# C:\Users\gaclarke\Documents\SIM\simlogo_final_1inch.jpg

# SIM Annual Meeting December 8th 2015

**Augusta Civic Center- 76 Community Drive**

## 8:00- 8:30 Registration

## 8:30- 8:45 Welcome and Introduction to the Day

Stefanie Nadeau- MaineCare

**8:45-9:15 State Innovations in Delivery and Payment Reform**

Dr. Fran Jensen- CMMI

## 9:15- 9:40 SIM Core Measures, Evaluation Results & Public Reporting

David Hanig & Andy Paradise- Lewin; Jay Yoe of Office of Continuous Quality Improvement – DHHS; Jim Leonard of MaineCare; Poppy Arford – Health Consumer Advocate; John Yindra – Maine Community Health Options

## 9:40- 10:15 Stakeholder Q&A with the Panel

Interactive session. Each table will present one question to the panel.

**10:15-10:30 Break (15 min)**

**10:30-11:00 Sustaining Healthcare Transformation – A National Look**

Dr. Craig Jones- Vermont Blueprint for Health

**11:00-11:30 Sustainability Panel**

Stefanie Nadeau- MaineCare; Fran Jenson-CMMI; Dr. Craig Jones-Vermont Blueprint for Health; Christine Burke-MEA Benefits Trust; John Yindra- Maine Community Health Options

**11:30-12:00 Brown Bag Lunch**

Please sit at the table number on your name tag. Your lunch group will be together for the remainder of the day.

## 12:00-1:40 Gathering & Sharing Insights

Facilitated by Daniel Hanley Center for Health Leadership

**Question 1: How do we strengthen patient engagement by providers?**

* + *Context*: Findings from MaineCare consumer interviews conducted as part of the SIM evaluation indicate while providers are communicating well with consumers, it appears that providers do not always engage consumers in their care by soliciting information from them or encouraging them to ask questions.
	+ *Key Questions*:
		1. What is actually happening at the provider level from a patient engagement perspective?
		2. How do providers involve their patients with decision making?
		3. What are the barriers that currently prevent providers from engaging patients in their care?
		4. What methods can be used to structure more engagement into patient-provider encounters? Consider practice, provider and consumer perspectives here.

**Question 2: Providers use various data sources to obtain information that informs the care they provide. How can data sources be streamlined and simplified to better support this function?**

* + *Context*: Providers interviewed for the SIM evaluation find information provided through various data sources including different portals and the practice reports to be valuable. However, many report that the numerous portals and related tasks (e.g. attestation related to Health Home members) are burdensome and can create confusion about the purpose, capabilities, and operations of each data source.
	+ *Key Questions*:
		1. How Are the multiple portals creating burden on providers? Does this inhibit the provision of care?
		2. Are there opportunities to simplify or streamline these resources to reduce these burdens?
		3. If the portals cannot be streamlined, is there a way to effectively support providers in their understanding and more efficient use of these portals, including improving workflow?

**Question 3: The Role of Care Coordination….do we need more or too much of a good thing?**

* + *Context*: There are many concurrent efforts underway in Maine to improve care coordination among populations with chronic health and behavioral health conditions. Some providers noted that Care Coordination Teams (CCTs) were very helpful in managing the care of complicated patients; but also observed that there is considerable variation in how these services are delivered. As these new, more coordinated models of care become established in the state, it will be important to ensure efforts do not become duplicative in managing an individual’s care.
	+ *Key Questions*:
		1. How can findings from the evaluation be used to understand the impact of various care coordination efforts?
		2. Of the different care coordination models in Maine, what are the best practices identified thus far? Can they be further disseminated? If so, how?
		3. Is there duplication of effort among care coordination efforts? If so, how can that be streamlined?

**1:40-2:00 Moving Forward**