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|  | **SIM Steering Committee****Wednesday, November 13, 2013****10:00 a.m. – 12:00 p.m.****State House, Room 126****Augusta** |

**Attendance:**

Shaun Alfreds, COO, HIN

Jay Yoe, PhD, DHHS – Continuous Quality Improvement

Randy Chenard, SIM Program Director

Andy Webber, CEO, MHMC

Dr. Kevin Flanigan, Medical Director, DHHS

Frances Jensen, MD, CMMI, Project Officer, via phone

Rhonda Selvin, APRN

Katie Fullam Harris, VP, Gov. and Emp. Relations, MaineHealth

Noah Nesin, MD

Rebecca Arsenault, Franklin Memorial Hospital

Penny Townsend, Wellness Manager, Cianbro

Jack Comart, Maine Equal Justice Partners

Kristine Ossenfort, Anthem

Sara Sylvester, Administrator, Genesis Healthcare Oak Grove Center

Dale Hamilton, Executive Director, Community Health and Counseling Services

Lisa Sockabasin, DHHS, MeCDC, Director OHE

**Absent:**

Representative Matthew Peterson, excused

Rose Strout, unexcused

Deb Wigand, DHHS – Maine CDC, unexcused

Lynn Duby, CEO, Crisis and Counseling Centers, excused

Lisa Letourneau, MD, Maine Quality Counts, excused

Eric Cioppa, Superintendent, Bureau of Insurance, unexcused

Representative Richard Malaby, unexcused

Stefanie Nadeau, Director, OMS/DHHS, excused

**All meeting documents available at:** [**http://www.maine.gov/dhhs/oms/sim/steering/index.shtml**](http://www.maine.gov/dhhs/oms/sim/steering/index.shtml)

| **Agenda** | **Discussion/Decisions** | **Next Steps** |
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| **Welcome** | Dr. Flanigan welcomed members with a reminder regarding Microphone use. |  |
| **Accept Minutes from 10/23/13** | Minutes reviewed and accepted with changes to attendance: Kris Ossenfort and Sara Sylvester both present at the October 23, 2013.Randy Chenard made comments reminding the team that the Steering Committee’s work is transitioning in earnest now from the implementation phase work, largely focused on governance establishment and process development, to work that will provide oversight to the testing phase of the grant, which includes governing SIM deliverables in the SIM Program Plan. We will begin to hear regular reports from the Subcommittee Chairs, and our first major order of business will be to work through the identification of the core metrics that will be used for SIM and embedded in our Driver Diagrams. |  |
| **Accountable Communities Initiative Discussion****Accountable Communities Initiative Discussion cont.** | Dale Hamilton requested the Steering Committee send a letter to Director Nadeau requesting the Office of MaineCare review the timeline for the Accountable Communities Initiative and the Behavioral Health Home Initiative. Concern was expressed regarding the speed of the development and the concurrent nature of both initiatives moving so fast and at the same time.Questions/Concerns:Does this provide enough time for the organization that are considering applying for the Accountable Communities Initiative to coordinate appropriately with Behavioral Health Homes? *Response – MaineCare acknowledges that the timelines are not ideal, however the issue is that both of these models are foundational to the SIM test grant and key in the CMMI approved “Operational Plan”, and as such need to move forward aggressively to allow enough data and measurements be obtained during the SIM grant as possible. She explained that the “Request for Application” regarding the Accountable Communities does not require that interested organizations to have fully developed relationships with the Behavioral Health Homes, this process is step-by- step process. The only requirement of the interested providers is that they have relationships with “Primary Care Providers”; providers will have until the finalization of the contracts (April/May) to establish required relationships with behavioral health homes and others. The State will also help in building the necessary relationships by providing/sharing contact information, with permission, between the Behavioral Health Homes applicants and Accountable Communities applicants*.What are the ramifications of not implementing Accountable Communities? *Response – this would delay implementation by at least 4 or 5 months and adversely impact SIM grant testing.*Are there any inherent conflicts in the implementation of both initiatives? *Response - No, although it will be labor intensive for providers.*Will the Accountable Communities be implemented statewide? *Response – Yes and MaineCare has been conducting public forums, webinars etc. to coordinate this effort.*Concern was expressed that MaineCare has proposed a draft quality measure with comments due by Friday, November 15th, prior to the development of the core metrics and measures through the SIM process. *Response – The State does not view this as a conflict, as the core measures will be developed with flexibility with a core set and subset based on population, etc. developed based on consensus of the SIM Governance Structure. Some members felt this could be confusing and add burden to providers.* Is it the intent of the state to identify winners and losers? *Response – not the intent of the state to identify winner or losers. It is the goal of the state to insure improved health outcomes and define incentives/rewards for improve care and reduced cost.*Is the time between the initial provider application due in Dec. and finalizing the contract (April/May) be enough time for an interested provider to develop required relationships? *Response – some felt that implementing the two initiatives wouldn’t allow enough time for alignment, coordination and communication to develop the required relationships.*Following this lengthy discussion members reached consensus to send a letter to Director Nadeau expressing this concern and requesting that MaineCare review the timeline and options to better align the initiatives if possible. | Development/selection of Core Metrics/Measures will be a standing Steering Committee agenda item.Dr. Flanigan and Dale Hamilton will draft letter to MaineCare requesting response for consideration during the December 11th, Steering Committee meeting. |
| **ACI/PTE Distinction Draft****ACI/PTE Distinction Draft cont.** | Frank Johnson provided a brief description of the “Distinctions between PTE and ACI” document.Discussion:Pathways to Excellence (PTE) – has been in existence for the past 7 to 8 years. PTE is comprised of two steering committees: Physicians and Systems consisting of multi-stakeholders, vet measures, assign value for comparative ratings, methods to report results and website design for public reporting of the results. PTE system subcommittee measure are limited to inpatient hospital measures of care: effective care, maternity care, safety care and patient experience. Hospitals are ranked: Low, Good, Better or Best.Accountable Care Implementation (ACI) – this steering group was established to identify intervention and pilots for payment reform and system redesign that may be reported through the PTE. The MHMC database is used by the group to identify priority interventions and establish of performance targets. This group will be used to identify common metrics for aligning measure and payment strategies among the public and commercial sectors. PTE is devoted exclusively to public reporting.Concern was expressed that the differences were not clear and there will be additional measures/metrics which will add burden to providers*. Response: All metric/measures need to be reviewed in the development of the core metrics and this will be an ongoing process and agenda item on the SIM Steering Committee agenda.*Since the PTE has been in existence for a long time will the composition of the group change to better reflect the SIM grant etc.? *Response – It will have to.* |  |
| **Behavioral Health Home Learning Collaborative and Patients Provider Partnership Pilots** | Sheryl Peavey announced the kick-off the Behavioral Health Learning Collaborative and Patient Provider Partnership Pilots being implemented by the State and Quality Counts partnership. Discussion:These initiatives are required in the approved SIM “Operational Plan” but due to the budget constraints of the SIM budget and “Operational Plan” timelines the State Leadership team decided to reach out to the State Partners to implement. As this initiative better fits under the Quality Counts umbrella they agreed to implement. The state RFP process for development would not have allowed for the timely development of the initiatives.This prompted a lengthy discussion regarding the budget and the role of the Steering Committee. Dr. Flanigan reminder members that the Maine Leadership Team had the responsibility of management of the budget and scope. Members requested a list of deliverables that will be RFP’d and those that will be provided through contract. As well as a budget overview. | Budget Overview will be added to the December 11th Steering Committee meeting. Budget updates will be added to all future agendas. |
| **Public Comment** | As time was running out, Dr. Flanigan next requested if there was any public comment. *No comment made at this time.* |  |
| **SIM Steering Committee letter to CMS regarding MPPCH** | Dr. Flanigan brought members attention to the draft letter to CMS for review requesting that members send comments to Dr. Flanigan as soon as possible. | Dr. Flanigan will redraft and forward final version for review prior the December 11th meeting. |
| **SIM Metric Discussion Update – Next Steps** | As time had run out, this item was deferred to the December 11th, meeting. |  |
| **Subcommittee Updates****Payment Reform****Delivery System Reform****Data Infrastructure** | Deferred to the December 11th, meeting. |  |
| **SIM Mission/Vision Statement Finalized** | Deferred to the December 11th, meeting.  |  |
| **Next Meeting** | Since there is only one meeting scheduled for December members reached consensus that the December 11, meeting will be held from **9:00 a.m. – 12:00 p.m.**, Room 228 State House (Capitol Bldg.), Appropriation Committee Room, 228, State House, (Capitol Bldg.). Audio Link is: <http://www.maine.gov/legis/ofpr/appropriations_committee/audio/> | Meeting reminder and materials will be sent and posted (if available) by Denise prior to the meeting. |