

## Vermont Health Care Innovation Project Core Team Meeting Minutes

### Pending Core Team Approval

**Date of meeting:** Tuesday, April 18, 2017, 1:00-2:30pm, Oak Conference Room, Waterbury State Office Complex

**Core Team Attendees:** Mary Kate Mohlman, Melissa Bailey, Paul Bengtson, Al Gobeille, Cory Gustafson, Monica Hutt, Dr. Mark Levine, Robin Lunge (phone), Steve Voigt (phone)

Agenda Item	Discussion	Next Steps
<b>1. Welcome and Chair's Report</b>	<p>Mary Kate Mohlman called the meeting to order at 1:04pm. A roll-call attendance was taken and a quorum was present.</p> <p><i>Chair's Report:</i></p> <ul style="list-style-type: none"> <li>• <u>New CMMI Program Officer:</u> Fran Jensen has replaced Bridget Harrison as our program officer.</li> <li>• <u>Evaluation Update:</u> We will have a detailed update on the SIM state-led evaluation at the next meeting.</li> <li>• <u>Accountable Communities for Health Final Report:</u> Available <a href="#">here</a>.</li> <li>• <u>Recent Publication:</u> Vermont's Practice Transformation activities were <a href="#">highlighted</a> this month by CHCS!</li> </ul>	
<b>2. Approval of Meeting Minutes</b>	<p>Steve Voigt moved to approve the minutes from the March 1 meeting. Robin Lunge seconded. There was no discussion. A roll call vote was taken and the minutes were approved.</p>	
<b>3. Project Updates</b>	<p>Georgia Maheras introduced Attachment 3a, a budget powerpoint.</p> <ul style="list-style-type: none"> <li>• We are currently working on both Performance Period 2 work and Performance Period 3 work simultaneously. <ul style="list-style-type: none"> <li>○ Performance Period 2: Event Notification System (Patient Ping), to be completed 6/30; microsimulation demand model for health care workforce (IHSGlobal), to be completed 5/31; telehealth pilots, to be completed 6/30; and support for GMCB (Health Management Associates), to be completed 6/30.</li> <li>○ Performance Period 3: ACO support contracts (OneCare and CHAC), to be completed 6/30; Population Health Plan support (Vermont Public Health Institute), to be completed by 6/30; Sustainability Plan support (Myers &amp; Stauffer), to be completed 6/30; health data infrastructure activity support (Policy Integrity and Stone Environmental), to be completed by 6/30; Vermont</li> </ul> </li> </ul>	

Agenda Item	Discussion	Next Steps
	<p>Care Network data repository with substance use disorder and mental health data, to be completed by 6/30; patient experience survey work (DataStat), to be completed by 6/30; home health agency VHIE interfaces and VITLAccess connections (VITL), to be completed by 6/30. Three projects will continue past 6/30: State-Led Evaluation contract (JSI), analysis of Year 3 of the Shared Savings Programs (Lewin), and All-Payer Model support.</p> <ul style="list-style-type: none"> <li>• Georgia and Diane Cummings had a call with CMMI earlier today, and discussed the potential no-cost extension for the three activities described above. The new Federal administration is providing a higher level of scrutiny for no-cost extensions to prevent programs from unnecessarily going over their planned timeline. CMMI is more amenable to no-cost extensions that support CMMI-required deliverables like the State-Led Evaluation, or that are linked to All-Payer Model deliverables; however, this will be a challenging process that will require full clearance for all approvals, and very different from the previous process. Our proposed no-cost extension amount will be between \$1 million and \$1.2 million, including ~\$400,000 in personnel funding. Georgia will work with Sarah Clark, the AHS Chief Financial Officer, to discuss mitigation strategies in the event a no-cost extension is not approved.</li> </ul> <p>Budget details:</p> <ul style="list-style-type: none"> <li>• Performance Period 2: We received approvals last week that will help us spend down this budget, but we will not spend all available funds. This will be wrapped up in mid- to late-July after processing of unliquidated obligations.</li> <li>• Performance Period 3: We continue to be under-budget for Performance Period 3. Contractual obligations will change based on Core Team approvals. <ul style="list-style-type: none"> <li>○ Proposed Changes: <ul style="list-style-type: none"> <li>▪ VITL – Budget Reallocation: Budget adjustment (no change to total amount); switch to deliverables-based payments to align with DVHA standard practices.</li> <li>▪ Contract Extensions: <ul style="list-style-type: none"> <li>• GMCB APM Activities: Bailit, Onpoint</li> <li>• DVHA APM Activities: Burns &amp; Associates, Wakely</li> <li>• SSP Analytics and APM Activities: Lewin &amp; JSI</li> </ul> </li> </ul> </li> </ul> </li> </ul> <p>Discussion:</p> <ul style="list-style-type: none"> <li>• Work and funds at risk would be for the July 1-November 30 no-cost extension period. It's possible that parts of this could be approved, but not others. We would likely be informed prior to a formal approval or rejection, but the State may need to make some fast decisions by May 23<sup>rd</sup> so that we have time to notify contractors and staff if we don't receive no-cost extension approval, and/or find other funding sources for particular activities out of existing State funds.</li> <li>• We expect to receive candid and direct feedback from our CMMI project officer during the no-cost extension process. We have been very clear with our federal partners about the impacts of rejecting this</li> </ul>	

Agenda Item	Discussion	Next Steps
	<p>no-cost extension on our ability to achieve milestones and complete required deliverables for SIM and the APM. The SIM and APM teams at CMMI are connecting regularly as well.</p> <ul style="list-style-type: none"> <li>• Susan Aranoff (VT DDC): Is there room for continued consumer engagement or other stakeholder engagement in any of the remaining projects? The Population Health Plan and Sustainability Plan will be sent back out for public comment after this meeting. For more general stakeholder input, we are shifting SIM governance and engagement activities into standing committees within Agencies and Departments. <ul style="list-style-type: none"> <li>○ Will there be consumer engagement around Medicaid Pathway specifically? The current draft of the Sustainability Plan includes Medicaid Pathway as a one-time investment. This is a choice by the new Administration to pause this activity to ensure AHS is on the same page and with an aligned goal.</li> </ul> </li> </ul> <p>Paul Bengtson moved to approve the reallocations and extensions as described in Attachment 3a. Cory Gustafson seconded. A roll call vote was taken, and the motion passed.</p>	
<p><b>4. Population Health Plan</b></p>	<p>Tracy Dolan presented the updated draft of the Population Health Plan (Attachment 4). Tracy described PHP goals, and briefly touched on the history of this work under SIM.</p> <ul style="list-style-type: none"> <li>• The PHP is a required deliverable for all SIM states. We have chosen to focus Vermont’s PHP on integrating population health and prevention into health reform and health care reform activities.</li> <li>• Sections I and II provide an introduction on this effort in Vermont, and background on why population health and prevention are important.</li> <li>• Section III: Five Principles. These principles underlay the entire PHP, intended to guide efforts to integrate population health into reform efforts.</li> <li>• Section IV: Policy Options. This section presents policy options for integration via four strategic levers adapted from work by the Center for Health Care Strategies: Governance, Care Delivery Requirements and Incentives, Measurement, and Payment and Financing Options. See pages 10-16 for a full list of policy options in each area.</li> <li>• If approved at this meeting, the Plan will go out for public comment for 30 days.</li> </ul> <p>Discussion and Public Comment:</p> <ul style="list-style-type: none"> <li>• Local and regional variation in governance is encouraged based on each community’s needs and resources.</li> <li>• Cory Gustafson: The plan talks about both reducing care fragmentation and supporting local variation – how can we reconcile this? Tracy responded that systems to support coordinated care could vary across communities or regions.</li> <li>• Paul Bengtson: Thinks this plan is the right direction for the state and communities, and his community would be excited to work with the state on this item.</li> <li>• Robin Lunge: Has a few specific comments and questions, which she will take up with Tracy offline.</li> <li>• Kirsten Murphy (VT DDC): Two areas of concern.</li> </ul>	

Agenda Item	Discussion	Next Steps
	<ul style="list-style-type: none"> <li>○ Policy options for governance references public health and social service organizations, and commented that among community-based agencies, consumer engagement is the norm. The plan should include these individuals as stakeholders.</li> <li>○ Kirsten also commented that within Section III, social determinants of health are a particular challenge for the state to address, particularly where we have insufficient data on specific social determinants (e.g., racism). Tracy suggested that we could add a health equity lens to the discussion of measurement within Section IV; Kirsten concurred.</li> </ul> <p>Paul Bengtson moved to approve the plan for public distribution and feedback. Al Gobeille seconded. A roll call vote was taken, and the motion passed.</p>	
<b>5. Sustainability Plan</b>	<p>Georgia Maheras presented the updated draft of the Sustainability Plan (Attachment 5).</p> <ul style="list-style-type: none"> <li>● Changes reflect the shift of the Office of Health Care Reform from AOA to AHS, additional language around consumer and consumer advocate engagement, and more detailed examples and project descriptions.</li> <li>● If approved by Core Team, the Plan will go out for public comment for 30 days.</li> </ul> <p>Paul Bengtson moved to approve the plan for public distribution and feedback. Al Gobeille seconded. A roll call vote was taken, and the motion passed.</p>	
<b>6. Public Comment</b>	There was no public comment.	
<b>7. Next Steps, Wrap Up and Future Meeting Schedule</b>	<p><i>Next Steps:</i></p> <ul style="list-style-type: none"> <li>● The Population Health and Sustainability Plans will go out for a 30-day public comment period.</li> </ul> <p><i>Next Meeting:</i> TBD (late May or early June).</p>	