Connecticut State Innovation Model
Work Stream Update

OHS CONNECTICUT Office of Health Strategy

SIM connecticut state innovation model

- The Healthcare Innovation Steering Committee voted to approve the Primary Care Payment Reform Report. The Report will serve as a platform for the Primary Care Modernization design process.
- The Consumer Advisory Board examined it's expanded role as it transitions to serve as the CAB for the entire Office of Health Strategy
- The Primary Care Modernization (PCM) Planning Process kicked off at the June meeting of the Practice Transformation Task Force by introducing the PCM Consultant, Freedman Healthcare
- Velatura, the contractor selected for the service areas of eCQM, HIE, and Sustainability, presented to the Health IT Advisory Council and provided details on their activities in support of the HIT efforts.
- The UConn AIMs team who is working on the Core Data Analytics Solution (CDAS) completed software purchase and agreements prior to implementation, configuring and testing.
- Value Based Insurance Design work continued with working one-on-one with 10 employers to collect data, discuss options, and develop initial recommendations for development of VBID plans. Seven employers have completed initial recommendations.
- The Community Health Worker team has begun the process of drafting the Legislative Report on recommendations for CHW Certification, as required in PA 17-74. The report will be presented to the CHW committee in July and will then be posted for public comment.
- The Quality Council with the UConn Evaluation team continued work on the development of the Public Scorecard. Documents outlining the purpose, attribution methodology, and benchmarking and risk adjustment were posted for public comment. Comments will be accepted until July 21st.
- The CCIP initiative Released two Requests for Proposals: 1) A Validation Surveyor to conduct that measure achievement of the CCIP Standards across both Wave 1 and Wave 2 Participating Entities (closes July 13), and 2) A Subject Matter Expert Panel to provide expert consultation and assistance to Wave 1 and Wave 2 Participating Entities as needed (closes July 20).

Council/ Work Stream	Major Topics Covered	Progress/ Outputs	Next Steps	Upcoming Meetings
Healthcare Innovation Steering Committee (HISC)	*Health Enhancement Communities* *Primary Care Modernization*	• Discussed the Health Enhancement Community planning efforts, including a review of the HEC Plan Outline. • Voted to approve the Primary Care Payment Reform Report. The Report will serve as a platform for the Primary Care Modernization design process. • Find June Presentation containing the above items here	• Discuss Health Enhancement Community Planning efforts, specifically the Medicare component • Discuss Primary Care Modernization Planning Process Updates, including announcing the consultant	7/12/18
Consumer Advisory Board (CAB)	*Consumer input on barriers to appropriate healthcare* *Healthcare Reform*	• Consumer Engagement Coordinator will continue to conduct outreach to those who assisted in coordinating past CAB outreach events for new CAB members • CAB discussed its role in advising OHS including looking at who, where and when they are getting information from as CAB's role expands with OHS • CAB discussed its role in ensuring meaningful consumer participation in the PCM initiative. How to operationalize and obtain substantive information and number of listening sessions over the next few months were brought up in the discussion. • HMA provided a brief overview of the HEC initiative	• Continue new member outreach strategy • CAB will review and vote on new member applications • Conduct phone calls for a deeper dive on PCM involvement • Summarize key themes from PCM discussion • HMA will return in July for a more comprehensive HEC discussion	CAB Meeting 7/10

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Practice Transformation Task Force (PTTF)	*Primary Care Modernization*	• Kicked off the Primary Care Modernization (PCM) Planning process by introducing the PCM Consultant, Freedman Healthcare. • Reviewed the goals of PCM, specifically to develop a program model that defines practice capabilities and payment options to support them by November 2018 • Reviewed proposed strategy to achieve goals, including stakeholder engagement plan • Find detailed PCM planning strategy in the meeting presentation	• Review patient access and engagement capabilities • Establish design groups to guide the development of practice capabilities and a payment model	7/24/18
Health Information Technology (HIT)		• Health IT Advisory Council met on 6/21/18 and the contractor Velatura was introduced and provided details their activities as it relates to HIE services and support of eCQM capabilities. • Velatura is currently engaging stakeholders with a focus to identify success factors and pain points that would impact the implementation for health information exchange services. • (HIE Services) Governance Design Group completed sessions 2, 3 and 4 which focused on elements of a trust agreement. • CDAS (eCQM) Completed software purchase and agreements prior to implementation, configuring and testing. • CDAS (eCQM) Currently working to stand up the CDAS environment and begin accepting data for implementation. • Per Senate Bill 217, the HITO seeks members for the Medication Reconciliation and Polypharmacy work group. It is the intent that the work group would provide recommendations and approaches to	• Health IT Advisory Council meeting on 7/19/18 (1) the Governance Design Group will present their recommendations for ratification, and (2) council members will review and approve work group members for Medication Reconciliation and Polypharmacy Work Group • Continue stakeholder engagement for months of July and August • (HIE Services) Complete review and sequencing of Wave 1 & Wave 2 Use Cases • CDAS (eCQM) – accept data for OSC pilot for phase 1 and phase 2	Health IT Advisory Council meeting 7/19/18 APCD Data Release Committee 7/27/18 Governance Design Group 7/11/18

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	improve medication reconciliation and reduce drug-drug interactions. Solicitation closes on July 13.		
Quality Council (QC)	• See UConn Evaluation	•	
Care Management Committee (CMC) -A sub-committee of MAPOC)	• CMC meetings are now held bi-monthly	• Share update at July MAPOC Meeting	7/11/2018
Population Health Planning (DPH)	• HEC planning continues- stakeholder engagements and reference community work ongoing, reviewed financial models and HEC plan approach. • Reference community first-round of in-person Deep Dive sessions, coaching calls and planning webinars completed. • PSI activities to review and implement TA plans for each organization; sector-specific webinars for CBOs and health care organizations, mixed sector calls by geographic area, and continued use of the PSI SharePoint. • The Population Health Council meeting was held on June 28th. Member input was solicited on the design for HEC focus and activities and the Nonprofit Finance Fund (NFF) reviewed social financing models. • A BRFSS local health report draft was prepared for each local health district and selected large full	• Continued engagement; review measures, priority health conditions, root causes and interventions; HEC governance and structure; review and refine HEC mission and vision based on work to date. • Second round of reference community Deep Dive meetings scheduled for July. • Next council meeting on July 26, 2018. • The local health report is currently under review to be distributed to	

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	time health departments, which will provide valuable data for state/local health needs assessments. The preliminary 2017 CT BRFSS was released and the BRFSS team are working on generating prevalence estimates for all SIM related and social determinants of health indicators. • Geocoding has been successfully completed for about 89,000 hospitalization records. We are now tabulating the results for about 45,000 avoidable hospitalizations per year from 10/2011 – 9/2015, with expected total charges of about $1.4 million per year.	local health departments and the BRFSS summary report will be released soon. • Tabulate and publish Avoidable Hospitalization figures by town.	
Person Centered Medical Home Plus (PCMH+)	• Held three community information sessions • Planning for information sessions and technical assistance webinars	• Execute contracts with PEs • Hold community information sessions and technical assistance webinars • Administer baseline CAHPS survey	8/11/2018
Value-based Insurance Design	• Hosted third and final technical assistance webinar for employer participants in targeted technical assistance program. The webinar focused on "Maximizing existing programs and resources to improve care value" • Continued working one-on-one with 10 employers to collect data, discuss options, and develop initial recommendations for development of VBID plans. Seven employers have completed initial recommendations. • Engaged VBID Consumer representatives in advance of the Consortium meeting to discuss proposed updates to the VBID templates.	• Finalize feedback from the VBID Consortium members regarding the updated VBID templates. Release templates for review by the Steering Committee. • Finalize recommendations for all VBID targeted technical assistance participants. • Begin planning for recruitment of second VBID technical assistance cohort.	TBD

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		• Hosted VBID Consortium webinar to discuss updated VBID template recommendations.		
UCONN Community Health Worker (CHW) Initiative		• Facilitated a CHW Advisory Committee meeting on June 19th to present the 3 design groups' key decision points developed in the last 2 months in the effort to recommend a viable CHW certification process in CT. • Facilitated the first Apprenticeship meeting on June 14th to address the issues of community health worker training and getting them into the workplace by developing and implementing the apprenticeship program. • Began process of drafting the Legislative Report on recommendations for CHW Certification, as required in PA 17-74. • Participated in the Yale New Haven Health System and Penn Center for Community Health Workers meeting on June 8, 2018. Purpose, to design an optimal CHW program and design a blue print on approaches to ROI. Including infrastructure needed like tool, training and technology. • Gathered additional information on resources and job searches for CHW Website through surveying CHWs	**Next Steps** • Complete the last modifications of recommendations from the Design groups for inclusion into report. • Put together first draft of Certification Report on July 10, 2018 and distribute to CHW Advisory Committee for review and discussion on July 17th. PMO will then post for public comment. • Plan and implement webinar/forum to inform CHWs about Certification report. • Participate in the July 12th CHWs and Social Determinants of Health Symposium. • Complete TA manual updates	Next CHW Advisory Committee Meeting is scheduled on July 17th to discuss Legislative Report Draft, propose edits and to release for public comment.
UCONN Evaluation	*Dashboard*	• Published July 1 dashboard with updated AMH program information • Data acquisition and analysis for October 1 dashboard • Continued planning for next CHAPS administration • 2017 VBID and APM data collection underway • Continued with website development, scheduled Quality Council subgroup meetings on presentation	• Continue analysis of APCD data for dashboard to set baselines and targets for healthcare delivery methods • Continue planning for next CAHPS administration • Continue 2017 VBID and APM data collection	

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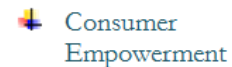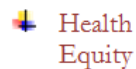|				
	Scorecard	• Continued with analysis of commercial claims data • Continued user interface development; convened sub group on presentation • Began communications about project with healthcare organizations and held informational webinar on June 26. • Posted methodology documents for public comment	• Continue scorecard user interface and methods development • Continue analysis of commercial claims data • Continue engagement with healthcare organizations	
Community and Clinical Integration Program		• Updated transformation plans for Wave 1 Participating Entities based on May reassessments. • Evaluated Wave 2 Transformation Award applications. • Released two Request for Proposals: 1) A Validation Surveyor to conduct that measure achievement of the CCIP Standards across both Wave 1 and Wave 2 Participating Entities (closes July 13), and 2) A Subject Matter Expert Panel to provide expert consultation and assistance to Wave 1 and Wave 2 Participating Entities as needed (closes July 20).	• Award Wave 1 Supplemental Awards • Award Wave 2 transformation Awards • Review and select a Validation Surveyor and Subject Matter Expert Panel	N/A
Advanced Medical Home	*Practice Transfo-rmation*	• To date, 125 practices have received NCQA Level 2 or 3 PCMH recognition	• Continue providing technical assistance to the enrolled practices.	
Grant Administration		• Planning for Award Year 4 Operational Plan has begun	•	

ACRONYMS

APCD – All-Payers Claims Database

AHCT – Access Health Connecticut

BRFSS – Behavioral Risk Factor Surveillance System

CAB – Consumer Advisory Board

CCIP – Clinical & Community Integration Program

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CHW – Community Health Worker

CMC – Care Management Committee

CMMI – Center for Medicare & Medicaid Innovations

DPH – Department of Public Health

DSS – Department of Social Services

EAC – Equity and Access Council

EHR – Electronic Health Record

HISC – Healthcare Innovation Steering Committee

HIT – Health Information Technology

MAPOC –Medical Assistance Program Oversight Council

MOA – Memorandum of Agreement

MQISSP – Medicaid Quality Improvement and Shared Savings Program

PCMH – Patient Centered Medical Home

PMO – Program Management Office

PTTF – Practice Transformation Task Force

QC – Quality Council

SIM – State Innovation Model

FQHC – Federally Qualified Health Center

RFP – Request for Proposals

OSC – Office of the State Comptroller

VBID – Value-based Insurance Design

The purpose of this document is to raise awareness among members of SIM Governance and SIM-funded work stream leads so that they can stay up-to-date about SIM progress, understand their work in context, and spot inter-dependencies where collaboration or coordination may be beneficial

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