



**Vermont Health Care Innovation Project
Core Team Meeting Minutes**

Pending Core Team Approval

Date of meeting: Wednesday, September 21, 2016, 2:00-3:30pm, 4th Floor Conference Room, Pavilion Building, 109 State St., Montpelier.

Agenda Item	Discussion	Next Steps
<p>1. Welcome and Chair's Report</p>	<p>Lawrence Miller called the meeting to order at 2:00pm. A roll-call attendance was taken and a quorum was present.</p> <p><i>Chair's Report:</i> Lawrence Miller noted that our Year 2 Carryover Request was submitted; we are awaiting approval from CMMI and hope to receive it relatively soon. Lawrence thanked everyone who contributed to that submission. Sustainability planning has kicked off; two meetings of private-sector stakeholders have occurred so far with great participation. An early draft will be released in early November and will be reviewed by every SIM Work Group in November. A draft for initial Core Team review will be presented in December; it will be finalized by next June to align with the end of the SIM process. Paul Bengtson commented that leadership sustainability will be a critical issue starting in January. Lawrence noted that while Georgia's position is permanent and is funded by SIM through October 2017, most SIM positions are temporary and will end between now and the end of the grant. The Director of Health Care Reform position (Robin Lunge) is also in statute. The Core Team will need to work with the next Governor to communicate what they think are critical activities for sustainability.</p> <p>Lawrence also noted a change in today's agenda: the funding request for Vermont Developmental Disabilities Council is not yet ready and has been withdrawn from today's agenda.</p> <p>Georgia also noted that Holly Stone, a contracted project manager on the SIM project, will be moving into a project management role working on the HIE program at DVHA. She thanked Holly for her work and noted that we look forward to continuing to work with her in her new role!</p>	

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2. Approval of Meeting Minutes	Paul Bengtson moved to approve the August 8 meeting minutes. Al Gobeille seconded. A roll-call vote was taken and the motion carried.	
3. Financial Update: Budget to Actuals	<p>Georgia Maheras and Diane Cummings provided a financial update (Attachment 3).</p> <ul style="list-style-type: none"> • Performance Period 1 (October 2013-December 2014, plus a 12-month carryover period through December 2015) is completely closed out. Georgia thanked Diane Cummings for her work on this, and noted that only \$303,835.27 was reverted to CMMI. This is a significant accomplishment, as we had previously contemplated reverting nearly \$11 million. <ul style="list-style-type: none"> ○ Extensions of Performance Periods and Carryover Periods mean that some performance years are overlapping, but funds still need to be kept segregated. • Performance Period 2 (January 2015-June 2016, plus a carryover period – not yet approved). A small amount of funds not yet paid are due to Carryover request since Vermont operates on a cash basis. Additional carryover activities will also use Performance Period 2 funds, as previously agreed to with CMMI – these are also included in the Carryover request. The Carryover approval will provide additional time to spend unspent funds and to reallocate across categories. CMMI has indicated they have no questions about the request at this time. • Performance Period 3 (July 2016-June 2017). We have an unobligated balance of just over \$2 million for Performance Period 3. Lawrence noted that this amount is unallocated and can still be spent based on Core Team decisions. Georgia also noted that we have dollars allocated to contracts; where spending is less than expected, these funds can be reallocated to overspending contracts or to other activities within the scope of this performance period. However, State and federal contracting timelines require that we made final decisions about contracts by the end of October so contracts can be signed before January – the Core Team should expect many contract requests in October. <p>Al Gobeille complimented Georgia, Diane, and the SIM team on handling these approvals, contract requests, and reporting.</p>	
4. Financial Request	<p>Georgia Maheras introduced two financial requests (Attachment 4).</p> <p><i>Additional funds for Wakely Actuarial - \$250,000:</i> We have an existing contract with Wakely to provide actuarial activities. In the past, this has included SSP SPAs as well as informing other payment model development. The rationale for the increase is due to work on the All-Payer Model. The reasons for this include the Medicaid Redetermination Process, which required Wakely to redo trend analyses and baseline studies. They have also had to do cost and utilization exhibits, ACO-specific risk scoring, and reviewing studies with the GMCB’s actuary. We have also requested that Wakely travel to Vermont to facilitate conversations with Vermont about these topics, which was not previously included in the budget. Georgia will send additional information about the specifics of this request to Paul Bengtson, as requested.</p>	

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	<p>Paul Bengtson moved to approve this item. Steven Costantino seconded. A roll call vote was taken and the motion carried.</p> <p><i>New request for VITL Terminology Services Phase 2 - \$148,400:</i> This work has previously been discussed by the Core Team; the Core Team initially voted to approve Phase 1 only. Phase 1 was implemented in June. Phase 2 proposes to expand on this. OneCare reported that Phase 1, which is for Labs and Medications, has been helpful. The Blueprint also benefits from these standards. The budget for Phase 2 is detailed in the attachment and is allocated between the consultant who performs most of these work and VITL staff time for terminology mapping.</p> <ul style="list-style-type: none"> • Paul asked how long Phase 1 took, and how long Phase 2 was expected to take. Phase 1 was completed in 14 weeks; Phase 2, which is an incremental expansion, would be expected to take through June 2017. Additional expansions on the service and updates could take place as necessary and desired. The subscription fee of \$63,000 is an annual cost. • Lawrence noted that VITL did complete Phase 1 on-time. Was the full scope completed and was the quality of the work as expected? Georgia replied yes on both counts; this is one of the reasons she discussed utility of this work with OneCare. • Paul noted that difficulty of translating between data systems and the ability of data systems to push information that providers need is a challenge in clinical care. Georgia noted that bidirectional need for data feeds is a major challenge, and that in most cases this issue is being dealt with one system at a time. Terminology services cleans data before it goes into the clinical data warehouse at VITL. <p>Paul Bengtson moved to approve this item. Al Gobeille seconded. A roll call vote was taken and the motion carried.</p>	
5. Public Comment	There was no public comment.	
6. Next Steps, Wrap Up and Future Meeting Schedule	Next Meeting: Monday, October 10, 2016, 1:00-3:00pm, Montpelier.	

VHCIP Core Team Member List

Roll Call: 9/21/2016

Member		8/8/16 Minutes	Financial Proposals			Organization
			Wakely	VT DDC	VITL	
Paul	Bengston ✓	✓	✓		✓	Northeastern Vermont Regional Hospital
Hal	Cohen	x	x		x	AHS - CO
Steven	Costantino	x	✓		✓	AHS - DVHA
Al	Gobeille ✓	✓	✓		✓	GMCB
Monica	Hutt	x	x		x	AHS - DAIL
Robin	Lunge ✓	✓	✓		✓	AOA - Director of Health Care Reform
Lawrence	Miller ✓	✓	✓		✓	AOA - Chief of Health Care Reform
Steve	Voigt ✓	✓	✓		✓	ReThink Health

10 page passed
20 page passed
20 page passed
10 page passed

Attendance: Julia Strong
Smar Kinstens
Chelsy Gailor
Tolly Strong
Geeta Narans
10 page passed
20 page passed