Vermont Health Care Innovation Project
Steering Committee Meeting Minutes

<mark>*Pending Committee Approval*</mark>

Date of meeting: Wednesday, January 27, 2015, 1:00pm-2:30pm, 4th Floor Conference Room, Pavilion Building, 109 State Street, Montpelier.

Agenda Item	Discussion	Next Steps
1. Welcome and Introductions; Minutes Approval	Steven Costantino called the meeting to order at 1:01pm. A quorum was present. *Minutes Approval:* Ed Paquin moved to approve the December 2, 2015, meeting minutes. Peter Cobb seconded. Ed Paquin amended his motion to approve the minutes with the changes proposed by Mike Hall via email. Steven Costantino recommended rescinding the motion from the December 2 meeting, and proposing and voting on a new motion with the revised language. Dale Hackett moved to rescind the relevant motion from the December 2, 2015, meeting minutes by exception. Peter Cobb seconded Dale's motion. Ed Paquin rescinded his previous motion. Dale Hackett's motion carried. Ed Paquin made a new motion to send the VITL-VCN Gap Remediation and DLTSS Technology Assessment Next Steps to the Core Team with the recommendation they receive first priority for funding with remaining SIM funds, and to send the VITL-ACO Gap Remediation and ACO Informatics Proposals back to the HDI Work Group for further review and prioritization, with a vote by exception. Kim Fitzgerald seconded. • Dale Hackett asked whether the group feels this captured the intent of the December 2 discussion. Ed Paquin believes this is a fair expression of what the Steering Committee voted on. Todd Moore agreed that this was the spirit of the motion as he originally suggested it. John Evans agreed. • Georgia Maheras noted that the Core Team voted to move one of these proposals forward at its last meeting; the other will be discussed on Friday. Al Gobeille commented that these things are already in motion – this discussion is administrative detail. • Mike Hall noted that since most new projects can't have funds until July 2016 due to the delayed start of our Year 3 budget period, this new language would reflect the Steering Committee's recommendation	

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	that these projects should continue to be prioritized. Al Gobeille noted that while the Core Team appreciates the Steering Committee's recommendations, the Core Team is not bound by the Steering Committee's recommendations. Ed clarified that he knows this change doesn't have an impact on decisions already made, but believes this better reflects the conversation. A vote in the form of exception was held; the motion carried with five abstentions (Elizabeth Cote, Catherine Fulton, Jackie Majoros, Mary Val Palumbo, and Marlys Waller). Three members recused themselves (Mike Hall, John Evans, and Todd Moore).	
2. Core Team Update *Public Comment*	Georgia Maheras provided a Core Team update. - The Core Team approved DA/SSA Data Quality work at their last meeting; they also approved funding for a piece of technology to normalize how information about labs and immunizations is transmitted. - This Friday, the Core Team will be looking at a proposal around DLTSS Gap Remediation, as well as our Episodes of Care (EOC) milestone, which has been the subject of much discussion. There was no additional comment.	
3. Project Updates	Georgia Maheras provided a series of project updates. *Work Group Workplans:* Work Group workplans for 2016 are finalized and posted to our website. Workplan activities are built around our CMMI milestones and are limited to the work of the work group (not staff or contractors, in most cases). Most work groups have received a presentation about their workplans and have had an opportunity to discuss the contents. Georgia thanked project staff and co-chairs for moving through this process with us. *DLTSS Gap Remediation*: This group approved up to $800,000 to improve connectivity for home health agencies (HHAs) and Area Agencies on Aging. Susan Aranoff has been working with agencies and VITL to clarify this proposal. At the Core Team, they will be discussing implementation of VITLAccess within HHAs so HHAs are able to access VHIE records, and building more interfaces from HHAs to the VHIE to allow information to flow from HHAs to the VHIE. Georgia noted the AAAs do not fit within the federal legal framework as a "health care organization" under HIPAA – this requires us to do some legal work, which delays this part of the proposal. Georgia thanked the AAAs for working with us to figure out the best way to do this. - Total request for Friday, 1/29, is $535,000 for VITLAccess and interface work. This will allow over 600 users to access VITLAccess at the end of three phases of work. It will also build 10 different interfaces to the VHIE at 9 HHAs. - Kim Fitzgerald noted that SASH has run into similar issues as the AAAs, and requested SASH be considered in these conversations as well. - Susan Aranoff added that some other VHCIP-supported IT projects could potentially be	

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	extended to organizations like AAAs and SASH.
	• *ACO Informatics Proposal and ACO Gap Remediation:*
	   ○ ACOs are working on a revision to the Informatics proposal and expects to bring it back to the HDI Work Group in February or March.
	   ○ VITL is working on a revision to the ACO Gap Remediation proposal and expects to bring it back to the HDI Work Group in February or March.
	   ○ We will ensure that the new motion language is passed along to the HDI Work Group so they understand the intent of the December 2 conversation.	

4. Health Data Inventory Findings and Recommendations	David Healy of Stone Environmental presented on the Health Data Inventory Project, focusing on key findings and recommendations (Attachment 4). The group discussed the following: • Regarding Stone's finding that State agencies are understaffed to support data system function and maintenance, Al Gobeille provided the example of VHCURES 2.0 – GMCB did not have enough staff to support this project fully, so decided not to pursue it at that time. • Mike Hall commented that pulling in data sets from various parts of government, or from providers, State agencies often provide PDF files which are challenging to work with an analyze. David noted that the Stone team received data in a variety of formats, and one field in the inventory is file type. Mike expressed frustration that data is not more frequently available in more accessible formats. David Healy added that often, PDF reports are often developed at the request of the legislature. He commented that one of the recommendations of this report is to develop tools to make it easier for outside entities to pull data extracts from large databases themselves. He provided the example of VHCURES, to which access is currently tightly controlled. He also noted that data quality is a key piece of VHCURES. • Dale Hackett asked what the advantage would be to connecting with other states to create multi-state databases, noting that each state will have their own goals and uses for data – how can states balance uniformity and diversity? David Healy replied that if databases are developed collaboratively, this balance could be achieved at better cost. Al Gobeille added that there is a national database like VHCURES created by large commercial insurance companies and Medicare, which has allowed for comparisons between VHCURES and national data. He commented that VHCURES becomes more valuable when it's comparable to other states and national trends. Steve Kappel, who was a subcontractor on this project, agreed – as long as we can find shared data structures, we can find efficiency because we've already done some development. However, there are some processes that are localized and unique to the state (for example, how we code Medicaid eligibility). • David Healy commented that there needs to be a chief information person for each department or agency – it's not about the technology, it's about how we're using information. Al Gobeille noted that we just received the draft HIT Plan, and that this report fits well with those recommendations.	

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	• Dale Hackett commented that having Vermont-only databases could hinder our ability to perform statistically significant analyses, but wants to be able to do analyses about Vermonters only. Al Gobeille disagreed, and asked what we're trying to do with state data. He noted that the fast pace of technology and change make it hard to imagine what we'll be able to do with data in the future. He agreed that the small size of many Vermont communities, or even the full population of the state, makes it hard to do local analyses. • Jay Batra asked whether Vermont's data systems use predictive analytics like those done by Truven and Optum. Al Gobeille replied that GMCB has done some work with Truven and other organizations like this. Jay added that data storage is different than data management or information management. Al added that security for things like master patient indexes is also a significant challenge, and a very different challenge than performing analytics to answer a question, and likely requires different skills and staff. Jay asked where the management of the system itself should live. Al replied that the data users might be at GMCB, though that might not be the best place for the database to live within state government, and we don't have a good place for it within state government now. • Dale Hackett commented that quantum computing is a great tool for predictive analytics. Al Gobeille noted that the outcome of *Gobeille vs. Liberty Mutual* will be a key factor in thinking about this issue. The Supreme Court will have a decision for this case by June. • Jay Batra noted that the ONC had planned to come up with interoperable EHR (clinical data) standards by 2021, and asked how realistic that is. Georgia Maheras noted that ONC is now talking about 10, 15, and 20 year plans to achieve this goal; we know this is challenging and will take time. John Evans added ONC's 10-year interoperability plan will solve some issues, but is coming too late; in the meantime, some EHR vendors are getting together to create interoperable systems but there are competing efforts that leave out major vendors.	
5. Public Comment, Next Steps, Wrap Up and Future Meeting Schedule	There was no additional public comment. **Next Meeting:** Wednesday, February 24, 2016, 1:00-3:00pm, 4th Floor Conference Room, Pavilion Building, Montpelier.	

VHCIP Steering Committee Member List

Roll Call: 1/27/2016

First Name	Last Name	First Name	Last Name	Minutes			Organization
	2		1				
Susan	Aranoff ✓						AHS - DAIL
Rick	Barnett ✓						Vermont Psychological Association
Bob	Bick ✓						DA - HowardCenter for Mental Health
Peter	Cobb ✓						VNAs of Vermont
Steven	Costantino ✓						AHS - DVHA, Commissioner
Elizabeth	Cote ✓				A		Area Health Education Centers Program
Tracy	Dolan ✓	Heidi	Klein ✓				AHS - VDH
Susan	Donegan	David	Martini ✓				AOA - DFR
John	Evans ✓	Kristina	Choquette		recuse		Vermont Information Technology Leaders
Kim	Fitzgerald ✓						Cathedral Square and SASH Program
Catherine	Fulton ✓				A		Vermont Program for Quality in Health Care
Joyce	Gallimore						Bi-State Primary Care/CHAC
Don	George ✓						Blue Cross Blue Shield of Vermont
Al	Gobeille ✓						GMCB
Bea	Grause						Vermont Association of Hospital and Health Systems
Lynn	Guillett ✓						Dartmouth Hitchcock
Dale	Hackett ✓						None
Mike	Hall ✓	Angela	Smith-Dieng		recuse		Champlain Valley Area Agency on Aging / COVE
Paul	Harrington ✓						Vermont Medical Society
Debbie	Ingram ✓						Vermont Interfaith Action
Craig	Jones						AHS - DVHA - Blueprint
Trinka	Kerr						VLA/Health Care Advocate Project
Deborah	Lisi-Baker ✓						SOV - Consultant
Jackie	Majoros ✓				A		VLA/LTC Ombudsman Project
Todd	Moore ✓	Vicki	Loner		recuse		OneCare Vermont

Mary Val	Palumbo	✓				⅄	University of Vermont
Ed	Paquin	✓					Disability Rights Vermont
Laura	Pelosi						Vermont Health Care Association
Allan	Ramsay						GMCB
Frank	Reed	Jaskanwar	Batra ✓				AHS - DMH
Paul	Reiss						Accountable Care Coalition of the Green Mountains
Simone	Rueschemeyer						Vermont Care Network
Howard	Schapiro	✓					University of Vermont Medical Group Practice
Selina	Hickman	✓	Shawn	Skafelstad			AHS - Central Office
Julie	Tessler		Marlys	Waller ✓	⅄	Ⅳ	DA - Vermont Council of Developmental and MH Services
Sharon	Winn						Bi-State Primary Care
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VHCIP Steering Committee Participant List

Attendance:

1/27/2016

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

First Name	Last Name		Organization	Steering Committee
Susan	Aranoff	*None*	AHS - DAIL	S/M
Ena	Backus		GMCB	X
Melissa	Bailey		Vermont Care Network	X
Heidi	Banks		Vermont Information Technology Leaders	X
Rick	Barnett	*None*	Vermont Psychological Association	M
Susan	Barrett		GMCB	X
Jaskanwar	Batra	*None*	AHS - DMH	MA
Bob	Bick		DA - HowardCenter for Mental Health	M
Martha	Buck		Vermont Association of Hospital and Health Systems	A
Amanda	Ciecior		AHS - DVHA	S
Sarah	Clark		AHS - CO	X
Peter	Cobb	*None*	VNAs of Vermont	M
Lori	Collins		AHS - DVHA	X
Amy	Coonradt		AHS - DVHA	S
Alicia	Cooper		AHS - DVHA	S
Steven	Costantino	*None*	AHS - DVHA, Commissioner	C

Elizabeth	Cote	*Mine*	Area Health Education Centers Program	M
Diane	Cummings	*here*	AHS - Central Office	S
Susan	Devoid		OneCare Vermont	A
Tracy	Dolan	*Mine*	AHS - VDH	M
Richard	Donahey		AHS - Central Office	X
Susan	Donegan		AOA - DFR	M
Gabe	Epstein		AHS - DAIL	S
John	Evans	*Mine*	Vermont Information Technology Leaders	M
Jaime	Fisher		GMCB	A
Kim	Fitzgerald	*here*	Cathedral Square / SASH	M
Katie	Fitzpatrick		Bi-State Primary Care	A
Erin	Flynn		AHS - DVHA	S
Aaron	French		AHS - DVHA	X
Catherine	Fulton	*Mine*	Vermont Program for Quality in Health Care	M
Joyce	Gallimore		Bi-State Primary Care/CHAC	M
Lucie	Garand		Downs Rachlin Martin PLLC	X
Christine	Geiler		GMCB	S
Don	George		Blue Cross Blue Shield of Vermont	M
Al	Gobeille	*here*	GMCB	C
Bea	Grause		Vermont Association of Hospital and Health Systems	M
Sarah	Gregorek		AHS - DVHA	A
Lynn	Guillett		Dartmouth Hitchcock	M
Dale	Hackett	*here*	None	M
Mike	Hall	*here*	Champlain Valley Area Agency on Aging / COVE	M
Janie	Hall		OneCare Vermont	A
Thomas	Hall		Consumer Representative	X
Bryan	Hallett		GMCB	S
Paul	Harrington		Vermont Medical Society	M
Carrie	Hathaway		AHS - DVHA	X
Diane	Hawkins		AHS - DVHA	X
Karen	Hein	*Mine*		X
Selina	Hickman	*here*	AHS - Central Office	M
Debbie	Ingram		Vermont Interfaith Action	M
Craig	Jones		AHS - DVHA - Blueprint	M

Kate	Jones		AHS - DVHA	S
Pat	Jones		GMCB	S
Joelle	Judge	hue	UMASS	S
Trinka	Kerr		VLA/Health Care Advocate Project	M
Sarah	Kinsler	here	AHS - DVHA	S
Heidi	Klein		AHS - VDH	S/MA
Kelly	Lange		Blue Cross Blue Shield of Vermont	X
Deborah	Lisi-Baker		SOV - Consultant	M
Sam	Liss		Statewide Independent Living Council	X
Vicki	Loner		OneCare Vermont	MA
Robin	Lunge		AOA	X
Carole	Magoffin	phone	AHS - DVHA	S
Georgia	Maheras	nue phone	AOA	S
Steven	Maier		AHS - DVHA	S
Jackie	Majoros	phone	VLA/LTC Ombudsman Project	M
Carol	Maloney		AHS	X
David	Martini	hue	DFR	MA
Mike	Maslack			X
Alexa	McGrath		Blue Cross Blue Shield of Vermont	A
Darcy	McPherson		AHS - DVHA	X
Marisa	Melamed		AOA	S
~~Jessica~~	~~Mendizabal~~		AHS - DVHA	S
Madeleine	Mongan		Vermont Medical Society	X
Todd	Moore	phone	OneCare Vermont	M
Brian	Otley		Green Mountain Power	X
Dawn	O'Toole		AHS - DCF	X
Mary Val	Palumbo	phone	University of Vermont	M
Ed	Paquin	here	Disability Rights Vermont	M
Annie	Paumgarten	hue	GMCB	S
Laura	Pelosi		Vermont Health Care Association	M
Judy	Peterson		Visiting Nurse Association of Chittenden and Grand Isle Counties	M
Luann	Poirer		AHS - DVHA	S
Allan	Ramsay		GMCB	M
Frank	Reed		AHS - DMH	M
Paul	Reiss		Accountable Care Coalition of the Green Mountains	M

Simone	Rueschemeyer		Vermont Care Network	M
Jenney	Samuelson		AHS - DVHA - Blueprint	X
Larry	Sandage		AHS - DVHA	S
Suzanne	Santarcangelo		PHPG	X
Howard	Schapiro		University of Vermont Medical Group Practice	M
Julia	Shaw		VLA/Health Care Advocate Project	X
Shawn	Skaflestad		AHS - Central Office	MA
Mary	Skovira		AHS - VDH	A
Richard	Slusky		GMCB	S
Angela	Smith-Dieng		Area Agency on Aging	MA
Holly	Stone	Nev	UMASS	S
Beth	Tanzman		AHS - DVHA - Blueprint	X
Julie	Tessler		DA - Vermont Council of Developmental and Mental Health Serv	M
Beth	Waldman		SOV Consultant - Bailit-Health Purchasing	S
Julie	Wasserman	Nve	AHS - Central Office	S
Spenser	Weppler		GMCB	S
Kendall	West		Bi-State Primary Care Association	X
James	Westrich		AHS - DVHA	S
Bradley	Wilhelm		AHS - DVHA	S
Sharon	Winn		Bi-State Primary Care	M
Cecelia	Wu		AHS - DVHA	S
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