

**Vermont Health Care Innovation Project
Population Health Work Group Meeting Minutes**

Pending Work Group Approval

Date of meeting: September 15, 2015; 2:30 PM – 4:00 PM; Calvin Coolidge Conference Room, National Life Building, Montpelier

| Agenda Item | Discussion | Next Steps |
|--|---|------------|
| <p>1. Welcome, Roll Call, & Agenda Review</p> | <p>Tracy Dolan called the meeting to order at 2:32pm. A roll call attendance was taken and a quorum was not present.</p> | |
| <p>2. Project Changes and Work Group Continuity</p> | <p>Tracy Dolan introduced Georgia Maheras, VHCIP Project Director who discussed the upcoming project reorganization from the information included in the materials packet.</p> <p>Project Reorganization: There are five main components of the VHCIP:</p> <ul style="list-style-type: none"> • Project/Program Management • Evaluation • Care Delivery and Practice Transformation • Health Data Infrastructure • Payment Model Design and Implementation <p>The reorganization plan merges several groups and their respective work plans.</p> <ul style="list-style-type: none"> • The new <i>Payment Model Design and Implementation Work Group</i> will incorporate the QPM, Population Health and DLTSS Work Groups' work plans, activities, and members. • The new <i>Care Delivery and Practice Transformation Work Group</i> will encompass the CMCM and DLTSS Work Groups' work plans, activities, and members, as well as the provider sub-grant program. • The new <i>Health Data Infrastructure Work Group</i> will replace the HIE/HIT Work Group. • The current <i>Workforce Work Group</i>, established via executive order, will not change. | |

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| | <p>Memberships are being reviewed and established now. Participants are invited to self-select membership and one or two alternates, and provide us with feedback. We are requesting this by the end of this week (9/18/15)</p> <p>New meetings will begin in October and will continue through 2016.</p> <p>Workplan coordination is underway to ensure that milestones are appropriately allocated to work groups and that no milestones are missing.</p> <p>Website redesign and organization is underway. Monthly status reports are being restructured to be more logical and easier to find and read.</p> <p>Tracy Dolan added that the Population Health Work Group will join the new Payment reform group to ensure that the lens of population health is applied to the conversations that will now be happening in the same room. The group does, however, have some unique work to do on its own, such as the Population Health Plan. As well there are conversations to be had around sustainability. For example, looking beyond payment models to potential other sources of financing to help foster population health improvement initiatives in a sustainable manner. How do we pay for population health and prevention in an ongoing way? Jim Hester is working on a short white paper on this topic.</p> <p>Miriam Sheehy commented that merging the groups is a great idea. The overlap and synergy between some of the groups is evident so having everyone together is going to be a good move.</p> | |
| <p>3. Approval of Minutes</p> | <p>A quorum was not achieved.</p> | |
| <p>4. Accountable Communities for Health</p> | <p>Accountable Communities for Health: A discussion about next steps</p> <p>Heidi Klein reviewed the 9 core elements of the Accountable Community for Health (ACH).</p> <p>At the last work group meeting, participants reviewed the recommendations from the Prevention Institute and the key strategic questions from the Center for Health Care Strategies. Heidi has now put together a proposal that outlines potential next steps and topics for further discussion as the group continues to consider the creation of an ACH.</p> <p>The high level vision of an ACH would be to ‘align and mutually reinforce evidence based strategies in a geographic area to improve specific health outcomes.’</p> | |

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| | <p>Goals – two tiers</p> <ol style="list-style-type: none"> 1) State level -- Pulled from state health improvement plan – focus on chronic disease, mental health and substance abuse, and immunization 2) Regional level -- combined the goals of the emerging UCCs and the Community Health Needs (CHN) assessments in which hospitals engage as a mechanism for providing a foundation to determine regional goals for population health improvement. <p>Josh Plavin commented that the federal requirements for CHN plans at the hospitals can be leveraged for activities and initiatives that we’re talking about.</p> <p>What do we need: Core indicators at the regional level as well as the statewide goals. There might be a few different places from which to draw these.</p> <p>Next steps: Bring together the people who are already working towards the goals of an Accountable Community for Health from different communities around the state. Consider how to build on existing efforts to integrate services for individuals and expanding it to the next circle out to the community wide population health improvement. These innovators will be brought together to :</p> <ul style="list-style-type: none"> • Learn with and from one another • Identify the practical steps and developmental stages in creating an Accountable Community for Health • Inform the development of necessary state level policy and guidance to support regional efforts. <p>Ex: housing for a couple of high needs patients versus addressing housing for the larger community need.</p> <p>Laural Ruggles offered her thoughts on what she views as missing from the overall proposal:</p> <ul style="list-style-type: none"> • Health in all Policies • Community Development people <p>What do we mean when we say health in all policies? Getting the SOV more involved and bringing non-health partners and more teeth to the table in terms of making regulations and policies that include health improvement.</p> <p>Sue Aranoff commented that in her review of the hospital budget approval process that it is hard to find concrete data on the amount of funding spent on the social and economic contributors to health outcomes. In her review, there are a couple of line items in the hospital budgets that appear to be aligned with this work. She suggested that it would be helpful to collect the data and analyze it to help determine how hospital funds are allocated and consider shift towards integration of care and community wide strategies to improve population health.</p> | |

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| | <p>Laural Ruggles pointed out that hospitals are not allowed to make as much money as is needed to get the work done – which is why we need to bring in more stakeholders to help with these efforts.</p> <p>Jim Hester – the guidance from the state could also include structured guidance toward those policy levers.</p> <p>Tracy added that it would also be beneficial to be more specific about the kinds of things that are working in the regional groups and around the state. The proposal for the next step for ACHs is to bring together existing leaders to learn from and with one another.</p> <p>Mark Companion from the Vermont Housing Development Board introduced himself and indicated that he’s been working on bringing his organization’s services to a broader set of recipients and that housing services can play an essential part of the ACH structure. He suggested that social impact bonds, such as those as being pursued by AHS are a good vehicle for funding – and the driver is housing – and not healthcare.</p> <p>The groups discussed the notion of breaking down the barriers between various work areas, and that it is a mighty task to “learn our world” of healthcare. The ACH is a great way to bring those barriers down because in that model all the players are coming together.</p> <p><i>How do we engage those who are already on the ground doing this work, but not overwhelm them?</i></p> <p>Jenney Samuelson offered a comment that so many of the people involved in this effort are already convening in some forum or another –and some of these groups just cannot take another group to convene. So maybe the opportunity is to fund and support the initiatives they are already contemplating.</p> <p>Laural Ruggles added that we should be meeting the community where they’re at.</p> <p>Heidi then spoke of how the Population Health Work Group has some funding to help create the space for bringing together groups to think about what the next steps might be for moving toward an ACH model.</p> <p>Jim Hester questioned if we want to put some of our resources toward starting the next wave of these kinds of initiatives.</p> <p>Kim McClellan asked if there is one place to know where the various communities or regional efforts are at in terms of these 9 core elements or other similar initiatives. We do know what’s happening at the UCC level thanks to Miriam Sheehy capturing that on an on-going basis. We have not yet created an assessment or inventory of activities beyond the UCC.</p> | |

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| | <p>Jesse de la Rosa noted the need to share what we have learned already with others who have not been engaged in the VHCIP project. He suggested that perhaps there's a way to film/record the initial summit of these conversations that could then be used as an outreach to those kinds of communities who are feeling disenfranchised. Now is the time for awareness-raising.</p> | |
| <p>4. Next Steps</p> | <p>Karen Hein closed the meeting with a look ahead. The Population Health Work Group has morphed and will become part of the payment models new larger group. And the group will continue to meet quarterly to review progress on the Population Health Plan– perhaps the next date in December.</p> <p>Please watch your inbox in the coming weeks for new VHCIP meeting invitations!</p> | |

VHCIP Population Health Work Group Member List

Roll Call: 9/15/2015

| Member | | Member Alternate | | Minutes | | |
|------------|-----------------|------------------|-------------|---------|--|--|
| First Name | Last Name | First Name | Last Name | | | Organization |
| Susan | Aranoff ✓ | | | | | AHS - DAIL |
| Jill Berry | Bowen | | | | | Northwestern Medical Center |
| Mark | Burke | | | | | Brattleboro Memorial Hospital |
| Donna | Burkett | | | | | Planned Parenthood of Northern New England |
| Dr. Dee | Burroughs-Biron | Trudee | Ettlinger | | | AHS - DOC |
| Daljit | Clark | Jenney | Samuelson ✓ | | | AHS - DVHA |
| Peter | Cobb | | | | | VNAs of Vermont |
| Judy | Cohen | | | | | University of Vermont |
| Jesse | de la Rosa ✓ | | | | | Consumer Representative |
| Tracy | Dolan ✓ | Heidi | Klein ✓ | | | AHS - VDH |
| Joyce | Gallimore | | | | | CHAC |
| Karen | Hein ✓ | | | | | Dartmouth Medical School |
| Kathleen | Hentcy | Charlie | Biss ✓ | | | AHS - DMH |
| Penrose | Jackson | | | | | UVM Medical Center |
| Pat | Jones | | | | | GMCB |
| Patricia | Launer ✓ | | | | | Bi-State Primary Care |
| Lyne | Limoges | | | | | Orleans/Essex VNA and Hospice, Inc. |
| Ted | Mable | Kimberly | McClellan ✓ | | | DA - Northwest Counseling and Support Services |
| Carol | Maloney ✓ | | | | | AHS - Central Office |
| Melissa | Miles | | | | | Bi-State Primary Care |
| Laural | Ruggles ✓ | | | | | Northeastern Vermont Regional Hospital |
| Julia | Shaw | | | | | VLA/Health Care Advocate Project |
| Melanie | Sheehan | | | | | Mt. Ascutney Hospital and Health Center |
| Miriam | Sheehey | | | | | OneCare Vermont |
| Shawn | Skaflestad ✓ | | | | | AHS - Central Office |
| Chris | Smith ✓ | | | | | MVP Health Care |
| JoEllen | Tarallo-Falk | Lori | Augustyniak | | | Center for Health and Learning |
| Karen | Vastine | | | | | AHS - DCF |
| Teresa | Voci ✓ | LaRae | Francis | | | Blue Cross Blue Shield of Vermont |
| Stephanie | Winters | | | | | Vermont Medical Society |
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 Josh Flavin - BOBSVT
 NO QUORUM

VHCIP Population Health Work Group Participant List

Attendance:

9/15/2015

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

| First Name | Last Name | | Organization | Population Health |
|------------|-----------------|------------------|--|-------------------|
| Susan | Aranoff | <i>Wre</i> | AHS - DAIL | S/M |
| Julie | Arel | | VDH | X |
| Lori | Augustyniak | | Center for Health and Learning | MA |
| Ena | Backus | | GMCB | X |
| Susan | Barrett | | GMCB | X |
| Bob | Bick | | DA - HowardCenter for Mental Health | X |
| Charlie | Biss | <i>love none</i> | AHS - Central Office - IFS / Rep for AHS - DMH | X/MA |
| Mary Lou | Bolt | | Rutland Regional Medical Center | X |
| Jill Berry | Bowen | | Northwestern Medical Center | M |
| Mark | Burke | | Brattleboro Memorial Hopsital | M |
| Donna | Burkett | | Planned Parenthood of Northern New England | M |
| Dr. Dee | Burroughs-Biron | | AHS - DOC | M |
| Jan | Carney | | University of Vermont | X |
| Amanda | Ciecior | | AHS - DVHA | S |
| Barbara | Cimaglio | | AHS - VDH | X |

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|------------------|--------------------|-------------|--|-----|
| Daljit | Clark | | AHS - DVHA | MA |
| Peter | Cobb | | VNAs of Vermont | M |
| Judy | Cohen | | University of Vermont | M |
| Amy | Coonradt | | AHS - DVHA | S |
| Alicia | Cooper | | AHS - DVHA | S |
| Janet | Corrigan | | Dartmouth-Hitchcock | X |
| Brian | Costello | | | X |
| Mark | Craig | | | X |
| Wendy | Davis | | University of Vermont | X |
| Jesse | de la Rosa | | Consumer Representative | M |
| Micah | Demers | | Blue Cross Blue Shield of Vermont | X |
| Trey | Dobson | | Dartmouth-Hitchcock | X |
| Tracy | Dolan | <i>none</i> | AHS - VDH | C/M |
| Kevin | Donovan | | Mt. Ascutney Hospital and Health Center | X |
| Lisa | Dulsky Watkins | | | X |
| Suratha | Elango | | RWJF - Clinical Scholar | X |
| Gabe | Epstein | <i>none</i> | AHS - DAIL | S |
| Trudee | Ettlinger | | AHS - DOC | MA |
| Kim | Fitzgerald | <i>none</i> | Cathedral Square | X |
| Erin | Flynn | | AHS - DVHA | S |
| LaRae | Francis | | Blue Cross Blue Shield of Vermont | MA |
| Joyce | Gallimore | | Bi-State Primary Care/CHAC | M |
| Lucie | Garand | | Downs Rachlin Martin PLLC | X |
| Christine | Geiler | | GMCB | S |
| Steve | Gordon | | Brattleboro Memorial Hospital | X |
| Don | Grabowski | | The Health Center | X |
| Maura | Graff | | Planned Parenthood of Northern New England | X |
| Wendy | Grant | | Blue Cross Blue Shield of Vermont | A |
| Dale | Hackett | <i>none</i> | Consumer Representative | X |
| Thomas | Hall | | Consumer Representative | X |
| Bryan | Hallett | | GMCB | S |
| Catherine | Hamilton | | Blue Cross Blue Shield of Vermont | X |
| Carolynn | Hatin | | AHS - Central Office - IFS | S |
| Karen | Hein | <i>none</i> | | C/M |

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|-----------------|-----------------|------|--|------|
| Kathleen | Hentcy | | AHS - DMH | M |
| Jim | Hester | here | SOV Consultant | S |
| Penrose | Jackson | | UVM Medical Center | M |
| Pat | Jones | | GMCB | S/M |
| Joelle | Judge | here | UMASS | S |
| Sarah | Kinsler | here | AHS - DVHA | S |
| Heidi | Klein | here | AHS - VDH | S/MA |
| Norma | LaBounty | | OneCare Vermont | A |
| Kelly | Lange | | Blue Cross Blue Shield of Vermont | X |
| Patricia | Launer | None | Bi-State Primary Care | MA |
| Mark | Levine | | University of Vermont | X |
| Lyne | Limoges | | Orleans/Essex VNA and Hospice, Inc. | M |
| Nicole | Lukas | | AHS - VDH | X |
| Ted | Mable | | DA - Northwest Counseling and Support Services | M |
| Carole | Magoffin | | AHS - DVHA | S |
| Georgia | Maheras | None | AOA | S |
| Carol | Maloney | None | AHS | X |
| Mike | Maslack | | | X |
| Jill | McKenzie | | | X |
| Melissa | Miles | | Bi-State Primary Care | M |
| MaryKate | Mohlman | here | AHS - DVHA - Blueprint | X |
| Chuck | Myers | | Northeast Family Institute | X |
| Annie | Paumgarten | | GMCB | S |
| Luann | Poirer | | AHS - DVHA | S |
| Carley | Riley | | | X |
| Brita | Roy | | | X |
| Laural | Ruggles | here | Northeastern Vermont Regional Hospital | M |
| Jenney | Samuelson | here | AHS - DVHA - Blueprint | M |
| seashre@msn.com | seashre@msn.com | | House Health Committee | X |
| Julia | Shaw | | VLA/Health Care Advocate Project | M |
| Melanie | Sheehan | | Mt. Ascutney Hospital and Health Center | M |
| Miriam | Sheehey | None | OneCare Vermont | M |
| Shawn | Skaflestad | None | AHS - Central Office | M |
| Chris | Smith | None | MVP Health Care | M |
| Kaylan | Sobel | | The Council of State Governments | X |

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|-----------|--------------|------|--|----|
| JoEllen | Tarallo-Falk | | Center for Health and Learning | M |
| Karen | Vastine | | AHS-DCF | |
| Teresa | Voci | here | Blue Cross Blue Shield of Vermont | M |
| Nathaniel | Waite | | VDH | X |
| Marlys | Waller | | DA - Vermont Council of Developmental and Mental Health Serv | X |
| Kendall | West | | Bi-State | X |
| James | Westrich | | AHS - DVHA | S |
| Stephanie | Winters | | Vermont Medical Society | M |
| Mary | Woodruff | | | X |
| Cecelia | Wu | | AHS - DVHA | S |
| McKenna | Lee | | OneCare Vermont | |
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Mark Companion - Housing + Development
 VT Housing + Conservation Board