**SIM Sub-Committees – High Level Scope Grid**

| **SIM Key Strategies** | **Delivery System Reform Subcommittee (QC)** | **Payment Reform Subcommittee (MHMC)** | **Data Infrastructure (HIN)** |
| --- | --- | --- | --- |
| ***Payment Reform*** | Inform primary care and behavioral health quality improvement learning collaboratives with strategies to advance quality care with new payment models | Align innovative payment strategies (e.g. Shared Savings ACO models) | Assess data availability (Clinical, Administrative) |
| Inform payment reform strategies with best practices and feasibility considerations from delivery system  | Inform development of MaineCare Accountable Communities initiative | Inform plan for reporting of clinical quality metrics under Accountable Communities  |
|  | Promote Value Based Insurance Design |  |
|  | Identify cost drivers and develop payment reform strategies through Health Care and Behavioral Health Care Cost Workgroups |  |
| ***Data Analytics & Reporting*** | Provide guidance on development, use of Primary Care Practice Reports, Accountable Communities Utilization reports | Identify Accountable Care / ACO measures  |  |
|  | Identify Behavioral Health Metrics for public reporting and payment reform |  |
| Provide guidance on use of new metrics for clinical quality improvement in primary care and behavioral health  | Identify process/system for reporting health care costs (to include BH) |  |
| ***System Delivery Reform*** | **Primary Care Transformation**: Provide guidance on Health Homes (Stage A) QI support/ Learning Collaborative  |  | Develop, promote use of HIN alerts for ED, admissions |
| **Primary Care Transformation**: Inform development and execution of Developmental Disabilities/ Autism Training for Primary Care Providers  |  |  |
| **Integration of Behavioral/ Physical Health:**  Inform development of Behavioral Health Homes (Stage B) |  | Inform plan for reporting of clinical quality metrics under Health Homes  |
| **Integration of Behavioral/ Physical Health :** Provide guidance on BH Homes (Stage B) Learning Collaborative |  |  |
| **Integration of Behavioral/ Physical Health:** Inform development and incorporation of physical health training component to Mental Health Rehabilitation Technician/Community (MHRT/C) certification program |  |  |
| **Health System:** Promote wider system-level QI changes – e.g. improving care transitions, reduce avoidable ED use | Support ACO Learning Collaborative - e.g. ACI workgroups |  |
| **Public Health:**  Direct development of CHW Pilots | **Public Health:**  Develop sustainable payment structure for CHW Pilot |  |
| **Public Health:**  Direct development of DPP initiative | **Public Health:**  Develop sustainable payment structure for DPP initiative |  |
| **Leadership**: Direct, provide input on leadership development initiative |  |  |
| ***Health Information Technology*** | Guide, inform and support the development and application of health information technology tools for quality improvement in primary care, behavioral health, and healthcare neighborhood |  | Vet evaluation of BH RFP |
| - Support the development and implementation of PHR pilot in Health Home settings to advance quality of care goals |  | Launch, evaluate PHR |
| Educate delivery system and patients on effective use of health information technology tools for improved quality of care |  | Advise on interoperability issues |
| ***Consumer Engagement*** | Develop consumer messaging campaign (ME CDC) |  |  |
| Provide guidance on Shared Decision Making pilot, once Vendor is selected | Inform development of VBID strategies |  |
|  |  |  | Inform messaging and protocol re consent and sharing of personal health information data  |