

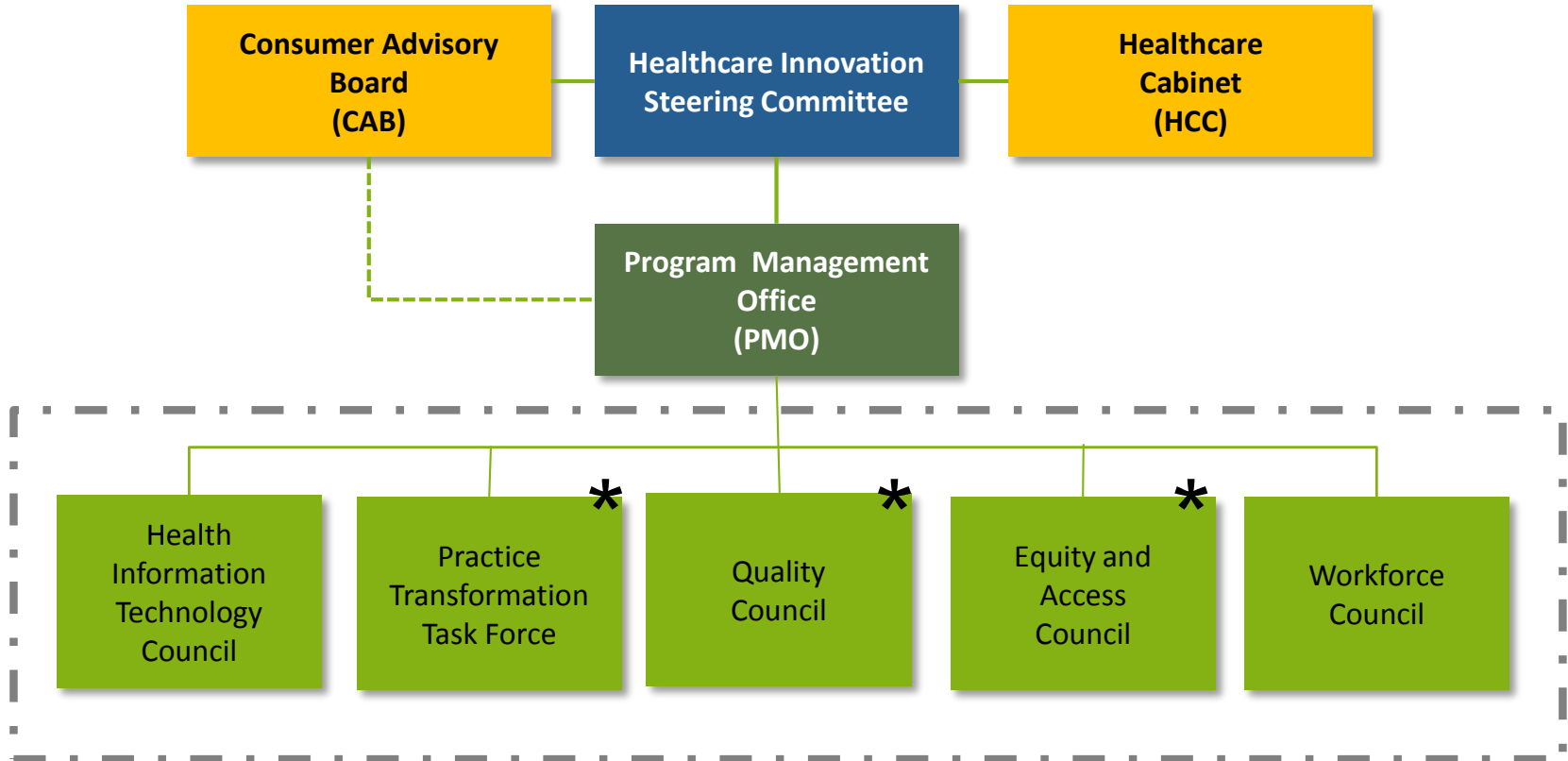
State Innovation Model Initiative



October 14, 2014
Presentation to the
Health Care Cabinet

Update

SIM Governance Structure



SIM Governance Structure

- Balanced and proportionate representation
 - Consumer advocates, providers, state agencies, payers
- More than 40 consumer advocates
- Substantial physician participation including:
 - President, CT State Medical Society,
 - Governor, CT Chapter of the American College of Physicians,
 - President, CT Academy of Family Physicians
 - Former President, CT Chapter of the Academy of Pediatrics

SIM & Medicaid

Integrated planning & Oversight

- SIM related Medicaid planning integrated with longstanding Medicaid advisory structure
- Medical Assistance Program Oversight Council (MAPOC)
 - Care Management/PCMH committee will advise re: the development of Medicaid QISSP
 - SIM consumer advocates will participate
 - MAPOC representatives will be participate with SIM Steer Co, CAB and workgroups

Practice Transformation Task Force

- NCQA standards review
- Add “must pass” & “critical factors”
- Align with health equity goals
- Improve “person-centeredness”

Quality Council

- Quality measure alignment
 - Improve efficiency, reduce complexity
 - Improve focus, support quality improvement
 - Make care experience matter
 - Measure and reward health equity gains

Quality Council

- Quality Measures in use today
 - Primarily process measures
 - Claims based

Quality Council

- Medicare ACO measures
- 37 measures as of 2015
- 7 care experience measures
- 21 measures are ACO/practice reported, which allows use of outcome measures
- Notable gaps
 - No pediatric, few behavioral health

Quality Council

- Maximize alignment with the Medicare Shared Savings Program ACO measure set
- Add measures to address:
 - Gaps, e.g., pediatrics, reproductive health, Medicaid
 - Areas of emphasis such as behavioral health, health equity, and care experience.
- Wherever possible, draw from established measures
- Accelerate migration to outcome-based measures
- Commitment to transparency

Equity and Access Council

- Building the foundation
- Suspend decisions as we learn
 - MAPOC – under-service workgroup
 - OHA under-service advocacy
 - Health plan gap analysis capabilities

Building SIM PMO Capacity

- RFP for PMO consultation services
 - Proposals due 9/4/14
 - Currently under review
 - Priority:
 - work group support
 - PMO administrative support
- Seeking approval for state funded positions

Workforce Initiatives

- On-line MD licensing application/survey questions
 - Prepare MOA (DPH/DAS/PMO)
 - Prepare draft survey questions
 - Process: CAB and Steer Co review
- One-time physician survey (UConn/Yale)
 - Methods review in light of change in focus for practice transformation
 - Process: Solicit input from CAB and Steer Co

Test Grant Application

Applicants for Round 2 Test Grants

- Design state applicants for test grant funding:
CA, CT, DE, ~~HI~~, ID, IL, IA, MD, MI, NH, OH, PA,
RI, TN, ~~TX~~, UT, CO, NY, WA, AR, ME, MA, MN,
OR, VT
- New test grant applicant: NJ
- Total of 18 states competing for 12 test grants

Response to Questions

- CMMI questions received - August 28
- Connecticut response submitted – Sept 8
- Program questions
- Budget questions
- No limits on response
- Response available – www.healthreform.ct.gov

CMMI Interview – 10/1/14

- Convened with CMMI – video-conference
 - 30 minute presentation
 - Questions for stakeholders
- Second tier response to questions – 10/9/14

Why Connecticut?

- Unprecedented collaboration across diverse partners
- Strong record of success & commitment to sustain
- Intent to lead the nation:
 - Empowering consumers
 - Making care experience matter
 - Putting health equity into the value equation
 - Integrating behavioral health
 - Consumer safeguards
- Demonstrated commitment among all of Connecticut's commercial payers
- Ensure success of Medicare ACO model

Proposal
Advanced Medical
Home Pilot

AMH Vanguard Project

- Conduct a pilot of our AMH practice transformation standards and methods, including:
 - Recruitment
 - On-site technical assistance
 - Learning Collaborative
- Practices serve as a learning lab
- Precursor to large scale SIM grant funded Glide Path that will be brought to scale later in the year

AMH Vanguard Project

- Benefits....
 - Experience gained would enable us to make course corrections before we scale up with a substantially larger number of practices and new vendors
 - Option to pilot different methods (e.g., clinical microsystems approach to practice assessment, use of tech enablers, etc.) before finalizing our statewide strategy

AMH Vanguard Project

- Benefits...
 - Assess impact on physician experience...if satisfaction with practice does not improve, expansion will be a tough sell
 - Successful practices may champion the value of SIM transformation support, which may help with practice recruitment later in the year

AMH Vanguard Project

- PMO budget includes funding for practice transformation
- Available funding depends in part on other commitments, cost of consultation support and timing of new hires, etc.
- Estimated enrollment: 30-40 practices
- Timeframe: First quarter 2015

AMH Vanguard Project

- Key Questions:
 - Which practices to target?
 - Level of advancement?
 - EHR?

AMH Vanguard Project

- Process:
 - Prepare project scope and methods in consultation with Practice Transformation Task Force
 - Solicit input from Consumer Advisory Board and Steering Committee
 - Pending final approval of concept, undertake procurement in late October

Questions