

Connecticut State Innovation Model Work Stream Update



- HIT Stakeholder Focus Groups are being held to identify ways in which stakeholders can work together on HIT solutions. Five focus groups are being held around the state between July 18-20. [Register here!](#)
- Senate Bill 126, An Act Concerning Community Health Workers, was signed into law ([P.A. 17-74](#)), establishing a definition for CHWs and creating a pathway for the development of a Certification Program in Connecticut.
- The [Report of the CHW Advisory Committee](#) was approved by the Committee and will go to the Steering Committee in July.
- The [Kids as Self Advocates \(KASA\) Youth summit](#) for young adults with disabilities, co-sponsored by the Consumer Advisory Board, was held on May 13. The event, intended to help guide young adults through their transition into adult care, featured a youth panel, healthcare town hall, and young adult motivational speakers. More than 80 young adults participated, sharing their experiences in managing their health, their expectations from the healthcare sector, and their perceived barriers and challenges. Planning has already begun for next year.
- Health IT Advisory Council members accepted the [recommendations](#) that came out of both the electronic Clinical Quality Measure (eCQM) Design Group and the [Stakeholder Engagement and Environmental Scan](#). Immunization and HIE Use Case Design Groups have been launched to work on needs related to the Immunization Registry and to prioritize HIE use cases.
- The Population Health Council supported the newly proposed [Community Based Organization \(CBO\) Linkage Model](#) which will serve as the model for the Prevention Service Initiative (Previously Prevention Service Center). The model includes technical assistance to link CBOs to accountable healthcare networks in order to deliver needed prevention services (Presentation can be found [here](#)). A side-by-side of the originally proposed model and the CBO Linkage Model can be found [here](#).
- The VBID Consortium supported the updated VBID Templates-[Fully](#)- and [Self](#)-insured- which streamline the components recommended by the Consortium for inclusion in VBID Plans.
- Readiness Assessments were completed with the CCIP Participating Entities (PEs). These assessments will serve as the baseline for PE progress toward achieving the CCIP Standards. Additionally, each PE hired Community Health Workers through their Transformation Awards. CHWs are a critical component of achieving the CCIP Standards, particularly the Comprehensive Care Management and Health Equity Improvement Standards.
- To date, 50 practices have received NCQA Level 2 or 3 PCMH Recognition, and 22 have received Planetree recognition.
- The Evaluation Team developed a [Public Scorecard Scope of Work](#), which has been reviewed by the Quality Council and will be reviewed by the Steering Committee in July.
- PCMH+ Compliance Reviews are scheduled to take place in August.

Council/ Work Stream	Major Topics Covered	Progress/ Outputs	Next Steps	Upcoming Meetings
Healthcare Innovation Steering Committee (HISC)	<i>HIT</i>	<ul style="list-style-type: none"> Received update on Health Information Technology stakeholdering and planning efforts 	<ul style="list-style-type: none"> Review and approve Prevention Service Initiative Model 	7/13/17 8/10/17
	<i>Population Health</i> <i>Health Equity</i>	<ul style="list-style-type: none"> Received update on Operational Plan Achievements and Risks Discussed the Prevention Service Initiative Model Discussed Race/Ethnicity Reporting efforts led by UConn Health (See June HISC Presentation here) 	<ul style="list-style-type: none"> Approve the Report of the CHW Advisory Committee for release for public comment Discuss Public Scorecard Scope of Work and Timeline Discuss and provide input on the test grant investment strategy 	
Consumer Advisory Board (CAB)	<i>Consumer Engagement</i>	<ul style="list-style-type: none"> Co-sponsored the Kids as Self Advocates (KASA) Youth summit for young adults with disabilities to help guide their transition into adult care. The event featured a youth panel, healthcare town hall, and young adult motivational speakers. More than 80 young adults participated, sharing their experiences in managing their health, their expectations from the healthcare sector, and the perceived barriers and challenges they face. Continued development of CAB Consumer Engagement and Communications Plan Hosted the Community Catalyst consumer engagement workshop to help the CAB further develop their advocacy skills. 	<ul style="list-style-type: none"> Finalize the CAB Consumer Engagement and Communications Plan 	7/11/17 8/8/17
Practice Transformation Task Force (PTTF)	<i>PCPM</i>	<ul style="list-style-type: none"> Provided final Primary Care Payment Model recommendations for inclusion in the PCPM White Paper 	<ul style="list-style-type: none"> Provide final comments and approve the PCPM White Paper for review by the Steering Committee 	8/8/17

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Health Information Technology (HIT)	<p><i>eCQM Design Group</i></p> <p><i>Immunization Design Group</i></p> <p><i>HIE Use Case Design Group</i></p> <p><i>HIT Stakeholder Forums</i></p>	<ul style="list-style-type: none"> • During the May 18th Health IT Advisory Council, the council members accepted the recommendations that came out of both the electronic Clinical Quality Measure (eCQM) Design Group as well as the Stakeholder Engagement and Environmental Scan. • A key objective of the environmental scan was to identify the HealthIT and HIE opportunities of the greatest value to the stakeholders to help advance healthcare in the state. Through this process, the HIT Office recognized the importance and set-up two new design groups – the Immunization Information Systems (IIS) Alignment and the HIE Use Case Design Group. • The purpose of the IIS Design Group is to familiarize members to the high-level functional standards of an IIS system, identify additional stakeholder needs and determine prioritization that focus on the needs of not only DPH but additional stakeholder needs, as well as technical assistance needs by providers and DPH to successful implement electronic reporting and bidirectionality. • The purpose of the HIE Use Case Design Group is to develop use cases that align with Council recommendations, establish value propositions to prioritize the use case, validate the high level functional requirements of the prioritized use cases and provide recommendations on shared infrastructure services. This Design Group held its kickoff meeting on June 27. Eight additional sessions will occur in the month of July and August. 	<ul style="list-style-type: none"> • Schedule Design Group meetings • Begin HIE Entity Planning • Begin eCQM RFP Process Planning 	<p>HIT Advisory Council: 7/20/17</p> <p>HIT Forums July 18 – 20</p>

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		<ul style="list-style-type: none"> The HIT Office is hosting five Health IT Stakeholder Forums across the state between July 18-20. These 90 minute sessions aim to inform stakeholders of the findings of the environmental scan, discuss the findings to understand its impact on the community and how we can all work to create a successful health IT community in the state. Register here! 		
Quality Council (QC)	Public Scorecard	<ul style="list-style-type: none"> Discussed Public Scorecard Exercise results and the Council's recommendations for Public Scorecard structure and design. Notably, the Council urged the Evaluation team to consider consumer reading level and consumer-friendly features. Received update on Quality Measure Alignment Reviewed Public Scorecard Scope of Work and Timeline and provided feedback 	<ul style="list-style-type: none"> Approve Public Scorecard Scope of Work and Timeline 	TBD
Care Management Committee (CMC) (A sub-committee of MAPOC)	PCMH+	<ul style="list-style-type: none"> Attended June MAPOC work session to discuss underservice mitigation strategy 	<ul style="list-style-type: none"> Provide updates at Sept MAPOC CMC meeting 	9/13/17

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Population Health Planning (DPH)	<i>PSCs (Now Preventio n Service Centers or PSIs)</i>	<ul style="list-style-type: none"> Continued an environmental scan of community based organizations (CBOs) implementing prevention services in CT and an engagement process through focus groups on asthma and diabetes. A revised version of the PSC model (now Prevention Service Initiative or PSI) was discussed by the Population Health Council (Presentation can be found here). Consensus on the newly proposed CBO Linkage Model was achieved, therefore, a recommendation was issued to proceed with developing a scope of work for technical assistance to link CBOs to Advanced Networks and FQHCs. A side-by-side of the originally proposed model and the CBO Linkage Model can be found here. Developed a Technical Assistance (TA) Scope of Work outline for the PSI. Developed Asthma, Diabetes Self-Management and Education, and Diabetes Prevention Program program specs. Researched and developed ROI fact sheets for the above prevention services. Performed Advanced Network/FQHC interviews- five competed in June. The DPH Children and Youth with Special Health Care Needs program reviewed and scored four childhood behavioral health programs for inclusion in the menu of services of the Prevention Service Initiative. Predictive modeling of CT town population sizes by-age-sex-race-Hispanic ethnicity (TASRH) continued. 	<ul style="list-style-type: none"> Present recommendations to HISC Complete the second round of CBO focus groups focusing on topic areas such as Asthma or Diabetes. Volunteer members of the Council to work on a design group to develop PSI Technical Assistance components. Meet with Advanced Networks and FQHCs participating in PCMH+ to discuss investment in prevention initiatives. Engage shared savings program designers such as Mercer and CMS/Medicare to learn the opportunities and limitations of shared savings programs in promoting the use of prevention services. Complete technical assistance RFP for Prevention Service Initiative 	7/27/17 CT Hospital Association

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Person Centered Medical Home Plus (PCMH+, formerly MQISSP)		<ul style="list-style-type: none"> Continued working through the Performance Year 1 work plan DSS is currently updating Wave 2 RFP draft Compliance onsite reviews will take place in August PE monthly reports submitted and in review 	<ul style="list-style-type: none"> Continue refining Wave 2 RFP draft Conduct compliance onsite reviews with each PE Finalize compliance review tool and document request 	N/A
Value-based Insurance Design		<ul style="list-style-type: none"> Held VBID Consortium meeting to discuss updated VBID Templates and employer engagement strategy. The updated draft templates (Fully and self-insured) are streamlined to reflect lessons learned over the past year through employer engagement events and surveys. Worked with local researcher, Scott Braithwaite, to develop a strategy to measure impact of VBID plan adoption across all CT fully-insured employers. Incorporated feedback on the updated VBID templates from the Consortium. Led a meeting of the Fairfield Business Council Health and Wellness Committee to promote VBID. 	<ul style="list-style-type: none"> Complete VBID assessments with all payers and share results with SIM governance Continue assessing strategies for working with universities, unions, and human resources specialists to promote VBID uptake Present updated VBID templates to Steering Committee for approval. Work with Dr. Braithwaite to model impact of VBID plan adoption across all CT fully-insured employers. Draft and release RFP for targeted technical assistance to assist individual employers in implementing VBID. 	No upcoming meetings

**UCONN
Community
Health Worker
(CHW) Initiative**

CCIP

- SB 126 was signed into law ([P.A. 17-74](#)), establishing a statewide CHW definition and a pathway for the development of a CHW Certification Program.
- Finalized [Report of the CHW Advisory Committee](#) pending final edits based on 6/28 meeting.
- Participated in a planning calls with Qualidigm to discuss CCIP PE assessments, eLearning modules, and the evaluation of AHEC's TA.
- Evaluators finalized evaluation plan and survey instrument to assess TA being provided to Qualidigm.
- Presented on the CHW Initiative at a meeting of the Health Systems Action Team of the CT State Health Improvement Plan on 5/10.
- Functional webpages of the CHW website were shared with the PMO. Discussed consumer aspects of the CHW website with CAB representatives.
- Convened 11th and 12th meetings of the CHW Advisory Committee on 6/1 and 6/28 to discuss sustainable financing and the characteristics that distinguish CHWs from other health professionals (e.g., patient navigators) that are often conflated with CHWs. Sustainable funding recommendation approved for inclusion in the report.
- Drafted 1st learning management system module for Qualidigm.
- Arranged for Carl Rush and Joanne Calista to provide TA to CCIP PEs through a webinar and workshop on CHWs and CHW supervision.
- Presented SIM CHW Initiative to Covering Kids & Families, CT Voices for Children.
- Hired new CHW, Fatawu Mahama, to work on the SIM project.
- Conduct focus group on 7/11 with 5 CHWs to identify additional CHW website resources.
- Establish partnership with Community Colleges to update CHW Core Competency curriculum for the CHW apprenticeship.
- Complete final Module one narrative for Qualidigm. Start first draft of Modules two and three.
- Continue work on best practice manuals for CHW training, supervision and evaluation.
- Conduct "CHWs: Definitions & Supervision Principles" featuring Carl Rush and Joanne Calista with Qualidigm on July 12th for CCIP and PCMH+ staff.
- Present Report of the CHW Advisory Committee for approval by the Steering Committee.

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UCONN Evaluation	<i>Dashboard</i>	<ul style="list-style-type: none"> Continued data acquisition efforts for dashboard Published 7/1/17 dashboard Submitted APCD data request Completed hardware installation and security plans for secure servers used for data storage and analysis 	<ul style="list-style-type: none"> Data acquisition and analysis for 10/1/17 dashboard publication Continue VBID and APM survey data collection Complete server software installation on servers used for data storage and analysis 	N/A
	<i>Care Experience Survey</i>	<ul style="list-style-type: none"> Sample file from one payer received by vendor, cleaning and deduplication underway Continued communication with a second payer about sample file Began development of coding scheme for providers 	<ul style="list-style-type: none"> Monitor commercial and Medicaid CAHPS implementation Continue to develop coding protocols for data and analysis plan 	
	<i>Public Scorecard</i>	<ul style="list-style-type: none"> Presented scorecard work plan and timeline to Quality Council Submitted APCD data request. Continued to prepare secure servers for storage of data Completed hardware installation and security plans for secure servers used for data storage and analysis 	<ul style="list-style-type: none"> Finalize scorecard scope and budget Prepare plan for web display platform Complete server software installation on servers used for data storage and analysis 	
	<i>Reporting to CMMI</i>	<ul style="list-style-type: none"> Continued data acquisition plan for required metrics and amended reporting metrics as needed Continued data acquisition efforts for metric reporting 	<ul style="list-style-type: none"> Attend monthly call with National Evaluators Continue data acquisition activities for required reporting 	

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Community and Clinical Integration Program		<ul style="list-style-type: none"> • Qualidigm completed readiness assessments to establish the Participating Entities' baseline progress on the CCIP standards. • Qualidigm continued the environmental scan of designated Community Health Collaborative areas to identify existing collaboratives and natural partners for new collaboratives. Qualidigm and the PMO met with Community Care Teams and Coordinated Access Network partners in key CCIP regions. Qualidigm will build on the work of these care teams to develop Community Health Collaboratives. • The PEs each hired Community Health Workers as part of their Transformation Awards. CHWs are a critical element of meeting the CCIP Standards. • Qualidigm completed draft transformation plans which will detail the activities each PE will undertake over the next year to achieve the Standards. 	<ul style="list-style-type: none"> • Finalize the transformation plans in collaboration with the PEs. • Finalize Plan for Community Health Collaboratives in each key region- Bridgeport, New Haven, and Middletown. • Launch learning collaborative activities to support PEs in working through their Transformation Plans. 	N/A
Advanced Medical Home Program		<ul style="list-style-type: none"> • Continued working with Qualidigm on recruitment efforts- 27 practices are currently enrolled in the federally-funded program. • Qualidigm continued providing technical assistance to the AMH practices in both the state-funded Pilot and Federally-funded cohorts. • To date, 50 practices in the Pilot have received NCQA Level 2 or 3 PCMH recognition, and 22 have received Planetree recognition. 	<ul style="list-style-type: none"> • Finalize outstanding applications. 	N/A

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Program Management Office (PMO)	<i>HIT</i>	<ul style="list-style-type: none"> • PMO, OSC, and DSS staff attending an ONC in-person convening on alignment strategies for Health Information Technology advancement. The team engaged with 8 other SIM states and participated in working sessions with ONC partners to detail HIT alignment strategies specific to Connecticut. • Began drafting Operational Plan for Performance Year 2 (Now Award Year 3) • Prepared budget amendment and no-cost extension request 	<ul style="list-style-type: none"> • Finalize and submit budget amendment and no-cost extension request. • Continue drafting Operational Plan for Performance Year 2. • Solicit additional contractual resources to support quality measure alignment and other aspects of PMO scope • Incorporate feedback from Steering Committee on Test Grant Investment Strategy 	N/A

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

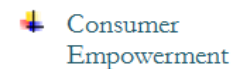
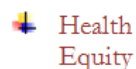
EHR – Electronic Health Record

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

PCMH+ – Patient Centered Medical Home Plus

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