# Payment Models Work Group Meeting Agenda 10-06-14

#### VT Health Care Innovation Project Payment Models Work Group Meeting Agenda Monday, October 6, 2014 2:00 PM – 4:00 PM.

#### DVHA Large Conference Room, 312 Hurricane Lane, Williston

Call in option: 1-877-273-4202

Conference Room: 2252454

Item #	Time Frame	Topic	Presenter	Decision Needed?	Relevant Attachments
1	2:00 – 2:15	Welcome and Introductions Approve meeting minutes Optional 'Data' meeting	Steve Rauh	Y – Approve minutes	Attachment 1: Meeting Minutes
		announcement	Kara Suter		
2	2:15-2:45	Planning grant for Frail and Elderly Care Q/A	Cy Jordan	Y- Approve funds	Attachment 2: Grant proposal (to be distributed later)
		Vote	Steve Rauh		(to be distributed later)
3	2:45-3:35	Total Cost of Care Comment Review	Kara Suter	N	Attachment 3: Comments (to be distributed later)
4	3:35-3:45	Gate and Ladder	Kara Suter	N	
5	3:45 – 3:50	Public Comment		N	
6	3:50 – 4:00	Next Steps and Action Items		N	Next Meeting: Monday, November 3, 2014 2:00 PM – 4:30 PM. EXE - 4th Floor Conf Room, Pavilion Building, Montpelier

## Attachment 1 - Payment Models Work Group Minutes 9-16-14

#### VT Health Care Innovation Project Payment Models Work Group Meeting Agenda

#### Tuesday, September 16, 2014 9:00 AM – 11:30 AM BCBSVT- 445 Industrial Lane, Berlin (Mtg Room 130s)

Call in option: 1-877-273-4202

**Conference Room: 2252454** 

Topic	Notes	Next Steps
Welcome and Introductions Approve meeting minutes	Don George called the meeting to order at 9:05am. Roll call attendance was taken. Paul Harrington made a motion to accept the minutes and Richard Slusky seconded. Minutes passed unanimously.	
Presentation— Frail and Elderly	<ul> <li>Kara Suter introduced the panel of speakers for this presentation. The group is bringing forth a presentation to request funding for their proposal around frail and elderly care from this WG. The following were questions or comments to the presentation: <ul> <li>Cy Jordan requests a planning grant to flesh out community needs and how the team can best address the frail and elderly population and most effectively care for them</li> <li>Paul Harrington asked the presentation team to lay out the proposed budget. Cy Jordan discussed the budget as it is laid out in the presentation and what funds would be used for. Roughly half is for foundation support</li> <li>Lila Richardson asked how much this team has looked at the Duals population in VT. Cy Jordan responded that they want to focus on the patients, and 'duals' is an insurance description. Focus is on a capitated payment for a sub population – which is often duals. Josh Plavin added that they wanted to focus in on this particular frail and elderly population. Sarah responded that there is likely a large overlap</li> <li>Comment that there is a large difference in policy and process – clinical need and policy making are rarely in line and this WG has the opportunity to align those needs.</li> <li>Bard Hill commented on the benefit that could come from looking at past Vermont experiences and pilots to aid in planning this team's care delivery process. Also mentioned care models work and VA models. Finally, Commonwealth Care Alliance might be a good program to reference</li> </ul></li></ul>	

- Fay Homan mentioned the importance of primary care in the hospital setting and utilizing those people that know the patient best before or in the ED setting.
- It Takes a Village Slide referenced: comments on the confusion that exists in providing care. Also discusses the 'parish nurse' concept. Suggests the care provided by these programs to care for elders are low cost, all inclusive and most effective and should be further explored within certain communities.
- Julie Wasserman asked about the CMS 72 hr Rule. Kara Suter responded that if this group were to fund the proposal, WG needs to think about existing and new obstructions, both governmental and payer. One such issue is the 72 hr Rule that has the potential of being waived by CMS. This is just one example, likely many others that are going to have to be considered in funding this initiative. Cy Jordan explained the 72 Hour Rule to the WG. Julie Wasserman asked who pays for nursing home stay if 72 hr waived, Cy responded that Medicare is willing to work with ACOs to share this cost. Outside ACOs it is not possible.
- Bard Hill asked for clarification on the 72 hr rule. Also commented that
  this issue received a lot of debate in previous dual discussions and listed
  potential competing priorities and opinion to waiving this rule. Kara
  Suter asked the WG to disconnect previous work done by the duals group
  around payment and financing issues when looking at this proposal.
- Julie Wasserman commented that there needs to be a pro and con list on this issues
- Don George asked how this program would work with existing Blue Print work and incentive structures. Cy Jordan and team responded that this program would not be redundant. Blue Print manages many panels of patients, but this is one panel where there is currently not enough funding to provide appropriate care additional time and assistance is needed. BP is limited in its abilities to provide appropriate care for this population.
- This pilot will help to better update and lay out the needs of this panel. Team feels that BP can be helped by this pilot to truly start providing the services they aim to provide currently not functioning at it's prime.
- Don George would rather not fund new planning and payment models around existing old care models with uncertainty in going forward in payment reform in the state.
- Richard Slusky asked about how the team sees capitated payments working with this pilot in the future
- Cy Jordan mentioned that the deliverables listed need to determine how to

	show practical and meaningful value measures
	Don George recommended not focusing on any certain payer, leaves end
	of life care up to group and pilot needs to better flesh out deliverables and
	specific processes.
	Comment on how to manage former population if the primary care docs
	are being allocated out to the frail and elderly population. Sarah Kemble
	says that the new system of primary care delivery aims to make up for this
	issue by creating more efficient ways to care for patients.
	Paul Harrington commented that the expansion of scope this WG just
	discussed would likely come with a revised budget when an updated
	proposal comes forth.
Update VMSSP Total Cost of	Kara Suter presented on Attachment 3, the following were comments to the
Care Expansion Year 2	presentation:
	<ul> <li>Georgia Maheras: why are these services the focus in Yr 2? These</li> </ul>
	programs have specific regulatory and statutory rules and represent
	another level of complexity. With limited data thus far in year 1 – needed
	to focus on services that could be tackled.
	Year 3 items are significantly more difficult, Yr 2 aimed at ramping up to
	that
	Nancy Hogue asked for clarification on Pharmacy – only Pharmacies paid
	through hospital outpatient? No, those are already included yr 2 would
	include pharmacy spend.
	Richard Slusky asked if this is just Medicaid – yes, just Medicaid.      Real Hamington asked how ACOs would not additional socious through
	Paul Harrington asked how ACOs would get additional savings through  Phormacy if providers connect see where the savings in prescribing ore
	Pharmacy if providers cannot see where the savings in prescribing are.  Kara Suter responded that this is the type of feedback needed from the
	group.
	<ul> <li>Richard Slusky asks about the ability for ACOs to voluntarily do this.</li> </ul>
	Would ACOs have to incorporate all or just some new measures— not yet
	decided.
	<ul> <li>Don George asked if it will be coming back to PMWG. No, straight to</li> </ul>
	Steering Committee. Don Geroge disappointed, would like this WG to
	have more time to comment. Kara Suter said in Medicaid program – no
	downside risk for 3 years, but in Yr 3 they have to take on the broader set
	of TCOC measures.
	Paul Harrington asked about why there is only voluntary participation on
	Yr 2 requirements, while Yr 3 there is no opt out. Sees a disconnect
	between payments and new measures in years 2 and 3. Kara responded

	<ul> <li>that they are open to that idea, but feasibility with timing is an issue. There are some measures in TCOC that lined up with M/E measures.</li> <li>Yr 3 work will begin almost immediately and discussions will begin soon – not such a quick turn around as in Yr 2</li> <li>Timeline from ACO to make decision of whether or not to participate? Current contracts give ACO 1 month to decide if they will take on additional TCOC components.</li> <li>Steering Committee Oct 1 PMWG Oct 6 Core Team Oct 8 – possible for PMWG to get this information and materials back before next Core Team meeting</li> </ul>	Comments to Amanda.ciecior@state.vt.us by Sept 26
Prioritizing Episodes in Vermont	Kara Suter presented attachments 4A and 4B	
Episodes of Care Data Q/A session	<ul> <li>Kara Suter requested that questions be about understanding the data, analyzing data will come at the next WG meeting</li> <li>Julie Wasserman asked about how to interpret PAC %</li> <li>Paul Harrington asked about Slide 38 and how to calculate that in a real life example.</li> <li>PAC rate equal PAC costs? Depends on the graph or measure – rates are expressed in terms of frequency or dollars. If dollars, it is a % of dollars. If frequency, it is % of utilization.</li> <li>This presentation will be brought up for discussion again in October. Contact Amanda.ciecior@state.vt.us with questions</li> </ul>	
Public Comment	Question about the Sept 26 deadline for TCOC comments. Georgia clarified that the deadline still exists, so that it can be presented to the Steering Committee before coming back to the PMWG in Oct.	
Next Steps and Action Items	Next Meeting: Oct 6, 2014 2:00-4:30 PM. DVHA large conference room, 312 Hurricane Lane, Williston	Next Meeting: Monday, October 6, 2014 2:00 PM – 4:30 PM. DVHA Large Conference Room, 312 Hurricane Lane, Williston

### **VHCIP PMWG Roll Call 9-16-14**

С	Chair
IC	Interim Chair
М	Member
MA	Member Alternate

minutes 1° Paul 2° Richard

First Name	Last Name		Title	Organization	Pymt Model:
Carmone	Austin	/		MVP Health Care	М
Heather	Bushey		CFO	Planned Parenthood of Northern New En	М
Diane	Cummings	V	Financial Manager II	AHS - Central Office	М
Michael	Curtis		Director of Child, Youth & Family Serv	Washington County Mental Health Servic	М
Mike	DelTrecco	V		Vermont Association of Hospital and Hea	М
Catherine	Fulton		Executive Director	Vermont Program for Quality in Health Ca	М
Гоусе	Gallimore		Director, Community Health Paymen	Bi-State Primary Care/CHAC	MA/M
Bea	Grause		President	Vermont Association of Hospital and Hea	MA
Lynn	Guillett			OneCare Vermont	MA
Heidi	Hall		Financial Director	AHS - DMH	М
Thomas	Hall			Consumer Representative	М
Paul	Harrington		President	Vermont Medical Society	М
Erik	Hemmett			Hemmet Family Chiropractic & Rehab	М
Bard	Hill		Director - Policy, Planning & Data Uni	AHS - DAIL	М
Craig	Jones-		Director	AHS - DVHA - Blueprint	MA
Pat	Jones-			GMCB	MA
Sarah	King		CFO	Rutland Area Visiting Nurse Association 8	М
Kelly	Lange		Director of Provider Contracting	Blue Cross Blue Shield of Vermont	М
Bill	Little		Vice President	MVP Health Care	MA
David	Martini			AOA - DFR	М
lames	Mauro.			Blue Cross Blue Shield of Vermont	MA
Sandy	McGuire	V	CFO	HowardCenter for Mental Health	М
Todd	Moore		CEO	OneCare Vermont	М

Jessica	Oski			Sirotkin & Necrason	MA
Tom	Pitts		CFO	Northern Counties Health Care	М
Stephen	Rauh			GMC Advisory Board	C/M
Lori	Real		Chief Operating Officer	Bi-State Primary Care/CHAC	MA
Paul	Reiss		Executive Director,	Accountable Care Coalition of the Green	М
Lila	Richardson		Attorney	VLA/Health Care Advocate Project	М
Howard	Schapiro		Interim President	University of Vermont Medical Group Pra	М
Rachel	Seelig		Attorney	VLA/Senior Citizens Law Project	MA
Julia	Shaw	A	Health Care Policy Analyst	VLA/Health Care Advocate Project	М
Ted	Sirotta		CFO	Northwestern Medical Center	М
Richard	Slusky		Payment Reform Director	GMCВ	S/M
Kara	Suter		Reimbursement Director	AHS - DVHA	S/M
Sharon	Winn		Director, Vermont Public Policy	Bi-State Primary Care	М
Marie	Zura	-	Director of Developmental Services	HowardCenter for Mental Health	MA

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. Pat Somes

· Carmen Austin

. Longe gallimore

· Linda toth.

· Dancy Hague

Abe Bernan

· Evin flynn

· Lacy germaine

Sandy Mc Soire

### **VHCIP PMWG Attendance 9-16-14**

С	Chair
IC	Interim Chair
M	Member
MA	Member Alternate
Α	Assistant
S	Staff
Х	Interested Party

First Name	Last Name		Title	Organization	Pymt Models
April	Allen		Director of Policy and Planning	AHS - DCF	Х
Carmone	Austin	phone		MVP Health Care	М
Ena	Backus			GMCB	х
Melissa	Bailey			Otter Creek Associates and Matrix Health	Х
Michael	Bailit	prone		Bailit-Health Purchasing	х
Susan	Barrett	<i>V</i>	Executive Director	GMCB	х
Anna	Bassford			GMCB	Α
Kate	Bazinsky			Bailit-Health Purchasing	X
Abe	Berman	phone		OneCare Vermont	Х
Martha	Buck	/		Vermont Association of Hospital and Hea	Α
Heather	Bushey	()60 11	CFO	Planned Parenthood of Northern New En	M
Gisele	Carbonneau			HealthFirst	Α
Amanda	Ciecior	auti	Health Policy Analyst	AHS - DVHA	S
Ron	Cioffi		CEO	Rutland Area Visiting Nurse Association 8	Х
Lori	Collins			AHS - DVHA	х
Amy	Coonradt	any Cenato	Health Policy Analyst	AHS - DVHA	Х
Alicia	Cooper	Alicla Cooper	Quality Oversight Analyst	AHS - DVHA	S
Michael	Counter	a a	Sr. Director of Finance	Visiting Nurse Association & Hospice of V	Х
Diane	Cummings	Wane grane	Financial Manager II	AHS - Central Office	М
Michael	Curtis		Director of Child, Youth & Family Ser	Washington County Mental Health Servic	М
Danielle	Delong			AHS - DVHA	х
Mike	DelTrecco	phone		Vermont Association of Hospital and Hea	М
Michael	Donofrio	V	General Council	<b>GMCB</b>	х
Audrey	Fargo		Administrative Assistant	Vermont Program for Quality in Health C	A
Cyndy	Fischer			OneCare Vermont	Α
Kathleen	Fish		Director actuarial Services	MVP Health Care	х
Katie	Fitzpatrick		VT Administrative Asst.	Bi-State Primary Care	Α
Erin	Flynn	phone	Health Policy Analyst	AHS - DVHA	S

Catherine	Fulton		Executive Director	Vermont Program for Quality in Health C	M
Joyce	Gallimore		Director, Community Health Paymen	Bi-State Primary Care/CHAC	MA/M
Lucie	Garand		Senior Government Relations Special	Downs Rachlin Martin PLLC	х
Andrew	Garland			MVP Health Care	х
Christine	Geiler		Grant Manager & Stakeholder Coord	GMCB	S
Don	George	D6.	President and CEO	Blue Cross Blue Shield of Vermont	С
Carrie	Germaine	o none		AHS - DVHA	х
Jim	Giffin		CFO	AHS - Central Office	х
Al	Gobeille		Chair	GMCВ	х
Bea	Grause		President	Vermont Association of Hospital and Hea	MA
Lynn	Guillett			OneCare Vermont	MA
Heidi	Hall		Financial Director	AHS - DMH	М
Janie	Hall		Corporate Assistant	OneCare Vermont	А
Thomas	Hall		T.	Consumer Representative	М
Bryan	Hallett			*	х
Paul	Harrington	PC 14	President	Vermont Medical Society	М
Carrie	Hathaway		Financial Director III	AHS - DVHA	х
Carolynn	Hatin			AHS - Central Office - IFS	x
Erik	Hemmett			Hemmet Family Chiropractic & Rehab	M
Selina	Hickman		Policy Director	AHS - DVHA	x
Bard	Hill	Router	Director - Policy, Planning & Data Un		М
Churchill	Hindes	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	coo	OneCare Vermont	х
Con	Hogan	G G	Board Member	GMCB	х
Nancy	Hogue	phone	Director of Pharmacy Services	AHS - DVHA	x
Craig	Jones	process	Director	AHS - DVHA - Blueprint	MA
Pat	Jones	phone		GMCB	MA
Kevin	Kelley	1	CEO	CHSLV	×
Melissa	Kelly		А	MVP Health Care	x
Sarah	King		CFO	Rutland Area Visiting Nurse Association 8	М
Kelly	Lange			Blue Cross Blue Shield of Vermont	M
Diane	Lewis		Shocks, of Frontier Contracting	AOA - DFR	A
Bill	Little	2	Vice President	MVP Health Care	MA
		5	vice i resident	AOA	S
Georgia	Maheras	10			
David	Martini			AOA - DFR	M
Mike	Maslack Matulis				X

Kath	lein Civil agher	Kay 8	student of pr. Homan		
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James	Mauro			Blue Cross Blue Shield of Vermont	MA
Alexa	McGrath			Blue Cross Blue Shield of Vermont	Α
Sandy	McGuire		CFO	HowardCenter for Mental Health	M
Kimberly	McNeil		Payment Reform Policy Intern	AHS - DVHA	X
Todd	Moore	<u> </u>	CEO	OneCare Vermont	М
Jessica	Oski			Sirotkin & Necrason	MA
Annie	Paumgarten	-	Eveluation Director	GMCB	X
Tom	Pitts		CFO	Northern Counties Health Care	М
Luann	Poirer		Administrative Services Manager I	AHS - DVHA	Х
Stephen	Rauh	She		GMC Advisory Board	C/M
Lori	Real		Chief Operating Officer	Bi-State Primary Care/CHAC	MA
Paul	Reiss		Executive Director,	Accountable Care Coalition of the Green	М
Lila	Richardson	hela Richardson	Attorney	VLA/Health Care Advocate Project	М
Howard	Schapiro		Interim President	University of Vermont Medical Group Pra	М
Rachel	Seelig		Attorney	VLA/Senior Citizens Law Project	MA
Julia _	Shaw	Galse	Health Çare Policy Analyst	VLA/Health Care Advocate Project	М
Tom	Simpatico			AHS - DVHA	х
Ted	Sirotta	2	CFO	Northwestern Medical Center	М
Richard	Slusky	NS.	Payment Reform Director	GMCB	S/M
Kara	Suter	KS .	Reimbursement Director	AHS - DVHA	S/M
Beth	Tanzman	00	Assistant Director of Blueprint for He		X
Anya	Wallack		Chair	SIM Core Team Chair	X
Marlys	Waller	MW	S .	Vermont Council of Developmental and N	x
Barbara	Walters		Chief Medical Director	OneCare Vermont	x
Julie	Wasserman	(W	VT Dual Eligible Project Director	AHS - Central Office	X
Spenser	Weppler	Sul		GMCB	s
Kendall	West	000		GIVIED	X
Bradley	Wilhelm	B-	Senior Policy Advisor	AHS - DVHA	
Sharon	Winn		Director, Vermont Public Policy		X
Cecelia	Wu	1		Bi-State Primary Care	M
Erin	Zink		Healthcare Project Director	AHS - DVHA	X
	Zura		Disaster of Development 15	MVP Health Care	X
Marie Donnis	McLellough M		Comm bor Tric Consultor	Howard Center for Mental Health  Dart. Centers for Health	MA
C	Jucken W	D Consult		VMS Foult	
Tost	Pl. A LA	179///	las Alberta	(IIII)	
Sarah	Kemble mg	Small	Former CMO	SMCS	
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	DUHA		7	64	Linda
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