

CONNECTICUT
HEALTHCARE
INNOVATION PLAN

Equity and Access Council Meeting

April 23, 2015



Meeting Agenda

Item	Allotted Time
1. Introductions	5 min
2. Public Comments	10 min
3. Minutes	5 min
4. Review Process & Timeline for Issuing Phase I Report	10 min
5. Comments & Discussion on Structure of Draft Report	10 min
6. Review & Act on Slate of Recommendations	75 min
7. Closing Comments	5 min

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EAC: Milestones and Timing

The agenda of EAC meetings is organized around review of outputs for each of the four design groups.

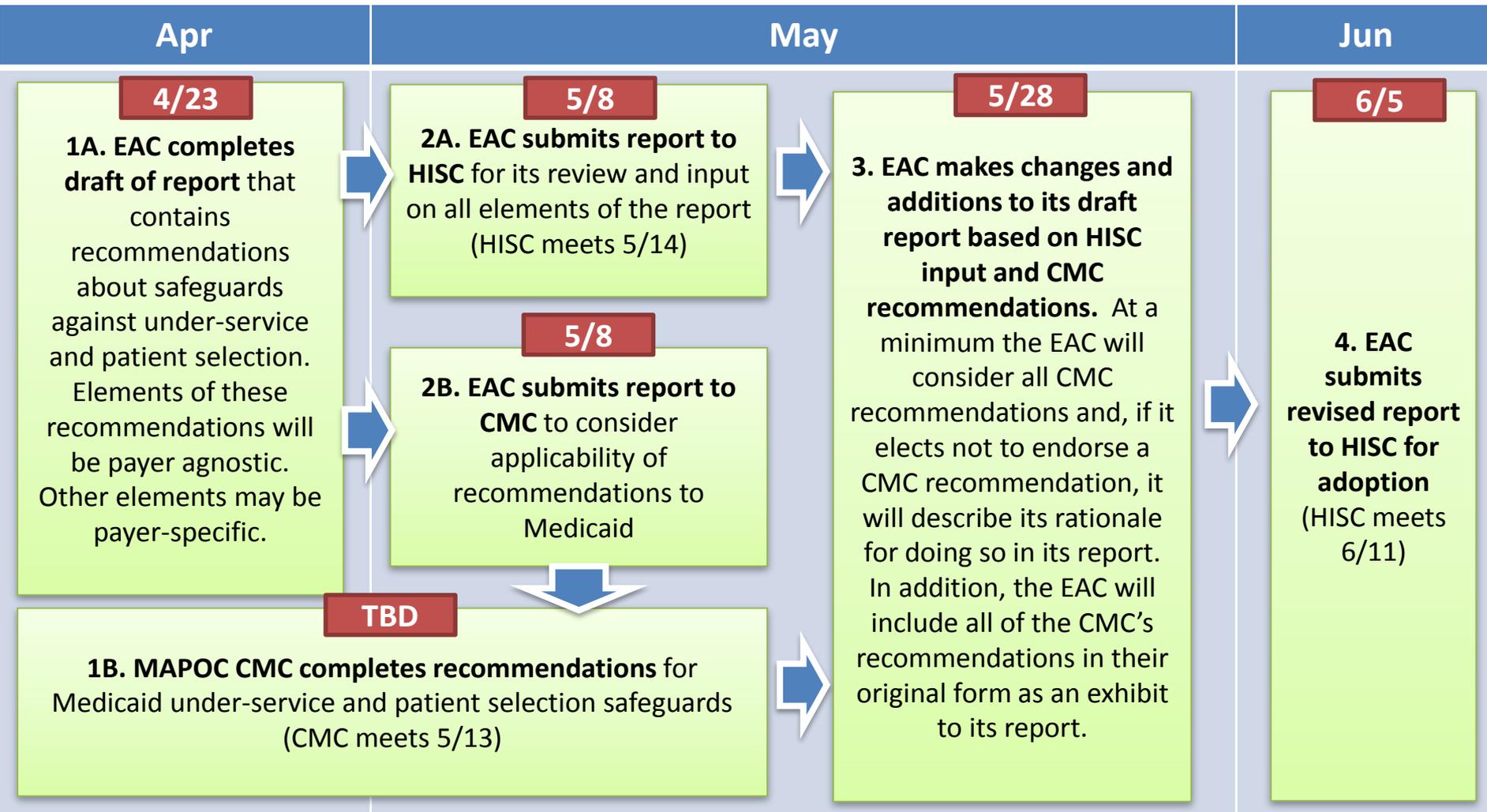
WORKSTREAM/ACTIVITY	January		February				March					April				May			
	Week of:		Week of:				Week of:					Week of:				Week of:			
	19	26	2	9	16	23	2	9	16	23	30	6	13	20	27	4	11	18	25
1 Healthcare Innovation Steering Committee (HISC)			5					12				9					14		
2 Equity and Access Council Meetings	22		5			26		12		26		9		23					28
4 Group 1 - 1A-B: Attribution, risk adjustment, cost benchmarking		M1	R1	M2		R2	M3	R3											
5 Group 2 - 1C-D: Performance-based payment calculation & distribution					M1				M2	R1/R2									
6 Group 3 - 2A-B-C: Rules, communication, enforcement					M1						M2	R1/R2							
7 Group 4 - 2D-E: Retrospective & concurrent monitoring				M1			M2			R1		R2							
8 EAC deliberate on draft report, adopt full slate of recommendations																			
9 HISC review, feedback on EAC report																			
10 MAPOC Care Management Committee (CMC) Meetings						20						8							13

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Today

- M1** Design milestone/workshop 1 **R1** EAC initial review/input
- M2** Design milestone/workshop 2 **R2** EAC final review/input
- M2** Design milestone/workshop 3 (if needed) **R3** EAC final review/input – continuation (if needed)

EAC Completion of Phase I Report – Interaction with HISC & MAPOC

Proposed Steps and Timeline for EAC and MAPOC CMC to Conduct SIM-MQISSP Planning Alignment
 (in Accordance with DSS-SIM Joint Protocol Adopted 2/24/15) – **DRAFT FOR DISCUSSION**



EAC Phase I Report: Outstanding Items (1 of 2)

Outstanding Items		Proposed Course of Action
1	Reach consensus on slate of recommendations to be included in the next draft of the report for submission to the HISC	Make decisions at today's meeting, incorporate in revised report for EAC review by Tuesday 4/28
2	Reach consensus on edits or concerns related to portions of the report other than recommendations	Make decisions at today's meeting, incorporate in revised report for EAC review by Tuesday 4/28

EAC Phase I Report: Outstanding Items (2 of 2)

Outstanding Items	Proposed Course of Action
<p>3 Incorporate additional information that CMS provides related to its experience to date with monitoring methods</p>	<p>Obtain information, share with EAC, and draft language in parallel with HISC review of draft report; incorporate in subsequent draft</p>
<p>4 Articulate elements of implementation for the recommendations the report contains. This might include:</p> <ul style="list-style-type: none">• Vehicle for adoption, e.g.:<ul style="list-style-type: none">• State action under existing authority• Legislation• Voluntary provision in payer-ACO contracts; binding on ACOs• Voluntary provision in ACO-provider contracts; binding on providers• Voluntary, non-binding adoption• Payer applicability, e.g.:<ul style="list-style-type: none">• All-payer• Specific payer(s)• Essentiality, e.g.:<ul style="list-style-type: none">• Essential safeguard• Optional safeguard	<ul style="list-style-type: none">• Conduct a survey to obtain baseline sense of the EAC about attributes of implementation• Discuss and reach consensus at 5/28 EAC• Incorporate in subsequent draft that goes back to the HISC for approval

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