|  |  |
| --- | --- |
|  | **SIM Leadership Team**  **Friday, June 5th 2015**  **12:00 p.m.-1:30p.m.**  **Main Conference Room**  **221 State Street** |

Attendance: Absence:

David Simsarian, Director, Business Technology, Terry M. Hayes, Representative, Maine State Legislature

Anne Head, Commissioner, Professional and Financial Regulation Michael D. Thibodeau, Senator, Maine State Legislature

Randy Chenard, SIM Program Director, DHHS Richard Rosen, Commissioner, DAFS

Kevin S. Flanigan, MD, Medical Director, OMS/DHHS Stefanie Nadeau, Director, OMS/ DHHS

Jim Leonard, Deputy Director, OMS/DHHS Holly Lusk, Senior Policy Advisor, Governor’s Office, Chair

Mary Mayhew, Commissioner, DHHS

Interested Party:

Amy Dix, Director of VBP

| **Agenda** | **Discussion** | **Next Steps** |
| --- | --- | --- |
| **Review and acceptance of March SIM Maine Leadership Team minutes** | * Jim made a motion to accept minutes, seconded by Commissioner Head. Minutes accepted. |  |
| **Unallocated SIM Budget and MDDC Request**  **Objective: Obtain direction from MLT on how to access best use for remaining SIM funds – approximately $1 m** | * Randy explained the document Possible SIM Budget Adjustments, which details unallocated funds and looking toward MLT’s direction strategically. It was clarified that adjustments to current objectives was taken into account, and that some decisions need to be made or the money would risk not spending. He also said that he had a discussion with Holly and she felt it was important to hold a substantial amount of money for further evaluation of the grant. * It was stated that for all funding requests there needs to be transparency and the protocol for requesting funds from SIM that was developed last year needs to be followed. Randy also explained that this was time sensitive, as the money must be spent by Sept 2016. * Randy explained that it had already been decided to move forward on the Work Process Amendment, request had gone to Commissioner Mayhew and was approved. It was decided that a funding request form would be filled out for that request, retroactively. | A SIM Funding Request Form will be completed for each request. |
| **SIM Update on Target development for Core measures**  **Objective: Provide real time status update to MLT regarding development of core metric targets and obtain MLT direction on proposed next steps** | * Dr. Yoe came to update efforts to establish targets for SIM Core measures. Randy oriented MLT members to the SIM Core Target Illustration. Expecting to break down MaineCare population to include overall, then subgroups of HH, BHH, and AC members. They are currently working to get commercial payers to establish targets for their population, Medicare has said they are a willing participant. CMMI is very supportive of these efforts and looking for leadership in health plans to help with setting commercial targets. * It was asked why there was such reluctance to set targets from the commercial payers. Jay explained that it wasn’t just the commercial payers that were nervous about setting targets, people in general seem nervous about it because they don’t want to be held accountable if they don’t reach the targets, and also concern that these SIM measures could enter into ACO and other contracts. Jay also stated that there is really no validity to that concern, as the purpose of the SIM core metrics are to measure effectiveness of the grant’s work. * It was also pointed that that the introduction of the target-setting topic has encouraged a lot of good dialogue, like patients enrolled in the BHH program that also have diabetes, and how they affect physical health outcomes for that population. It was also stated that some of the SIM Partners have concerns about the measures and how they are calculated, which is difficult since the measure had been vetted with them. Though, it was pointed out that not all the methodologies had been shared with them, namely the use of Achievable Benchmarks of Care, as well as not risk adjusting. Jay say since the Steering Committee meeting, they have done a lot of work with risk adjustment, but in the end it made very little difference. They also reached out to get concerns from Dr. Letourneau on the use of Achieveable Benchmarks of Care, and from that conversation they decided to establish benchmarks for each of the three years. * Dr. Flanigan expressed concern that if people keep trying to change the measures and the methodologies, it could significantly throw off the evaluation. Dave suggested that they re-present this topic by first pointing out that the targets are aspirational goals of the Grant, but what the State would like to see is incremental gains and continuous improvement toward reaching those targets. Important to remind people why this particular measure set had been agreed upon. Randy said that, in addition, he would like the MLT to endorse this work and focus of the Steering Committee on this particular topic. He will work with Jay and Dr. Flanigan to draft a presentation to the Steering Committee and send it out to the MLT members for tweaks, suggestions, and endorsement. He will also have a discussion at the next Partner Meeting on targets before it heads to the Steering Committee. * Randy also informed the MLT that CMMI is very excited about the target setting work that Maine is currently doing and has offered assistance at a national level. Vaughn Wen, who works with Pat Conway and under Secretary Burwell, has offered to connect with the health plans national organizations to ratchet up discussions on target setting. Randy said there hasn’t been a lot of response from state health plans. It was suggested that before bringing this to national organizations, he hold off and work to further engage the state health plans. | Randy, Jay, and Dr. Flanigan will create a presentation to the Steering Committee on the topic of targets and SIM Core Measures and will send presentation to MLT for edits and endorsement. |
| **EMMS Registered Complaint about MHMC**    **Objective: Inform MLT on EMHS complaint to SIM Governance regarding MHMC activities** | * EMHS reached out to Dr. Flanigan that they have provided feedback to evaluators, to RTI. They said they have been feeling that the Coalition work under SIM is not adding value to achievement of Triple Aim and is confusing providers. Dr. Flanigan has invited them to Steering Committee to speak during the “public comment” part of the meeting. * Dr.Flanigan further explained the issue; Coalition has the perception is that Eastern Maine has expressed concern about quality metrics that have been developed. The Coalition had initially been so impressed with Eastern Maine’s participation in the Measure Alignment workgroup, Dr. Bragg had been enormously helpful in creating quality measure, is no longer attending the group. Leadership at EM is not ready to accept what their designees accepted in that group. They already have specific measures that they distribute to their providers and feel that public reporting is confusing both their providers and the public. Eastern Maine currently is not planning to public report on their own provider measures. * EMHS does not want to speak at the Steering Committee, they asked to speak directly with the MLT. It was determined that they should have to follow the proper SIM leadership channels. Dr. Flanigan will reach out to the EMHS representative that sits in at the Steering Committee and offer to list her on the Public Comment section during the next Steering Committee meeting. | Dr. Flanigan will offer Public Comment time for the EMHS rep that attends the Steering Committee meetings. |
| **Trends and SIM adjustments**    **Objective: Review with MLT where SIM is with outcome results and the discussion occurring at Steering regarding making recommendations for adjustments** | * Randy explained that this was a discussion at the Steering Committee, which led to the creation of a small team to look at SIM budget/objectives, and the outcomes of that work were inconclusive. Katie Fullam-Harris had explained that one of the challenges was having the meeting include just the Partners, who had interest in the status quo, and herself. There was a decision made to reengage a different group with more providers and that was timely, because information is starting to flow from the Evaluators. |  |
| **Sustaining SIM**    **Objective: Review work that has currently been done to analyze SIM sustainability needs to ask specific questions to MLT to obtain direction** | * Work going on within DHHS to look at all SIM objectives, explained how to interpret the handout which details between what MaineCare will, and will not, fund and what the State will, and will not, fund. Looking for direction from MLT, especially around sustaining the SIM governance and continuing to have the State act as convener of these providers and groups. * Jim suggested keeping a structure in place; that it needs to be strongly evaluated for continuation. If this structure is allowed to die out, they will never be able to revive it. He did state that there need to have a fully descriptive what it will serve and how, detailing its specific purpose/charge. | Randy will further detail the purpose and charge of the SIM governance structure, if it were to continue to be funded after SIM. |