

# Connecticut State Innovation Model Work Stream Update



## Highlights


- CHW Advisory Committee members were appointed; an informational webinar was held to launch the Committee
- Planning for the Behavioral Health Forum and 2<sup>nd</sup> Rural Health Forum are underway
- PTF, CMC, and HISC reached consensus on the Community and Clinical Integration Program (CCIP) report and standards; the final report is being prepared for dissemination
- Population Health Council Charter and Composition approved; solicitation is currently underway for members
- Value Based Insurance Design (VBID) Summary Report and SWOT (Strengths, Weaknesses, Opportunities, Threats) Analysis provided needed background for the VBID Consortium to begin design of insurance plan templates for employer use.
- The PMO received approval on their request for an additional no-cost extension. The first Performance Year will now begin on October 1, 2016. The extension will allow for better alignment of SIM's major initiatives such as MQISSP, HIT, AMH and the CCIP.
- The PMO received word from CMMI that they support the creation of transformation awards to enable CCIP related transformation activities. Formal approval has been requested as part of the budget amendment for the extension.

Council/ Work Stream	Major Topics Covered	Progress/ Outputs	Next Steps	Upcoming Meetings
<b>COUNCILS/ TASKFORCES/ COMMITTEES</b>				
<b>Healthcare Innovation Steering Committee (HISC)</b>	<b>Population Health</b>	<ul style="list-style-type: none"> <li>Reviewed and approved <a href="#">CHW Advisory Committee</a> nominees; recommended a solicitation for an additional self-funded employer</li> </ul>	<ul style="list-style-type: none"> <li>Review and Approve Population Health Council nominees</li> </ul>	4/7/16
	<b>CHW</b>	<ul style="list-style-type: none"> <li>Approved <a href="#">Population Health Council Charter and Composition</a></li> </ul>	<ul style="list-style-type: none"> <li>Review and approve self-funded employer for CHW Advisory Committee</li> </ul>	4/11/16
	<b>CCIP</b>	<ul style="list-style-type: none"> <li>Provided feedback on updated <a href="#">logic model</a></li> <li>Held special meeting to approve the CCIP standards and report</li> </ul>	<ul style="list-style-type: none"> <li>Review and approve new HISC members</li> </ul>	4/14/16
<b>Consumer Advisory Board (CAB)</b>	<b>CHW</b>	<ul style="list-style-type: none"> <li>Continued planning Behavioral Health Forum to take place April 2016</li> </ul>	<ul style="list-style-type: none"> <li>Finalize and host Behavioral Health Forum</li> </ul>	4/5/16
	<b>Population Health</b>	<ul style="list-style-type: none"> <li>RFP for Consumer Engagement Coordinator Closed April 1, 2016</li> <li>Solicited applicants for HISC consumer position</li> <li>Continued planning for 2nd Rural Health Forum in Northwest Connecticut</li> <li>Provided recommendations on the Composition of the Population Health Council</li> <li>Provided feedback on Cost Containment Models work (<a href="#">presented by Bailit Health</a>), as requested by the Health Care Cabinet</li> </ul>	<ul style="list-style-type: none"> <li>Nominate Consumer representative for the HISC</li> <li>Nominate Consumer representatives for the Population Health Council</li> <li>Continue planning for 2<sup>nd</sup> Rural Health Forum</li> </ul>	4/12/16
<b>Practice Transformation Task Force (PTTF)</b>	<b>CCIP</b>	<ul style="list-style-type: none"> <li>Provided feedback on the fourth draft of the CCIP report</li> <li>Discussed <a href="#">public comments</a> (See PMO <a href="#">summary response to concerns here</a>) and implementation strategy and edits to the final CCIP standards and report (<a href="#">See presentation here</a>)</li> <li>Approved the CCIP report for review by HISC</li> </ul>	<ul style="list-style-type: none"> <li>Edits to CCIP report and standards will be incorporated into the final report for dissemination</li> </ul>	4/12/16


Council/ Work Stream	Major Topics Covered	Progress/ Outputs	Next Steps	Upcoming Meetings
<b>Health Information Technology (HIT)</b>		<ul style="list-style-type: none"> <li>The HIT Council met on March 18, which was facilitated by the UConn HIT Team.</li> <li>UConn HIT Team worked with the Council members to ascertain questions they had regarding Zato and the demonstration. The questions were presented at the March 18 meeting.</li> <li>The UConn HIT Team continues to work with the HIT Consultant to develop the HIT Section of the SIM Operational Plan.</li> <li>The UConn HIT Team responded to CMMI question.</li> </ul>	<ul style="list-style-type: none"> <li>UConn HIT Team is finalizing a Zato demonstration for the HIT Council by May. The demonstration will occur in Massachusetts.</li> <li>UConn HIT Team will develop evaluation criteria for the Zato demonstration.</li> <li>Continue to work on the HIT section of the Operational Plan</li> <li>Continue recruiting efforts for staff.</li> </ul>	4/15/16
<b>Quality Council (QC)</b>		<ul style="list-style-type: none"> <li>Reviewed <a href="#">Core Quality Measures Collaborative (CQMC)</a> recommendations (<a href="#">See measure set here</a>) and implications for the Quality Council's Provisional Core Measure Set</li> <li>Reviewed new Behavioral Health questions for the PCMH CAHPS</li> </ul>	<ul style="list-style-type: none"> <li>Finalize alignment process and second draft of report for HISC review prior to public comment</li> <li>Consider adjustments to Provisional Core Measure Set in light of CQMC recommendations.</li> <li>Prepare for discussion of public scorecard with APCD, evaluation team, and Quality Council</li> </ul>	5/11/16

Council/ Work Stream	Major Topics Covered	Progress/ Outputs	Next Steps	Upcoming Meetings
<b>Care Management Committee (CMC)</b>  (A sub- committee of <u>MAPOC</u> )	<b><i>MQISSP</i></b>  <b><i>CCIP</i></b>	<ul style="list-style-type: none"> <li>• Convened to discuss several MQISSP and MQISSP related components and accompanying materials, including the <a href="#">MQISSP timeline</a>, <a href="#">PCMH issue paper</a> and CCIP report.</li> <li>• Participated in a <a href="#">shared savings webinar</a> and provided feedback on the shared savings model design.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to hold work sessions and education sessions to further the MQISSP design.</li> <li>• Participate in future webinars where applicable.</li> </ul>	4/13/16

 Population  
Health

 Health  
Equity

 Healthcare  
Quality

 Consumer  
Empowerment

 Affordability

### Population Health Planning (DPH)

- A draft [composition and charter for the Population Health Council](#) was submitted and approved by the Steering Committee. A solicitation for council members is now published and it is expected to close the first week of April.
- The Department of Public Health submitted the national accreditation application in a ceremony led by the Governor on 3/31.
- The SHIP Health Systems workgroup reconvened and discussed common objectives between the State Health Improvement Plan and the State Innovation Model. It was established that the focus in quality improvement by SIM parallels the SHIP initiatives on accreditation of public health agencies. Similarly, recommendations by the SHIP to establish inclusion criteria of CLAS standards clearly aligns with the core standards of the CCIP. Finally a SHIP objective to ensure that all CT communities are covered by CHNA's is supportive of SIM efforts to build up community health capabilities.
- DPH/SIM staff and UConn Evaluation team met to review collaboration strategies between the evaluation project and the development of the population health plan. The team discussed best approaches to metrics and how to reset SIM baselines and targets.
- The Health Program Associate position was filled in early March. With the exception of the Organizational Development Specialist (0.5FTE) who maintains the DPH health indicators dashboard, every other position (5) is currently vacant and under the state hiring freeze.
- Behavioral risk surveillance, small area demographic methods, and health status assessment report are in progress.
- Nominations for the Population Health Council will be decided by the personnel subcommittee in early April and submitted for approval by HISC.
- The first meeting Population Health Council is now planned for April 19<sup>th</sup>.
- Issue a draft concept paper on Population Health Status Assessment report.
- DPH continues implementing SHIP strategies as established for chronic disease (tobacco use, childhood obesity and asthma), environmental health (property maintenance state code), infectious disease, and maternal infant and child health (infant mortality).

Council/ Work Stream	Progress/ Outputs	Next Steps
<b>SIM WORK STREAMS / PROGRAMS / INITIATIVES</b>		
<b>Medicaid Quality Improvement and Shared Savings Program</b>	<ul style="list-style-type: none"> <li>Produced and shared an updated <a href="#">MQISSP timeline</a> outlining key dates and milestones from January 1, 2016 until the January 1, 2017 implementation date.</li> <li>Produced a third version of the <a href="#">PCMH issue paper</a> to reflect stakeholder input provided at the February 2016 MAPOC meeting.</li> <li>Held a <a href="#">shared savings calculation webinar</a> with DSS and the MAPOC Care Management Committee.</li> </ul>	<ul style="list-style-type: none"> <li>Hold future webinars and produce additional materials to further stakeholdering.</li> <li>Continue developing member communication materials outlined in the MQISSP Communication Plan.</li> </ul>
<b>Value-based Insurance Design</b>	<ul style="list-style-type: none"> <li>Additional interviews took place with health plans to gather additional insight into VBID plan components. A <a href="#">summary document</a> (combined with SWOT Analysis, described below) was prepared.</li> <li>The second VBID Consortium Meeting was held on March 22. The members reviewed the <a href="#">SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis</a> and the VBID template approaches prepared by Freedman Healthcare. Consortium members provided feedback on the plan approaches, emphasizing the importance of employer perspective and ease of implementation.</li> <li>Design groups were formed to develop the VBID templates and to plan the VBID Learning Collaborative, to be held later this year. Consortium meetings are scheduled for April and May.</li> </ul>	<ul style="list-style-type: none"> <li>Design Groups will meet to develop the VBID plan templates and plans for the Learning Collaborative.</li> <li>The third Consortium meeting will take place on April 27. At this meeting, members will review and provide feedback on the VBID plan templates developed by the design group.</li> <li>An employer survey will be developed and distributed to identify additional employer considerations for VBID design.</li> <li>A fourth Consortium meeting may be added late May—stay tuned.</li> </ul>

**UCONN  
Community  
Health  
Worker (CHW)  
Initiative**

- Worked closely with consultants and the PMO to plan and present a [webinar](#) on the SIM and CHWs to the newly formed CHW Advisory Committee as preparation for the committee's first meeting (4/19).
- Identified an experienced facilitator to help guide discussions within the monthly meetings of the CHW Advisory Committee. Contract being written.
- Received grant from CT Health Foundation for facilitation services and stipends to support the CHW members of the CHW Advisory Committee.
- Completed CHW interviews and identified two possible candidates.
- Continued to work with Grace Damio of the Hispanic Health Council to design and plan a CHW conference (5/24) that will inform the work of the CHW Advisory Committee.
- Connected with Population Health to begin exploring areas of potential work-stream collaboration.
- Met with IT consultant to develop the CHW website and continued to work with United Way/211 to develop a video demonstration of the use of 211 for CHWs.
- Complete facilitator contract and convene first meeting of the CHW Advisory Committee on 4/19/16.
- Hire two CHWs to implement CHW initiative.
- Identify 211-video participants and develop content.
- Continue to engage stakeholders.

Non-SIM-funded related activities:

- Met with Greater Bridgeport Council of Churches to discuss use of CHWs in connecting people using food pantries and soup kitchens with other resources. Pilot funding needed.
- Organized role-play with CHWs for DPH Breast and Cervical Cancer Early Detection Program (EDP) provider meeting in Hartford.
- Implemented CHW Self-Assessment with EDP CHWs as initial measurement tool to assess their self-knowledge and confidence as they begin to work in the field.

**Council/  
Work Stream**

**Progress/  
Outputs**

**Next Steps**

- Participated in ASTHO Community-Clinical linkages TA call on 3/18.
- Met with SMC Partners to discuss their database that uses Social Determinants of Health indicators to explore how it might be linked with CHW knowledge/skills and fieldwork assessment.

**UCONN  
Evaluation**

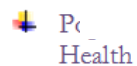
- Produced/updated pages for April 1 [dashboard](#) publication
  - Continued data acquisition
  - Continued investigation options for behavioral health measure(s)
  - Attended monthly call with national evaluators
  - Met with DPH to discuss coordination of work streams
  - Meeting held with commercial insurance payers
  - Produced memorandum to health plans in response to their questions about PCMH CAHPS administration for value-based payment and evaluation
- Work towards July 1<sup>st</sup> dashboard publication
  - Continue data acquisition
  - Attend monthly call with national evaluators
  - Develop a strategy for collecting data from networks about affiliated physicians
  - Meet with commercial insurance companies concerning care experience survey and some dashboard measures



Council/ Work Stream	Progress/ Outputs	Next Steps
<b>Advanced Medical Home Vanguard Program</b>	<ul style="list-style-type: none"> <li>• 26 practices have completed Standard 1-5 webinars and have begun to upload to the Corporate Survey Tool.</li> <li>• 15 practices are finalizing documentation for Standard 6 and completing Plantetree Bronze requirements.</li> <li>• 8 practices have completed Standards 1-2 webinars and have completed the Corporate Tool.</li> <li>• On March 8<sup>th</sup>, the PMO released an addendum to the AMH Vanguard Program RFA that allows FQHCs and Advance Networks who participate in the CMMI Practice Transformation Network Program to apply for the RFA</li> <li>• On March 14<sup>th</sup>, the PMO released an addendum to extend the deadline for submission of applications for the first cohort from to Thursday, March 24<sup>th</sup> and also to inform applicants that questions related to the RFA can be forwarded to Qualidigm in addition to the PMO.</li> <li>• Applications for the first cohort have been received and are currently under review</li> </ul>	<ul style="list-style-type: none"> <li>• Continue transformation services.</li> <li>• Prepare presentation that describes AMH Vanguard progress and evaluation activities to date for a meeting of the PTF on April 26<sup>th</sup> and the HISC on May 12<sup>th</sup>.</li> <li>• Formulate plan for periodic progress reporting to commercial payers and Medicaid.</li> <li>• Execute amendment to Qualidigm contract to accommodate the addition of new cohorts in 2016.</li> </ul>
<b>Program Management Office (PMO)</b>	<ul style="list-style-type: none"> <li>• Released <a href="#">response to concerns</a> by members of the CMC regarding the CCIP report and standards</li> <li>• Received approval for budget amendment submitted to address the first no-cost extension</li> <li>• Received approval for a second no-cost extension which better aligns first performance year major initiatives (e.g., AMH, CCIP, HIT, MQISSP). The first performance year will now begin October 1, 2016.</li> <li>• Prepared and submitted an additional budget amendment to support the second no-cost extension</li> </ul>	<ul style="list-style-type: none"> <li>• Incorporate PTF and CMC edits into final CCIP report and standards</li> <li>• Adjust Operational Plan to coincide with new timeline and work with individual work streams to ensure alignment</li> <li>• Amend MOAs with key partners to incorporate scope and budget for second extension</li> <li>• Prepare RFP to procure CCIP vendor(s)</li> <li>• Review proposals for Consumer Engagement Coordinator. The Consumer Engagement Coordinator will be responsible for developing a Consumer Engagement plan, including outreach activities, listening forums, and other ways to engage consumers in the SIM process.</li> </ul>

**ACRONYMS****APCD** – All-Payers Claims Database**BRFSS** – Behavioral Risk Factor Surveillance System**CAB** – Consumer Advisory Board**CCIP** – Clinical & Community Integration Program**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**



Equity

Quality

Empowerment