|  |
| --- |
|  |
| **Maine SIM Quarterly Status Report – FFY14 Q2** |
| **Maine State Innovation Model Quarterly Report to Center for Medicare and Medicaid Innovation** |
|  |
| **Randal J Chenard** |
| **4/30/2014** |

**1 Overview**

**Overview of Quarter’s Project Activities**

The Maine SIM Project is generally on track with the milestones and therefore the Accountability Targets that are outlined in the Maine SIM Project Plan. While we experienced some delays in some components of our test, these delays are not expected to have any material impact on our ability to attain the accountability targets for year one, and the trend is improving.

The Maine SIM Project Plan has six major strategic objectives and currently has 20 major SIM objectives aligned under the strategic objective which it supports. The six overall SIM strategic objectives, or pillars, are as follows:

1. Strengthening Primary Care
2. Integration of Physical and Behavioral Health
3. Developing New Workforce Models
4. Developing New Payment models
5. Centralizing Data and Analysis
6. Engaging People and Communities

Maine has made an adjustment to how SIM results will be summarized moving forward. An executive level summary is now contained in this report that will provide a status summary organized by each SIM strategic pillar. The view enables reviewers to get a sense of how the high level SIM strategies are progressing, ie the ‘forest view’.

More detailed status for all SIM objectives will also be provided through reports that are provided by each of the Maine SIM partners, ie, the trees view. Those partners are listed as follows:

* SIM Program Objectives, driven out of the Department of Health and Human Services
* Maine Health Management Coalition objectives
* Maine Quality Counts objectives
* HealthInfoNet objectives
* MaineCare objectives
* Maine CDC objectives

All of the objectives are assigned a status for Q2, and an ‘outlook’ status, projecting the level of confidence that milestones and applicable targets will be obtained during the third quarter of fiscal year ’14, with associated narrative supporting that outlook status. Further, all objectives are outlined in detail in the Maine SIM Project Plan, which clearly articulates objectives, milestones, and accountability targets which is attached with this report.

*Status and Outlook Rating Key:*

* Green: All’s well. At least a 75% level of confidence that milestones will be reached for that associated objective
* Yellow: Reason for caution exists. There is between a 50% - 75% level of confidence that all associated milestones will be achieved.
* Red: Concern is present, and confidence is, at most, at a 50% level that associated milestones will be achieved.

Although all statuses are self-reported by the appropriate SIM entity, all status are ‘trued up’ by State staff to ensure that quarterly status reporting is equating to the monthly reporting and subsequent tracking that occurs at the SIM task/milestone level.

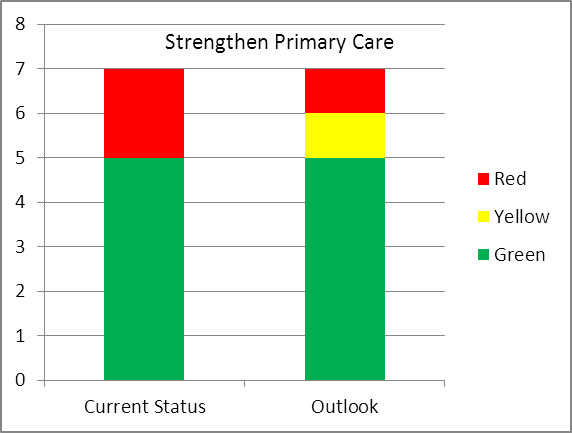
**Maine SIM Strategic Objective Summary**

The above chart is a summary of the status of each SIM objective, with each objective aligned to the SIM Strategic Pillar which it supports. Each objective is aligned to at least one pillar, and many objectives are aligned to several Strategic pillars which it supports. Each box aligned to each objective represents one quarter of the SIM timeframe from October of 2013 – Sept of 2016. The last quarter status for each objective is the status outlook for the next quarter.



*The SIM Strategic Pillar status summaries are below:*

**Strengthen Primary Care**

****

The Strengthen Primary Care strategy has 5 objectives in green status, and 2 objectives that are currently in red status. The objectives in red status are MaineCare’s Accountable Community implementation and MaineCare’s Primary Care Developmental Disability initiative, although the outlook for this objective is positive. The Accountable Community initiative remains in a red status in the forseeable future. Details for the Accountable Community implementation objective is outlined in the MaineCare status report, included in section 2, and risk mitigation plans will be developed in the event that we are unable to get this objective back on track.

**Integrate Physical and Behavioral Health**

The Strategic objective of the integration of physical and behavioral health remains steady. The two objective that are in ‘yellow’ status are as follows:

MaineCare Objective #2: Implementation and ongoing support of Behavioral Health Homes and

Maine Quality Counts Objective #3: Quality Improvement support for the BHH Learning Collaborative.

While these above objectives are in ‘cautious’ status, both have recently accomplished major milestones with the formal launch of Behavioral Health Homes on April 1, and the BHH QI support kick-off meeting that was held on April 29. Enough caution remains, however, for these objectives to remain in yellow status, as issues continue to be aggressively managed through risk mitigation. More detailed information can be found in the MaineCare and MaineQuality Counts quarterly reports, included in section 2.

**Develop New Workforce Models**

Three objectives are in yellow status under the Strategy to Develop New Workforce models, as follows:

Quality Counts, Objective 3: QI Support for BHHs. This objective also supports the Integration of Physical and Behavioral Health, and the status here is the same as provided regarding that strategy.

MaineCare, Objective 3: Develop and Implement Physical Health Integration workforce Development to Mental Health Rehab Curriculum. This objective started later than anticipated which is the reason for the yellow status, however, solid progress is being made in the identification of a vendor for this work, and the procurement process is moving through SIM governance.

Maine CDC Objective 2: The Community Healthworkers Pilot was in a yellow status for the 2nd quarter due to a delayed start on several key tasks, but great progress has been made and this objective has moved to a green outlook.

**Develop New Payment Models**

One objective under the strategy to Develop New Payment Models is in red status, MaineCare Objective 1, Accountable Communities implementation and ongoing support. This objective is also aligned to the Strengthen Primary Care strategy, and the status was described previously in that section above.

All other objectives aligned to this strategy are in green status.

**Centralize Data and Analysis**

Centralize Data and Analysis is comprised of 4 objectives, all which are in green status and hold there for the outlook for next quarter.

**Engaging People and Communities**

The trend is very positive for the four objectives aligned under Engaging People and Communities, and the outlook is all positive.

**SIM Program**

SIM Program objectives are generally in good shape. One objective, regarding the SIM Operational Plan, was reported as yellow for the 2nd Quarter due to a delay in Project Coordination staffing. The outlook, however, is green for the 3rd quarter as hiring processes are underway and hiring should be completed during the 3rd quarter. In addition, a major barrier was overcome with the sourcing of the self-evaluation vendor for SIM, and we expected to be able to fully complete contracting and begin work with the SIM evaluator during the FFY 3Q.

The SIM Program has achieved most of the goals during the FFY14 2Q. The major objectives for the SIM Program are as follows:

*Objective 1: Manage the SIM Governance Process*

* The SIM Program enjoyed robust engagement from our Governance Structure during FFY14 2Q.
* We held 3 monthly Maine Leadership Team meetings
* 4 SIM Steering Committee Meetings were held
* All three subcommittees have met through the second quarter, and each subcommittee held 3 meetings during the quarter. In addition, several workgroups, associated with the subcommittees, also met during the 2nd quarter. Additional details of all of these meetings can be found in the below attachments provided by each SIM Partner who is leading the subcommittees: MHMC = Payment Reform, Quality Counts = Delivery System Reform, and HealthInfoNet for Data Infrastructure.

Minutes, including action items and outcomes of each of these meetings are available on the Maine SIM website, located here:

<http://www.maine.gov/dhhs/sim/index.shtml>

In addition, we plan on executing a SIM Governance Survey in the 3rd quarter, to ensure that governance member expertise is being effectively leveraged so that appropriate governance process adjustments can be planned and executed.

*Objective 2: Manage the SIM Operational Plan*

The SIM Operational Plan continued to be executed during the 2st quarter as well, with highlights being the formation of a SIM architecture/strategic framework to better aligns SIM Objectives to overarching strategies, and enabling more clarity in governance and operations. The SIM Strategic Framework came together during the 2nd quarter, and will used for high level SIM reporting, SIM high level self-evaluation tracking, budgeting, and risk and issue mitigation. The framework is used at the beginning of this report above on page 3. This “simplified” view of SIM is critical to enabling SIM governance to “pull the wagon in the same direction” as we move forward, and we believe it’s development is a key breakthrough in SIM organization.

*Objective 3: Manage the overall SIM Project Plan and Budget*

SIM Program Plan highlights include the development of processes to track SIM partner invoices, monthly reports, and quarterly reports to the SIM “SST” or ‘single source of truth’ document that continues to serve as the master SIM program plan. This process includes effective ways to ensure that the SST remains updated as SIM project plans change and adjust, as they inevitably will do. Finally, the Risk/Issue identification and mitigation process was developed and introduced to SIM governance, and consencus seemed very positive as an effective way to ensure that broad governance remains on the same script in governing the SIM plan.

Plans for the 3rd quarter include the finalization of the SIM ‘dependency web’, which will involve the development of a view and process for tracking the intricate interdependencies with the SIM Program Plan, and keeping all partners informed of changes that need to be made as a result of other adjustments.

Details included in the following report:



*Maine Health Management Coalition 2Q Objective Status and 3Q Outlook*



*HealthInfonet 2Q Objective Status and 3Q Outlook*



*Maine Quality Counts 2Q Objective Status and 3Q Outlook*



*MaineCare Objective 2Q Status and 3Q Outlook*



*Maine CDC 2Q Objective Status and 3QOutlook*



*SIM Budget*

**Section 2 Accomplishments and Planned Activities Over the Next Quarter and Likelihood of Achievement**

All Status and Outlooks based on SIM Program Plan, attached below:



**4 Substantive Findings and Lessons Learned**

* High level architecture of strategic goals should be a requirement of the SIM operational plan
* Processes to manage integration and dependencies should be a requirement of SIM operations

**5 Findings From Self-Evaluation**

Self-Evaluation has not started yet

**6 Problems Encountered/Anticipated and Implemented or Planned Solutions**

Detail included in work stream detail included above. In addition, Risk/Issue Log is attached here that outlines Risks and Issues identified to date. A Risk/Issue mitigation plan will be developed based upon the risks and issues that are prioritized as the highest risks to SIM success.



**7 Work Breakdown Structure**

****

**9 Point of Contact**

Randal J Chenard

SIM Program Director

221 State Street

Augusta, Maine 04333

207-287-5013