

# Connecticut State Innovation Model

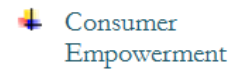
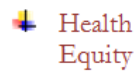
## Work Stream Update



- [Health Management Associates](#) the HEC consultant, led the members of HISC in a discussion on the Health Enhancement Community Planning Process, including the [Reference Community Engagement Strategy](#).
- An HEC RFP review process resulted in the selection of a number of qualified community collaboratives to participate as HEC reference communities.
- The Population Health Council reconvened—HMA introduced next steps and the HEC planning initiative.
- The Consumer Advisory Board (CAB) approved 3 consumer representative application forms – young adult and adult for CAB, and Quality Council.
- The HIT PMO awarded RFQ Contract for Service Area 1 (Project Management, Meeting Facilitation, HIT Council Support and Strategic Planning) is under review by CMS.
- Completed IAPD-U Appendix D updates (language and budget) as per DSS/OHS meeting in February. Currently back under review by DSS for review and submission to CMS.
- The Quality Council reviewed the progress made towards the All Payer Quality Measure Alignment goal of 75%. The current status is 60% with 4 payers reporting for 2017.
- Freedman Healthcare, the VBID consultant, secured agreements with 8 self-insured employers (2 additional agreements pending) to participate in targeted technical assistance initiative. [Participants are receiving technical assistance](#) from the consultant to develop and implement a VBID plan for their employees.
- A Technical Assistance Kick-off event was held for participating VBID employers.
- UConn SWAHEC facilitated a CHW Advisory Committee meeting on March 20<sup>th</sup> where three design groups were created to discuss various key decision points for the CHW Certification Program in Connecticut.
- The UConn Evaluation team published April 1 [dashboard](#) with new data for the AMH program and youth smoking.
- UConn Evaluation received Commercial CAHPS data and began planning for next CAHPS administration
- Carry-over requests covering funding from AY2 to AY3 were approved by CMMI.

Council/ Work Stream	Major Topics Covered	Progress/ Outputs	Next Steps	Upcoming Meetings
<b>Healthcare Innovation Steering Committee (HISC)</b>	<b>HIT Update</b> <b>HEC Planning Kick-off</b>	<ul style="list-style-type: none"> <li>Reviewed and Discussed detailed Health Information Technology Timeline and Milestones</li> <li>Reviewed and Discussed Health Enhancement Community Planning Process, led by the HEC consultant, <a href="#">Health Management Associates</a>. Included discussion on <a href="#">Reference Community Engagement Strategy</a>.</li> <li><a href="#">Presentation for the above items found here</a></li> </ul>	<ul style="list-style-type: none"> <li>Discuss Status of HIT IAPD-U Submission, Quality Measure Alignment, AMH and CCIP Programs</li> </ul>	4/12/18
<b>Consumer Advisory Board (CAB)</b>	<b>Consumer input on barriers to appropriate healthcare</b> <b>Communication strategies</b>	<ul style="list-style-type: none"> <li>CAB approved 3 consumer representative application forms – young adult and adult for CAB, and Quality Council.</li> <li>Approved a motion to establish a resources and reports section on CAB webpage to post event summaries.</li> <li>Formation of a CAB Task Force to explore web-based communication strategies</li> </ul>	<ul style="list-style-type: none"> <li>Applications posted on SIM website and SIM News</li> <li>CAB will review applications received at April Meeting</li> <li>Post reports on SIM/CAB webpage</li> <li>Co-chairs and CAB volunteer will set up a conferne call for Task Force on Web Strategies</li> </ul>	Special CAB meeting regarding PCM 4/5 CAB meeting 4/10
<b>Practice Transformation Task Force (PTTF)</b>		<ul style="list-style-type: none"> <li>No March Meeting</li> </ul>	<ul style="list-style-type: none"> <li>Review and Discuss CCIP Progress and Adjustments for Wave 2, including Streamlined Core Standards</li> </ul>	4/10/18
<b>Health Information Technology (HIT)</b>	<b>IAPD-U Appendix D</b>	<ul style="list-style-type: none"> <li>Awarded RFQ Contract for Service Area 1 (Project Management, Meeting Facilitation, HIT Council Support and Strategic Planning), under review by CMS</li> <li>Contract negotiations for Service Areas 2-4 (eCQM development, HIE service procurement, and sustainability model development) is underway</li> <li>Reviewed HIT Roadmap Technology needs and updated pricing with UConn AIMS</li> </ul>	<ul style="list-style-type: none"> <li>Review and submit IAPD-U Appendix D to CMS.</li> <li>Contracts, MOAs and PSAs as needed to support IAPD Planning and IAPD-U Implementation &amp; Development work.</li> <li>Governance Design Group Kickoff in April.</li> </ul>	April and May Advisory Council Meetings.

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		<ul style="list-style-type: none"> <li>Completed SIM Release of Funds (ROF) Requests for HIT Roadmap Technology</li> <li>Completed IAPD-U Appendix D updates (language and budget) as per DSS/OHS meeting in February. Currently back under review by DSS for review and submission to CMS</li> <li>Completed Governance Design Group presentation and reference materials for kickoff meeting in April</li> </ul>	<ul style="list-style-type: none"> <li>Charter for OSC/eCQM Pilot in process of review. Expected completion in April.</li> <li>Service Area 1-4 Program Kickoff planned for early May.</li> <li>Hire resources as needed to support IAPD Service Area work.</li> </ul>	
<b>Quality Council (QC)</b>	<b>QMA</b>	<ul style="list-style-type: none"> <li>Reviewed the progress made towards the All Payer Quality Measure Alignment goal of 75%. The current status 60% with 4 payers reporting for 2017</li> <li>Continued to consult on the public scorecard (see UConn Evaluation work stream)</li> </ul>	<ul style="list-style-type: none"> <li>Examine progress on Health Equity Measures project</li> <li>Continue to consult on Public Scorecard design</li> </ul>	4/11/18
<b>Care Management Committee (CMC)</b>		<ul style="list-style-type: none"> <li>March committee meeting cancelled due to weather</li> </ul>	<ul style="list-style-type: none"> <li>Share update at May MAPOC CMC</li> </ul>	
(A sub-committee of MAPOC)				



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<b>Population Health Planning (DPH)</b>	<ul style="list-style-type: none"> <li>• An HEC RFP review process resulted in the selection of a number of qualified community collaboratives to participate as HEC reference communities.</li> <li>• A review team was established to identify several CBOs and AN/FQHCs ready for participation in the PSI demonstration.</li> <li>• The Population Health Council reconvened—HMA introduced next steps and the HEC planning initiative.</li> <li>• 2018 CT BRFSS contract has been successfully executed, increasing sample size from 8,000 interviews to over 10,000 to meet the needs of SIM local level data.</li> <li>• Surveillance Analysis and Reporting (SAR) staff are working with OHCA staff to secure electronic access to their Hospitalization database to speed up reporting of hospitalization statistics for small areas. A batch process for geocoding the 2012+ inpatient hospitalization data has been identified.</li> </ul>	<ul style="list-style-type: none"> <li>• Contract negotiations are underway.</li> <li>• Contract negotiations are underway.</li> <li>• Next council meeting on April 24<sup>th</sup>, 2018.</li> <li>• BRFSS staff anticipate finalizing a first draft of the report in May.</li> <li>• Implement a read-only SQL link between SAR and OHCA hospital data system. Submit records that need to be geocoded to the batch-processing system, to allow production of small-area avoidable hospitalization statistics.</li> </ul>		
<b>Person Centered Medical Home Plus (PCMH+, formerly MQISSP)</b>	<ul style="list-style-type: none"> <li>• Published RFP on Jan 8</li> <li>• Reviewing RFP responses</li> <li>• Formally submitted SPA to CMS</li> <li>• PE monthly reports submitted and in review</li> <li>• Planning for information sessions and technical assistance webinars</li> </ul>	<ul style="list-style-type: none"> <li>• Select Wave 2 PEs</li> <li>• Execute contracts with PEs</li> <li>• Hold community information sessions and technical assistance webinars</li> </ul>		

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<b>Value-based Insurance Design</b>		<ul style="list-style-type: none"> <li>Secured agreements with 8 self-insured employers (2 additional agreements pending) to participate in targeted technical assistance initiative. <a href="#">Participants are receiving technical assistance</a> from Freedman Healthcare to develop and implement a VBID plan for their employees.</li> <li>Held Technical Assistance Kick-off event for participating employers.</li> <li>Held first round of one-on-one discussions with employers to assess goals, identify barriers, and determine initial TA strategy.</li> </ul>	<ul style="list-style-type: none"> <li>Secure final 2 agreements to complete the first employer technical assistance cohort.</li> <li>Complete VBID assessments with all payers and share results with SIM governance.</li> <li>Release additional information to SIM governance regarding the participating employers and the TA process.</li> </ul>	June TBD
<b>UCONN Community Health Worker (CHW) Initiative</b>		<ul style="list-style-type: none"> <li>Facilitated a CHW Advisory Committee meeting on March 20<sup>th</sup> where we broke out into three design groups to discuss various key decision points for the CHW Certification Program in Connecticut.</li> <li>Attended Equal Coverage to Care Coalition meeting to discuss the health insurance literacy as a skill for the Community Health Worker.</li> </ul>	<ul style="list-style-type: none"> <li>Prepare and Facilitate three SIM CHW design group video conference calls, as well as a full committee meeting, to advance the certification discussion within the committee.</li> <li>Develop and execute a strategy for the CHW apprenticeship program.</li> <li>Work with the CHW website consultant to collect and include additional resources prior to launching phase two</li> </ul>	4/17

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UCONN Evaluation	<b>Dashboard</b>	<ul style="list-style-type: none"> <li>Published April 1 <a href="#">dashboard</a> with new data for the AMH program and youth smoking</li> <li>Received Commercial CAHPS data and began planning for next CAHPS administration</li> <li>Began analysis of APCD data for dashboard to set baselines and targets for healthcare delivery methods</li> </ul>	<ul style="list-style-type: none"> <li>Continue analysis of APCD data for dashboard to set baselines and targets for healthcare delivery methods</li> <li>Receive data for upcoming dashboard publications including Medicare and additional commercial claims data from APCD</li> <li>Continue planning for next CAHPS administration</li> <li>Continue scorecard development</li> </ul>	
	<b>Scorecard</b>	<ul style="list-style-type: none"> <li>Continued with user interface and methods development</li> <li>Presented decision points to <a href="#">Quality Council</a> and assembled sub-group on scorecard presentation</li> <li>Received final commercial CAHPS data and began analysis</li> </ul>	<ul style="list-style-type: none"> <li>Present scorecard decision points on benchmarks and scoring to the Quality Council and convene the sub-group on presentation</li> <li>Receive Medicare and additional commercial claims from the APCD and continue data analysis</li> </ul>	
<b>Community and Clinical Integration Program</b>	<b>Health Equity</b>	<ul style="list-style-type: none"> <li>Held third Health Equity Learning Collaborative</li> <li>Relocated the <a href="#">Learning Management System educational materials</a> to a website to increase ease of access for CCIP participants</li> <li>Reviewed quarterly reassessments against the CCIP Standards.</li> </ul>	<ul style="list-style-type: none"> <li>Complete initial engagement with Penn Center for CHWs which will result in blueprints for each CCIP PEs.</li> <li>Release summarized results of quarterly re-assessment.</li> <li>Release RFA for supplemental awards for CCIP Wave 1 participants.</li> <li>Release Wave 2 RFA.</li> </ul>	
<b>Advanced Medical Home Program</b>		<ul style="list-style-type: none"> <li>144 practices participating in AMH Program</li> <li>123 have achieved 2014 NCQA Level II or III recognition</li> </ul>	<ul style="list-style-type: none"> <li>Transformation vendor will continue to provide TA</li> </ul>	NA

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<b>Program Management Office (PMO)</b>	<b>Operational Plan</b>  <b>Budget</b>	<ul style="list-style-type: none"> <li>• Provided Core team and report leads new template for quarterly reports in order to better track progress against AY3 goals and milestones as outlined in the operational plan</li> <li>• Carry-over requests covering from AY2 to AY3 were approved by CMMI</li> </ul>		

## ACRONYMS

**APCD** – All-Payers Claims Database

**AHCT** – Access Health Connecticut

**BRFSS** – Behavioral Risk Factor Surveillance System

**CAB** – Consumer Advisory Board

**CCIP** – Clinical & Community Integration Program

**CHW** – Community Health Worker

**CMC** – Care Management Committee

**CMMI** – Center for Medicare & Medicaid Innovations

**DPH** – Department of Public Health

**DSS** – Department of Social Services

**EAC** – Equity and Access Council

**EHR** – Electronic Health Record

**HISC** – Healthcare Innovation Steering Committee

**HIT** – Health Information Technology

**MAPOC** – Medical Assistance Program Oversight Council

**MOA** – Memorandum of Agreement

**MQISSP** – Medicaid Quality Improvement and Shared Savings Program

**PCMH** – Patient Centered Medical Home

**PMO** – Program Management Office

**PTTF** – Practice Transformation Task Force

**QC** – Quality Council

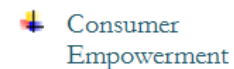
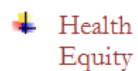
**SIM** – State Innovation Model

**FQHC** – Federally Qualified Health Center

**RFP** – Request for Proposals


**OSC** – Office of the State Comptroller

**VBID** – Value-based Insurance Design




The purpose of this document is to raise awareness among members of SIM Governance and SIM-funded work stream leads so that they can stay up-to-date about SIM progress, understand their work in context, and spot inter-dependencies where collaboration or coordination may be beneficial

 Population  
Health

 Health  
Equity

 Healthcare  
Quality

 Consumer  
Empowerment

 Affordability