

Vermont Health Care Innovation Project Core Team Meeting Minutes

Pending Core Team Approval

Date of meeting: Monday, June 13, 2016, 1:00-3:00pm, Ash Conference Room, Waterbury State Office Complex, 280 State Drive, Waterbury.

| Agenda Item | Discussion | Next Steps |
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| 1. Welcome and Chair's Report | <p>Lawrence Miller called the meeting to order at 1:00pm. A roll-call attendance was taken and a quorum was present.</p> <p><i>Chair's Report:</i> Lawrence Miller provided an update on pending approvals, noting that we started to receive approvals for outstanding Year 2 items last week; we expect approvals for the other half of our Year 2 items and all of Year 3 soon.</p> | |
| 2. Approval of Meeting Minutes | <p>Paul Bengtson moved to approve the April 11 meeting minutes. Steven Costantino seconded. Georgia Maheras noted that the minutes included a note that we were delaying a discussion of quality measures; Pat Jones was on the line to provide an update. A roll call vote was taken and the motion carried unanimously.</p> | |
| 3. Core Team Update: Operational Plan Submission Update – Request for Additional Information | <p>Georgia Maheras provided an update on our Operational Plan submission. Since the April meeting, we have submitted our Year 3 Operational Plan. CMMI made a request for additional information and provided comments on the Operational Plan; we submitted a response to the request for additional information in early June, and at this time, the Operational Plan has been approved by our Project Officer and the rest of the program side of CMMI.</p> <p>Georgia thanked the entire SIM team for support on the Operational Plan submission, especially Sarah Kinsler and Diane Cummings. CMMI has also used some components of our Operational Plan as examples for other States.</p> <p>Georgia walked through Attachment 3, a Performance Period 3 budget update. Most changes were as a result of items initially approved for Performance Period 3 funds, but that were shifted back into Performance Period 2 based on conversations with CMMI about carryover. We worked this out prior to submitting our Operational Plan and budget for Year 3 to simplify the carryover process.</p> | |

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| | <ul style="list-style-type: none"> • Values at the top of slides add up to total Contractual spending for Year 3. • Paul Bengtson asked a question about the VCN Data Warehousing project: VCN selected NORC to build a 42 CFR Part 2-compliant data warehouse; analytics will be a part of this, though that will likely be supported by non-SIM funds. • Sustainability Misc: This item was left vague in advance of carryover approvals. This will be fleshed out more following approval of our carryover request (expected ~August 2016). • Sustainability Plan: The Sustainability Plan section of the Operational Plan mentions sustainability planning activities undergone by project leadership in 2015 and early 2016. This work is discussed in greater depth in the Sustainability Plan section of the Operational Plan. A sustainability planning sub-group will launch in July after our Sustainability Planning contractor begins work – Georgia is happy to share the scope of work for this contract with members. Steve Voigt and Paul Bengtson expressed that they would like to participate in the sustainability planning sub-group. • When will this grant end? This grant will phase down – most activities will end in December 2016; Performance Period 3 will end on June 30, 2017; close-out activities (evaluation, final reporting) will occur through November 30, 2017. • Paul Bengtson suggested we look back at the document we created early in the SIM process to identify what success would look like. He noted that he believes the grant has been very helpful so far, and is interested in thinking about how to continue successful SIM activities. <p>Georgia noted that we expect a small request for additional information about our budget this week, and we expect to respond to that request by the end of this week and have approvals by the end of the month so that we can start Performance Period 3 without disruption.</p> <p>Pat Jones provided a quality measure update, tabled during the last Core Team meeting.</p> <ul style="list-style-type: none"> • Both ACO SSPs use “gate and ladder” quality methodologies. ACOs must achieve a minimum quality threshold (gate) in order to be eligible to share in savings; higher performance above the gate qualifies ACOs for a greater share of savings (ladder). • Where measures have a national benchmark, that is used to measure ACOs; for measures without national benchmarks, ACOs are compared to past performance. • The issue for commercial SSP: Preventable admissions. Lower rates for this measure are better. The challenge is that the numerator for this measure (patients admitted for avoidable admissions) is so low that it is near 0; it is impossible for ACOs to improve on a measure and receive the maximum score for this measure (3 points). Julia Shaw from the Office of the Health Care Advocate suggested leaving this measure in the payment measure set, but reducing the maximum to 2 points. This would apply to the commercial SSP only, since the Medicaid SSP point system is written into ACO contracts with DVHA. Pat suggested this is a technical change that does not need Core Team action. | |

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| | <ul style="list-style-type: none"> • Paul Bengtson supports this course of action, and commented that he wonders why we measure certain areas rather than others; in particular, why use this measure if the numbers are so small? Pat suggested that this is a very good measure of ambulatory care, and that preventable in-patient utilization is a driver of costs overall; program leaders expected more patients to qualify for this measure. • Al Gobeille asked for more information about the measure. The numerator is patients admitted for avoidable admissions; the denominator is population-based. The measure was selected because it's a good measure of ambulatory care. Pat suggested that the other option would be to drop the measure. Giving this measure a maximum point value of 2 doesn't penalize providers for inability to improve on this measure. Al and Paul expressed support for dropping this measure. • Lawrence asked why the quality team is not recommending we drop this measure. Pat replied that this measure gets at well-coordinated ambulatory care. The ACOs also see work in this area as having great potential to achieve savings, even with small numbers. The ACOs and HCA also expressed that reducing the number of payment measures too much put too much weight on achieving only a few measures. Al noted that ACOs need 15 points to achieve the quality gate whether the total is 26 or 27 points. Pat noted Vermont's small population and small ACOs create particular challenges for this measure, but that the Blueprint also uses this measure, and that a wide group of stakeholders agreed that this is a measure of interest, and that it is a good measure for ACOs to be working on. Paul Bengtson asked whether depression is a condition included in this measure; it is not. • Julie Wasserman suggested that keeping this measure holds ACOs accountable for maintaining current quality levels; Julia Shaw echoed this sentiment. Pat noted that the ACOs and BCBS also agreed with this recommendation. • Pat noted that the Core Team has already reviewed the measure set for Year 3. This will be a part of the sustainability conversation, since the ACO SSP pilot ends this year. <p>Lawrence noted that the Federal government is thinking about the administration's transition in the next year; we also need to be thinking about the Core Team's transition in the next few months, to ensure that members who will continue on the Core Team will have sufficient support and communication. He invited members to let him know if they have thoughts or needs about how to ensure a smooth transition.</p> | |
| 4. Public Comment | There was no public comment. | |
| 5. Next Steps, Wrap Up and Future Meeting Schedule | Next Meeting: Monday, July 11, 2016, 1:00-3:00pm, 4 th Floor Conference Room, Pavilion Building, 109 State Street, Montpelier. | |

List

Roll Call:

6/13/2016

*Paul 1^o
Steven 2^o
Motion carried.*

| Member | | 4/11/2016 Minutes | | |
|------------|------------|-------------------|-----|--|
| First Name | Last Name | | | Organization |
| Paul | Bengston | ✓ | ✓ | Northeastern Vermont Regional Hospital |
| Hal | Cohen | ✓ | ✓ | AHS -CO |
| Steven | Costantino | ✓ | ✓ | AHS - DVHA |
| Al | Gobeille | ✓ | ✓ | GMCB |
| Monica | Hutt | | — | AHS - DAIL |
| Robin | Lunge | ✓ | ✓ | AOA - Director of Health Care Reform |
| Lawrence | Miller | ✓ | ✓ | AOA - Chief of Health Care Reform |
| Steve | Voigt | ✓ | — * | ReThink Health |

QV

**Did not vote*

VHCIP Core Team Participant List

Attendance:

6/13/2016

| | |
|-----------|-------------------------------|
| C | Chair |
| IC | Interim Chair |
| M | Member |
| MA | Member Alternate |
| A | Assistant |
| S | VHCIP Staff/Consultant |
| X | Interested Party |

| First Name | Last Name | | Organization |
|-------------------|--------------------|--------------|--|
| Susan | Aranoff | <i>none</i> | AHS - DAIL |
| Ena | Backus | | GMCB |
| Susan | Barrett | | GMCB |
| Paul | Bengston | <i>phone</i> | Northeastern Vermont Regional Hospital |
| Beverly | Boget | | VNAs of Vermont |
| Harry | Chen | | AHS - VDH |
| Amanda | Cicior | | AHS - DVHA |
| Hal | Cohen | <i>phone</i> | AHS-CO |
| Amy | Coonradt | | AHS - DVHA |
| Alicia | Cooper | | AHS - DVHA |
| Steven | Costantino | <i>none</i> | AHS - DVHA, Commissioner |
| Mark | Craig | | |
| Diane | Cummings | <i>none</i> | AHS - Central Office |
| Gabe | Epstein | | AHS - DAIL |

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|-------------------|-------------------|-------------|--|
| John | Evans | | VITL |
| Jaime | Fisher | | GMCB |
| Erin | Flynn | | AHS - DVHA |
| Joyce | Gallimore | | Bi-State Primary Care |
| Lucie | Garand | | Downs Rachlin Martin PLLC |
| Christine | Geiler | | GMCB |
| Martita | Giard | | OneCare Vermont |
| Al | Gobeille | <i>None</i> | GMCB |
| Bea | Grause | | Vermont Association of Hospital and Health Systems |
| Sarah | Gregorek | | AHS - DVHA |
| Mike | Hall | | V4A |
| Carrie | Hathaway | | AHS - DVHA |
| Selina | Hickman | | AHS - Central Office |
| Monica | Hutt | | AHS - DAIL |
| Kate | Jones | | AHS - DVHA |
| Pat | Jones | <i>None</i> | GMCB |
| Joelle | Judge | <i>None</i> | UMASS |
| Sarah | Kinsler | <i>None</i> | AHS - DVHA |
| Heidi | Klein | | AHS - VDH |
| Leah | Korce | <i>None</i> | AHS - DVHA |
| Kelly | Lange | | Blue Cross Blue Shield of Vermont |
| Robin | Lunge | <i>None</i> | AOA |
| Carole | Magoffin | | AHS - DVHA |
| Georgia | Maheras | <i>None</i> | AOA |
| Steven | Maier | | AHS - DVHA |
| Lawrence | Miller | <i>None</i> | AOA - Chief of Health Care Reform |
| Meg | O'Donnell | | UVM Medical Center |
| Annie | Paumgarten | | GMCB |
| Luann | Poirer | | AHS - DVHA |
| Frank | Reed | | AHS - DMH |
| Lila | Richardson | <i>None</i> | VLA/Health Care Advocate Project |
| Larry | Sandage | | AHS - DVHA |
| Suzanne | Santarcangelo | | PHPG |

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| Julia | Shaw | <i>None</i> | VLA/Health Care Advocate Project |
| Kate | Simmons | | Bi-State Primary Care |
| Richard | Slusky | | GMCB |
| Carey | Underwood | | |
| Steve | Voigt | <i>None</i> | ReThink Health |
| Julie | Wasserman | <i>None</i> | AHS - Central Office |
| Kendall | West | | Bi-State Primary Care |
| James | Westrich | | AHS - DVHA |
| Katie | Whitney | | AHS - Central Office |
| Bradley | Wilhelm | | AHS - DVHA |
| Jason | Williams | | UVM Medical Center |
| Sharon | Winn | | Bi-State Primary Care |
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|------------------------|-------------------|--|-------------------------------------|
| Kathy | Arabia | | Southwestern Vermont Medical Center |
| Billie Lynn | Allard | | Southwestern Vermont Medical Center |
| Dorey | Demers | | Northwestern Medical Center/RiseVT |
| Cy | Jordan | | Vermont Medical Society |
| Holly | Lane | | Healthfirst, Inc. |

Holly Stone - here

Karen Smor - here

| Core Team |
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