i>centered</i> care but also person/family <i>directed</i> care. Selina noted that the Medicaid Pathways initiative draws heavily from the DLTSS Model of Care that absolutely includes an emphasis on person directed care.</p>	

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	<p>Deborah Lisi-Baker asked about efforts to include advocates and consumer representatives in the development of this model, as they often feel left out of the conversation around what the best outcomes for families will be. Selina indicated that the plan will come back through the SIM work groups so that the public process of SIM will be engaged there. As well, any changes to Medicaid requires a robust public process and will likely involve MEAB. As well, the next legislative session will need to address the changes proposed to the funding streams. Deborah also pointed out that providers have always been interested in streamlining the administrative relationship with AHS. She hopes that the Medicaid Pathway will develop some congruence and integration in the way that AHS will work with providers. Selina noted that the goal is to indeed do that and also that she is cognizant that providers may find themselves in a very complicated place if they are left with feet in both worlds for too long, hence the need for a fast pace of change.</p> <p>Laural Ruggles also noted the anxiety level in the communities and amongst providers is very high: What can we tell them to alieve that anxiety? Michael responded by asking this question “Do we want to keep walking down this road?” Are the providers willing to keep walking on this path based on the facts of today and the potential opportunity that is presented? We don’t have to commit the full model at this time, but rather to keep the conversation going as facts materialize over time.</p>	
<p><b>4. Core Competency Training Update</b>  <b>Erin Flynn – DVHA</b></p> <p><b>Learning Collaborative Update</b>  <b>Pat Jones - GMCB</b></p>	<p><b>Core Competency Training Update</b></p> <p>Erin Flynn provided an update on the Core Competency Training Series. The response has been strong and the training sites have been chosen to try to cover the state as widely as possible. The interest has been so high that an additional session has been scheduled for the Burlington area. The materials packet contains a listing of the whole training schedule and the materials have all be posted to a new page on the VHCIP website, <a href="#">linked here</a>.</p> <p>240 people have signed up already; with a waitlist for all locations. Staff is doing everything possible to meet the training needs of all those interested.</p> <p><b>Learning Collaborative Update</b></p> <p>Pat Jones provided an update on the ongoing Integrated Communities Care Coordination Learning Collaborative program. In person learning sessions for 2nd and 3rd cohorts were held March 16th and 17th. These focused on care coordination conferences and shared care plans. Nationally recognized faculty member Jill Rinehart, along with Shelley Waterman, and Kristy Trask presented. As well, Jeanne McAllister from the Indiana School of Medicine was invited back to present.</p>	

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	<p>There was great participation including members of the original pilot communities – highlights include the use of UVM trained actors (Standardized Patients) to role play the implementation of multi-organizational care conferences.</p> <p>On May 24<sup>th</sup> and 25<sup>th</sup> expert faculty member Lauran Hardin will return for a series of in person learning sessions focused on sustainability. Sarah Narkewicz will also be presenting on how to train others in your community to use the tools. Also, the agenda will highlight the Patient Ping ENS statewide system. A future in person learning session will focus on transitions of care and how peoples acuity and needs change over time. –The team continues to work with ACO partners, Blueprint and community partners to carry on this work. We are seeing participants in the Core Competency referencing the tools we've developed as part of the LC so it is wonderful to see the synergies circling around the same topics and tools. Finally, the team is nearing completion of a tool kit that will be made publicly available highlighting the tools and teachings of the last two years of the Integrated Communities Care Management Learning Collaborative model.</p>	
<p><b>6. Next Steps</b></p>	<p>Please note that the May Practice Transformation work group meeting is cancelled!</p> <p>The next meeting is Tuesday, June 7, 2016 10:00 am – 12:00 pm</p> <p>Red Oak Conference Room, 280 State Drive, Waterbury This is in the new State Office Complex</p> <p>(New Building - the meeting space is located on the 2nd floor above the main entrance) Call-In Number: 1-877-273-4202 Conference ID: 2252454</p>	

# VHCIP Practice Transformation Work Group Member List

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Tuesday, April 05, 2016

Member		Member Alternate		Minutes	Organization
First Name	Last Name	First Name	Last Name		
Susan	Aranoff ✓	Gabe	Epstein		AHS - DAIL
		Bard	Hill		AHS - DAIL
		Clare	McFadden		AHS - DAIL
Beverly	Boget	Peter	Cobb		VNAs of Vermont
		Michael	Counter		VNA & Hospice of VT & NH
Kathy	Brown	Todd	Bauman		DA - Northwest Counseling and Support Services
		Stephen	Broer		DA - Northwest Counseling and Support Services
Barbara	Cimaglio				AHS - VDH
Molly	Dugan	Stefani	Hartsfield		Cathedral Square and SASH Program
		Kim	Fitzgerald		Cathedral Square and SASH Program
Eileen	Girling	Heather	Bollman		AHS - DVHA
		Jenney	Samuelson		AHS - DVHA - Blueprint
Maura	Graff ✓			A	Planned Parenthood of Northern New England
Deborah	Lisi-Baker ✓				UVM; Co-chair
Dale	Hackett ✓				Consumer Representative
Sarah	Jemley	Jane	Catton		Northwestern Medical Center
		Candace	Collins		Northwestern Medical Center
Linda	Johnson	Debra	Repice		MVP Health Care
Pat	Jones ✓	Annie	Paumgarten ✓		GMCB
Trinka	Kerr ✓	Nancy	Breiden	A	VLA/Health Care Advocate Project
Jackie	Majoros ✓	Barbara	Prine		VLA/LTC Ombudsman Project
Dion	LaShay				Consumer Representative
Patricia	Launer ✓	Kendall	West		Bi-State Primary Care
Sam	Liss ✓			A	Statewide Independent Living Council

# VHCIP Practice Transformation Work Group Member List

Tuesday, April 05, 2016

Member		Member Alternate		Minutes	Organization
First Name	Last Name	First Name	Last Name		
Sara	Barry	Emily	Bartling		OneCare Vermont
Miriam		Maura	Crandall		OneCare Vermont
Kate	McIntosh	Judith	Franz		Vermont Information Technology Leaders
Bonnie	McKellar	Mark	Burke		Brattleboro Memorial Hospital
Madeleine	Mongan	Stephanie	Winters		Vermont Medical Society
Julie	Tessler				VCP - Vermont Council of Developmental and Mental Health Services
		Mary	Moulton		VCP - Washington County Mental Health Services Inc.
		Catherine	Simonson		VCP - HowardCenter for Mental Health
		Stephen	Broer		VCP - Northwest Counseling and Support Services
Sarah	Narkewicz				Rutland Regional Medical Center
Laural	Ruggles				Northeastern Vermont Regional Hospital; Co-chair
Patricia	Singer	Jaskanwar	Batra		AHS - DMH
		Mourning	Fox		AHS - DMH
		Kathleen	Hentcy		AHS - DMH
Angela	Smith-Dieng	Mike	Hall		V4A
Shawn	Skaflestad	Kirsten	Murphy		AHS - Central Office
		Julie	Wasserman		AHS - Central Office - DDC
Audrey-Ann	Spence	Teresa	Voci		Blue Cross Blue Shield of Vermont
JoEllen	Tarallo-Falk				Center for Health and Learning
Lisa	Viles				Area Agency on Aging for Northeastern Vermont
Kirsten	Murphy				VT Developmental Disabilities Council

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# VHCIP Practice Transformation Work Group

## Attendance Sheet

Tuesday, April 05, 2016

	First Name	Last Name	Organization	Practice Transformation
1	Nancy	Abernathy	Learning Collaborative Facilitator	X
2	Peter	Albert	Blue Cross Blue Shield of Vermont	X
3	Susan	Aranoff ✓	AHS - DAIL	M
4	Debbie	Austin ✓	AHS - DVHA	X
5	Ena	Backus	GMCB	X
6	Melissa	Bailey	AHS - DMH	X
7	Michael	Bailit	SOV Consultant - Bailit-Health Purchasing	X
8	Susan	Barrett	GMCB	X
9	Emily	Bartling	OneCare Vermont	MA
10	Jaskanwar	Batra	AHS - DMH	MA
11	Todd	Bauman	DA - Northwest Counseling and Support Ser	MA
12	Bob	Bick	DA - HowardCenter for Mental Health	X
13	Charlie	Biss	AHS - Central Office - IFS / Rep for AHS - DM	X
14	Beverly	Boget	VNAs of Vermont	M
15	Heather	Bollman	AHS - DVHA	MA
16	Mary Lou	Bolt	Rutland Regional Medical Center	X
17	Nancy	Breiden	VLA/Disability Law Project	MA
18	Stephen	Broer	DA - Northwest Counseling and Support Ser	MA
19	Stephen	Broer	VCP - Northwest Counseling and Support Se	M
20	Kathy	Brown	DA - Northwest Counseling and Support Ser	M
21	Martha	Buck	Vermont Association of Hospital and Health	A
22	Mark	Burke	Battleboro Memorial Hopsital	MA
23	Anne	Burmeister	Planned Parenthood of Northern New Engla	X
24	<del>Dr. Dee</del>	<del>Burroughs-Biron</del>	AHS - DOC	X
25	Denise	Carpenter	Specialized Community Care	X
26	Jane	Catton	Northwestern Medical Center	MA

Samantha Haley - DVHA

27	Alysia	Chapman	DA - HowardCenter for Mental Health	X
28	Joy	Chilton	Home Health and Hospice	X
29	<del>Amanda</del>	<del>Ciecior</del>	AHS - DVHA	S
30	Barbara	Cimaglio	AHS - VDH	M
31	Peter	Cobb	VNAs of Vermont	MA
32	Candace	Collins	Northwestern Medical Center	MA
33	Amy	Coonradt	AHS - DVHA	S
34	Alicia	Cooper	AHS - DVHA	S
35	Amy	Cooper	HealthFirst/Accountable Care Coalition of t	X
36	Michael	Counter	VNA & Hospice of VT & NH	M
37	Maura	Crandall	OneCare Vermont	MA
38	Claire	Crisman	Planned Parenthood of Northern New Engla	A
39	Diane	Cummings	AHS - Central Office	X
40	Dana	Demartino	Central Vermont Medical Center	X
41	Steve	Dickens	AHS - DAIL	X
42	Molly	Dugan	Cathedral Square and SASH Program	M
43	Gabe	Epstein ✓	AHS - DAIL	MA
44	Trudee	Ettlinger	AHS - DOC	X
45	Klm	Fitzgerald	Cathedral Square and SASH Program	MA
46	Patrick	Flood	CHAC	X
47	Erin	Flynn ✓	AHS - DVHA	S
48	Mourning	Fox	AHS - DMH	MA
49	Judith	Franz	Vermont Information Technology Leaders	MA
50	Mary	Fredette	The Gathering Place	X
51	Aaron	French	AHS - DVHA	X
52	Meagan	Gallagher	Planned Parenthood of Northern New Engla	X
53	Joyce	Gallimore	Bi-State Primary Care/CHAC	X
54	Lucie	Garand	Downs Rachlin Martin PLLC	X
55	Christine	Geiler	GMCB	S
56	Eileen	Girling	AHS - DVHA	M
57	Steve	Gordon	Brattleboro Memorial Hopsital	X
58	Maura	Graff ✓	Planned Parenthood of Northern New Engla	M
59	Dale	Hackett ✓	Consumer Representative	M
60	Mike	Hall	Champlain Valley Area Agency on Aging / C	MA

61	Stefani	Hartsfield	Cathedral Square	MA
62	Carolynn	Hatin	AHS - Central Office - IFS	S
63	Kathleen	Hentcy	AHS - DMH	MA
64	Selina	Hickman ✓	AHS - DVHA	X
65	Bard	Hill	AHS - DAIL	MA
66	Breena	Holmes	AHS - Central Office - IFS	X
67	Marge	Houy	SOV Consultant - Bailit-Health Purchasing	S
68	Christine	Hughes	SOV Consultant - Bailit-Health Purchasing	S
69	Jay	Hughes	Medicity	X
70	Jeanne	Hutchins	UVM Center on Aging	X
71	Sarah	Jemley	Northwestern Medical Center	M
72	Linda	Johnson	MVP Health Care	M
73	Craig	Jones	AHS - DVHA - Blueprint	X
74	Pat	Jones ✓	GMCB	M
75	Margaret	Joyal	Washington County Mental Health Services	X
76	Joelle	Judge ✓	UMASS	S
77	Trinka	Kerr ✓	VLA/Health Care Advocate Project	M
78	Sarah	Kinsler ✓	AHS - DVHA	S
79	Tony	Kramer	AHS - DVHA	X
80	Sara	Lane	AHS - DAIL	X
81	Kelly	Lange	Blue Cross Blue Shield of Vermont	X
82	Dion	LaShay	Consumer Representative	M
83	Patricia	Launer ✓	Bi-State Primary Care	M
84	Deborah	Lisi-Baker ✓	SOV - Consultant	C
85	Sam	Liss ✓	Statewide Independent Living Council	M
86	Vicki	Loner	OneCare Vermont	M
87	Carole	Magoffin ✓	AHS - DVHA	S
88	Georgia	Maheras ✓	AOA	S
89	Jackie	Majoros ✓	VLA/LTC Ombudsman Project	M
90	Carol	Maroni	Community Health Services of Lamoille Vall	X
91	David	Martini	AOA - DFR	X
92	John	Matulis		X
93	James	Mauro	Blue Cross Blue Shield of Vermont	X
94	Lisa	Maynes	Vermont Family Network	X

95	Clare	McFadden	AHS - DAIL	MA
96	Kate	McIntosh	Vermont Information Technology Leaders	M
97	Bonnie	McKellar	Brattleboro Memorial Hopsital	M
98	Elise	McKenna	AHS - DVHA - Blueprint	X
99	Jeanne	McLaughlin	VNAs of Vermont	X
100	Darcy	McPherson	AHS - DVHA	A
101	Madeleine	Mongan	Vermont Medical Society	M
102	Monika	Morse		X
103	Judy	Morton	Mountain View Center	X
104	Mary	Moulton	VCP - Washington County Mental Health Se	M
105	Kirsten	Murphy	AHS - Central Office - DDC	MA
106	Reeva	Murphy	AHS - Central Office - IFS	X
107	Sarah	Narkewicz	Rutland Regional Medical Center	M
108	Floyd	Nease	AHS - Central Office	X
109	Nick	Nichols	AHS - DMH	X
110	Monica	Ogelby	AHS - VDH	X
111	Miki	Olszewski	AHS - DVHA - Blueprint	X
112	Jessica	Oski	Vermont Chiropractic Association	X
113	Ed	Paquin	Disability Rights Vermont	X
114	Annie	Paumgarten	GMCB	MA
115	Laura	Pelosi	Vermont Health Care Association	X
116	Eileen	Peltier	Central Vermont Community Land Trust	X
117	John	Pierce		X
118	Luann	Poirer	AHS - DVHA	S
119	Rebecca	Porter	AHS - VDH	X
120	Barbara	Prine	VLA/Disability Law Project	MA
121	Betty	Rambur	GMCB	X
122	Allan	Ramsay	GMCB	X
123	Paul	Reiss	HealthFirst/Accountable Care Coalition of t	X
124	Virginia	Renfrew	Zatz & Renfrew Consulting	X
125	Debra	Repice	MVP Health Care	MA
126	Julie	Riffon	North Country Hospital	X
127	Laural	Ruggles	Northeastern Vermont Regional Hospital	C
128	Bruce	Saffran	VPQHC - Learning Collaborative Facilitator	X

129	Jenney	Samuelson	AHS - DVHA - Blueprint	MA
130	Jessica	Sattler	Accountable Care Transitions, Inc.	X
131	Rachel	Seelig	VLA/Senior Citizens Law Project	X
132	Susan	Shane	OneCare Vermont	X
133	Maureen	Shattuck	Springfield Medical Care Systems	X
134	Julia	Shaw	VLA/Health Care Advocate Project	X
135	Miriam	Sheehey ✓	OneCare Vermont	X
136	Catherine	Simonson	VCP - HowardCenter for Mental Health	M
137	Patricia	Singer ✓	AHS - DMH	M
138	Shawn	Skaflestad ✓	AHS - Central Office	M
139	Richard	Slusky	GMCB	X
140	Pam	Smart	Northern Vermont Regional Hospital	X
141	Angela	Smith-Dieng ✓	V4A	M
142	Lily	Sojourner ✓	AHS - Central Office	X
143	Audrey-Ann	Spence	Blue Cross Blue Shield of Vermont	M
144	Holly	Stone ✓	UMASS	S
145	Beth	Tanzman	AHS - DVHA - Blueprint	X
146	JoEllen	Tarallo-Falk	Center for Health and Learning	M
147	Julie	Tessler ✓	VCP - Vermont Council of Developmental a	M
148	Bob	Thorn	DA - Counseling Services of Addison County	X
149	Win	Turner		X
150	Lisa	Viles	Area Agency on Aging for Northeastern Ver	MA
151	Beth	Waldman	SOV Consultant - Bailit-Health Purchasing	X
152	Marlys	Waller	DA - Vermont Council of Developmental an	X
153	Nancy	Warner	COVE	X
154	Julie	Wasserman ✓	AHS - Central Office	S/MA
155	Kendall	West	Bi-State Primary Care/CHAC	MA
156	James	Westrich	AHS - DVHA	S
157	Robert	Wheeler	Blue Cross Blue Shield of Vermont	X
158	Bradley	Wilhelm	AHS - DVHA	S
159	Jason	Williams	UVM Medical Center	X
160	Stephanie	Winters	Vermont Medical Society	MA
161	Jason	Wolstenholme	Vermont Chiropractic Association	X
162	Mark	Young		X

163	Marie	Zura	DA - HowardCenter for Mental Health	X
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Ben Watts - AHS-DOC