

Connecticut State Innovation Model Work Stream Update

- [VBID Technical Assistance Application](#) was released, [offering free assistance](#) to employers to develop and implement VBID plans. Applications are due February 23. An [informational webinar](#) will be held on February 20.
- The [Wave 2 PCMH+ RFP](#) was released. DSS will accept proposals until 2 PM on February 26.
- Applications are being accepted for participation in the Prevention Service Initiative, which will provide technical assistance to [Healthcare Organizations](#) (Due March 2) and [Community Based Organizations](#) (Due March 9) to build contracted partnerships for the provision of community-based asthma and diabetes management services.
- SIM is seeking Reference Communities to provide recommendations and community-specific solutions to advance the development of an actionable Health Enhancement Community Strategy. [Proposals will be accepted through March 23.](#)
- Based on the approval of the PTF, the Steering Committee approved the [Primary Care Payment Model \(PCPM\) Report](#), for public comment (Due March 22). The Report includes recommendations for the State of Connecticut to pursue multi-payer primary care payment models that increase the funding allocated to primary care providers and increase the flexibility of primary care delivery, including expanded care teams and non-visit-based services.
- The Consumer Advisory Board released draft reports of their findings and recommendations from the [Asthma Forum](#), [Diabetes Support Forum](#), and the [Health Equity Improvement Listening Session](#).
- A second Health Equity Improvement Learning Collaborative event was held for the CCIP Participating Entities to discuss progress and challenges in the collection and use of granular race/ethnicity data.
- A January 1 update was released for the [CT SIM data dashboard](#).
- 123 practices have received PCMH NCQA recognition through the Advanced Medical Home Program.
- Proposals for the Health Enhancement Communities vendor were evaluated and contract negotiation is underway.
- A revised and expanded public scorecard mockup was shared with the Quality Council.
- The SIM [Award Year 3 Operational Plan](#) was approved by CMMI, beginning February 1.
- The SIM and HIT Offices prepared to transition into the Office of Health Strategy beginning February 1.

Council/ Work Stream	Major Topics Covered	Progress/ Outputs	Next Steps	Upcoming Meetings
Healthcare Innovation Steering Committee (HISC)	<i>PCPM</i> <i>Population Health</i>	<ul style="list-style-type: none"> Approved the Primary Care Payment Model Report to be released for public comment Approved the updated Population Health Council Charter/Composition 	<ul style="list-style-type: none"> Review Public Comment and approve the Report of CHW Advisory Committee Provide input on the development of Health Enhancement Communities Review and provide recommendations on risks to SIM strategy 	2/8/18 3/8/18
Consumer Advisory Board (CAB)	<i>Consumer Engagement</i> <i>Asthma</i> <i>Diabetes</i> <i>Health Equity</i> <i>Prescription Drugs</i> <i>Choosing Wisely</i>	<ul style="list-style-type: none"> Held an Asthma Forum on December 2 enabling participants to share their experiences with asthma, learn from each other, and identify healthcare resources in the community. Reviewed key findings and messages. Reviewed findings and key messages from Health Equity Listening Session with Black Faith community Reviewed findings and key messages from Diabetes Support Forum Received updates on Choosing Wisely, the CAB Youth Representation Outreach, and Health Cabinet Prescription Drug Workgroups Identified key themes from CAB Listening Sessions Selected media production vendor to develop patient-centered care process videos. 	<ul style="list-style-type: none"> Identify collaboration opportunities with Choosing Wisely Launch video production efforts. 	2/6/18 3/6/18

Practice Transformation Task Force (PTTF)	PCPM	<ul style="list-style-type: none"> • Primary Care Payment Model (PCPM) Report was reviewed and approved. The PCPM Report includes recommendations for the State of Connecticut to pursue multi-payer primary care payment reform that increases the funding allocated to primary care providers and increases the flexibility of primary care delivery, including expanded care teams and non-visit-based services. 	<ul style="list-style-type: none"> • Review Updated CCIP Standards for use in Wave 2 • Launch planning efforts to develop a primary care payment model that could be incorporated into a concept paper for consideration for a Medicare demonstration 	2/27/18
Health Information Technology (HIT)	Immunization Design Group eQMs HIE Framework IAPD-U	<ul style="list-style-type: none"> • Department of Public Health (DPH) Immunization program is pursuing CMS HITECH Funds with the HIT-PMO support. DPH is working with the ASTHO to develop a portion of the Advance Planning Document (IAPD) that will be integrated into the HIT PMO's work related to the implementation of health information exchange services. • Completed the IAPD-U Appendix D with inclusion of DPH Immunization Information. Presented and received approval by the HIT Advisory Council in the Dec. 21 meeting • Submitted IAPD-U Appendix D on Dec 29th to Commissioner of DSS for review and acceptance to submit to CMS. • Continued work with UConn School of Nursing AIMS on the technical architecture to support the framework for eCQM analytics. • Continued work with UConn School of Nursing AIMS on the technical architecture to support the framework for the HIE Solution. • Created RFP for Health Data Equity Grant work to kick off the end of January. The HIT PMO is seeking proposals from experienced and qualified bidders to provide health equity data (also referred to as social determinants or influencers of health data) 	<ul style="list-style-type: none"> • Review and submit IAPD-U Appendix D to CMS. • The HIT PMO will utilize the IAPD-U in the continued project planning and overall architecture, paying particular attention to the use cases that the Design Group deemed to have a significant value and can be supported by state and HIT PMO services. • Engage in Governance efforts with the kickoff of a HIT PMO Design Group in January. • Draft MOAs or Contracts in alignment with the IAPD-U scope of work as well as incorporating our new Agency alignment; The Office of Healthcare Strategy. • Award RFQ work for the 4 Areas of Contractor Services. 	2/15/18 3/15/18

		<p>identification, collection and pilot these key data elements within a data and analytics solution.</p> <ul style="list-style-type: none"> In January, the HIT PMO concentrated on various activities in support of the HIT Roadmap, as well as drafted and submitted our HIT Annual Plan to the General Assembly as required. 		
Quality Council (QC)	<p>Core Measure Set</p> <p>Reporting Measure Set</p> <p>Public Scorecard</p>	<ul style="list-style-type: none"> Reviewed measure endorsement status of each core measure, specifically adolescent HPV, Developmental Screening in the First Three Years of Life, Medication management for People with Asthma, and Use of Imaging Studies for Low Back Pain. Voted to retain Medication Management and Use of Imaging Studies for further review. Prenatal and Postpartum Care was also retained. Reviewed new measures including Long Acting Reversible Contraception (LARC) and Substance Use. LARC was added to the reporting set. Reviewed reporting measure set Received Update on Public Scorecard 	<ul style="list-style-type: none"> Review Reporting Measure set and make discuss recommendations for adjustments based on alignment with national measure sets Discuss Attribution and Presentation of Public Scorecard 	<p>2/14/18</p> <p>3/14/18</p>
Care Management Committee (CMC) (A sub-committee of MAPOC)	PCMH+	<ul style="list-style-type: none"> Provided updates and timeline at January MAPOC CMC meeting 	<ul style="list-style-type: none"> Provide updates at March CMC meeting 	3/9/18
Population Health Planning (DPH)	<p>PSI</p> <p>HEC</p> <p>BRFSS</p>	<ul style="list-style-type: none"> Released RFP for Reference Communities to inform Health Enhancement Community Planning Released Applications for Healthcare Organizations and Community Based Organizations for participation in PSI 	<ul style="list-style-type: none"> Announce HEC consultant selection Review and select participants for PSI Review and select reference communities 	TBD

	<ul style="list-style-type: none"> • The PSI Technical Assistance vendor was selected and the contract finalized with Health Management Associates. • BRFSS team worked with their contractor to finalize content and question sequence for the 2018 CT BRFSS survey. • 2016 Summary BRFSS report was drafted and shared internally for feedback and edits. • A health report of two urban Connecticut cities-New Haven and Hartford, was drafted to reflect the health status and demographic characteristics in these two cities. 	<ul style="list-style-type: none"> • The finalized BRFSS Summary Report will be distributed to the public in February 2018. • Two additional urban cities (Bridgeport and Stamford) will be added to the Report. • Begin 2018 BRFSS collection 	
Person Centered Medical Home Plus (PCMH+, formerly MQISSP)	<ul style="list-style-type: none"> • Released Wave 2 RFP on January 8 • Updating 2018 SPA for Wave 2 • PE monthly reports submitted and in review 	<ul style="list-style-type: none"> • Select Wave 2 PEs • Obtain CMS approval of SPA • Prepare for April 1 go-live of Wave 2 	N/A
Value-based Insurance Design	<ul style="list-style-type: none"> • Launched Technical Assistance application for self-insured employers interested in adopting VBID plans. Participants will receive one-on-one assistance from Freedman Healthcare to develop and implement a VBID plan for their employees. • Held two webinars to promote the technical assistance opportunity. Worked with brokers, business groups, and key employer partners to further promote the opportunity. • Participated in the “Moving to High Value Provider Networks: A Call to Action” event that highlighted high value provider networks and VBID • Held VBID Consortium meeting to review technical assistance strategy. 	<ul style="list-style-type: none"> • Continue recruiting for targeted technical assistance opportunity through February 23. Host informational webinar on February 20. • Kick off technical assistance in March. • Complete VBID assessments with all payers and share results with SIM governance. 	June TBD

UCONN Community Health Worker (CHW) Initiative	CCIP CHW Certification	<ul style="list-style-type: none"> • Met with the CHW Association of CT's board members to provide updates on the CHW Advisory Committee's progress with certification in CT and to enlist their support moving forward. • Met Claire Qureshi, Senior Advisor for the UN Secretary General's Special Envoy for Health in Agenda 2030 and for Malaria, to discuss the existing landscape for CHWs in CT and next steps for the CHW workforce. • Completed evaluation report of TA provided to Qualidigm and submitted to the PMO. • Completed modules 4 and 5 for production for Qualidigm's LMS to support CCIP PEs. • Completed final revisions to the following best practice manuals and submitted to the PMO: Orientation to Practice, CHW Training, CHW Supervision, and Evaluation. • Finalized CHW Core Competency curriculum with consultant and submitted to the PMO. 	<ul style="list-style-type: none"> • Prepare for and facilitate next CHW Advisory Committee meeting to further discuss recommendations for pursuing CHW certification in CT. • Prepare for Award Year (AY) 3 activities. 	2/20/18
UCONN Evaluation	Dashboard	<ul style="list-style-type: none"> • Data analysis and dashboard page construction for 1/1/18 dashboard including addition of 2016 BRFSS based measures • Published 1/1/18 dashboard • Data acquisition for 4/1/18 dashboard • Continued review of dashboard measures for alignment with AY3 operational plan • Drafted document on evaluation strategy • Drafted milestone and timeline impact statement 	<ul style="list-style-type: none"> • Continue data acquisition and analysis for 4/1/18 dashboard • Complete review of dashboard measures for alignment with AY3 operational plan • Review VBID and APM surveys for 2017 implementation 	N/A
	Care Experience Survey	<ul style="list-style-type: none"> • Continued preliminary Medicaid CAHPS analyses • Met with DSS to discuss preliminary findings and reporting • Implemented replicate sample 	<ul style="list-style-type: none"> • Complete replicate sample administration • Continue data analysis 	

		<ul style="list-style-type: none"> • Began draft of AN characteristic survey 		
	Public Scorecard	<ul style="list-style-type: none"> • Presented on user interface presentation and methodology to Quality Council • Presented demo to Office of Health Strategy and discussed attribution methods • Continued user interface development • Assessed measure feasibility and drafted recommendations • Assessed attribution models and drafted document for Quality Council • Held Quality Council subgroup meetings to determine links to external content 	<ul style="list-style-type: none"> • Present to Quality council on attribution, measures, external content link decisions and user interface progress. • Continue with user interface and methods development • Receive APCD data and begin work with commercial data 	
	Reporting to CMMI	<ul style="list-style-type: none"> • Attended monthly call with National Evaluators • Continued data acquisition efforts for required metric reporting • Submitted metrics for quarterly report 	<ul style="list-style-type: none"> • Attended monthly call with National Evaluators • Continued data acquisition efforts for required metric reporting 	
Community and Clinical Integration Program	Health Equity	<ul style="list-style-type: none"> • Held second Health Equity Improvement Learning Collaborative. Participating Entities are each working through a project plan to increase the collection of granular race/ethnic data. 	<ul style="list-style-type: none"> • Finalize Plan for and launch Community Health Collaboratives 	N/A
	Quality Metrics	<ul style="list-style-type: none"> • Finalized standard quality measure set for CCIP participants. 	<ul style="list-style-type: none"> • Continue Health Equity Learning Collaborative activities including regular calls and in-person learning session 	
	Community Health Collaboratives	<ul style="list-style-type: none"> • Updated the Learning Management System with numerous webinars, resources, and modules to support the Participating Entities on achievement of the core and elective standards 	<ul style="list-style-type: none"> • Launch Comprehensive Care Management Learning Collaborative 	
	CHWs	<ul style="list-style-type: none"> • Developed outline and structure for Comprehensive Care Management Learning Collaborative, which will launch in February 	<ul style="list-style-type: none"> • Launch partnership with Penn Center for CHWs through initial site visit • Strategize for Behavioral Health Integration Learning Collaborative activities 	

		<ul style="list-style-type: none"> Finalized agreement with Penn Center for CHWs to provide support in assessing CCIP CHW interventions and ROI analyses 		
Advanced Medical Home Program		<ul style="list-style-type: none"> To date, 123 practices have received NCQA Level 2 or 3 PCMH recognition. 	<ul style="list-style-type: none"> Continue providing technical assistance to the remaining practices. 	N/A
Program Management Office (PMO)	Operational Plan	<ul style="list-style-type: none"> Received approval for SIM Award Year 3 Operational Plan which begins February 1 Finalized MOAs for Award Year 3 	<ul style="list-style-type: none"> Submit Carry-Over request for unspent Award Year 2 funds. Submit all Release of Funds requests for Award Year 3 funds. 	N/A
	Budget	<ul style="list-style-type: none"> Began transition into the Office of Health Strategy 		

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

LMS – Learning Management System for CCIP

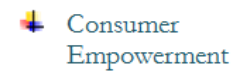
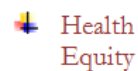
MAPOC – Medical Assistance Program Oversight Council

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