

Commonwealth of Kentucky
Cabinet for Health and Family Services (CHFS)
Office of Health Policy (OHP)



State Innovation Model (SIM) Model Design
October Stakeholder Meeting

October 27, 2015

Meeting Agenda

- Welcome and Introductions** *(Dr. John Langefeld, Chief Medical Officer, Kentucky Department for Medicaid Services (DMS))*

9:30 AM – 9:40 AM

- Overview of Quality Measure Alignment Plan** *(Christina DeSimone, Consultant, Deloitte Consulting)*

9:40 AM – 9:55 AM

- Breakout Activity: Feedback on Quality Measure Alignment Plan**

9:55 AM – 10:25 AM

- Report Out and Discussion** *(Andy Madden, Senior Consultant, Deloitte Consulting)*

10:25 AM – 10:40 AM

- Break*

10:40 AM - 10:55 AM

- Recap KY SIM HIT Innovation Forum** *(Jim Hardy, Specialist Leader, Deloitte Consulting)*

10:55 AM – 11:00 AM

- Recap Feedback from Technical Assistance (TA) Team** *(Dr. John Langefeld, Chief Medical Officer, DMS; Jim Hardy, Specialist Leader, Deloitte Consulting)*

11:00 AM – 11:05 AM

- Recap Feedback from Individual Stakeholder Meetings** *(Dr. John Langefeld, Chief Medical Officer, DMS; Jim Hardy, Specialist Leader, Deloitte Consulting)*

11:05 AM – 11:10 AM

- Update on Value-based Plan Changes** *(Dr. John Langefeld, Chief Medical Officer, DMS; Jim Hardy, Specialist Leader, Deloitte Consulting)*

11:10 AM – 11:20 AM

- Questions & Answers on Value-based Plan Changes** *(Jim Hardy, Specialist Leader, Deloitte Consulting)*

11:20 AM – 11:30 AM

- Next Steps** *(Jim Hardy, Specialist Leader, Deloitte Consulting)*

11:30 AM – 11:35 AM

Quality Measure Alignment Plan

Draft Quality Measure Alignment Plan Overview

Based upon feedback from our CMS Technical Assistance (TA) team, the Kentucky SIM team has developed a draft Quality Measure Alignment Plan for stakeholder input and future inclusion in the State Health System Innovation Plan (SHSIP).

Quality Plan Overview

- A systematic framework for developing and aligning quality metrics and for monitoring the Commonwealth's progress toward its quality improvement goals as each SIM initiative is implemented.
- Quality measures used within each reform initiative tie back to the delivery system and payment reform goals outlined in the *Value-based Health Care Delivery and Payment Methodology Transformation* section of the SHSIP.
- An outline of the steps Kentucky has taken toward a quality measurement strategy as part of the Model Design process.
- A review of the approach taken to engage stakeholders in the development of this strategy and description of the outputs and results of this work.
- An outline of the Commonwealth's proposed approach for a governance structure and quality measure alignment amongst payers.



Commonwealth of Kentucky
State Innovation Model (SIM) Grant
Draft Quality Measure Alignment Plan
October 2015

Kentucky State Innovation Model (SIM)

Document Outline

Stakeholder Engagement

- Quality Strategy/Metrics Workgroup
- Inventory Survey

Guiding Principles

- Guiding Principles for an Overall Quality Strategy
- Guiding Principles in Measure Selection

Quality Governance

- Quality Committee
- Steering Committees

Overview of Kentucky's Quality Strategy

- Core Elements
- Supporting Elements

Data Sources

Future State Quality Measure Alignment

- Work Plan

Stakeholder Engagement

Separate from the overall stakeholder engagement strategy that is described at length in the Stakeholder Engagement section of the SHSIP, the Quality Plan describes the critical role that stakeholder input has played in developing a successful quality strategy.

Workgroup Charter

- Provides background information on CMMI and SIM, a mission statement, an approach to developing SHSIP components, a list of proposed workgroup topics and key questions, and a phased timeline.



Workgroup Agenda Topics

- Reviews workgroup agendas, Kentucky quality landscape, existing national and/or other state quality strategies, quality measure alignment with population health goals, and approaches to measure the success of Kentucky’s reform initiatives – PCMH, ACO, EOC, and the Community Innovation Consortium.

March 2018	April 2018	May 2018
<ul style="list-style-type: none"> • "Kentucky Quality Strategy National and Kentucky Landscape" • National and Kentucky SIM Goals • Workgroup Charter 	<ul style="list-style-type: none"> • Quality Principles in Measure • Quality Principle Alignment with Stakeholder Goals • Stakeholder Variation in Measure Goals 	<ul style="list-style-type: none"> • Advantages and Disadvantages of Learning Goals, Strategies of Quality, SIM Goals and National Population Health in the Context of the Plan
June 2018	July 2018	October 2018
<ul style="list-style-type: none"> • Detailed Review of Draft State Plan in Context of Quality Strategy for Each Reform Initiative (PCMH, ACO, EOC, and Community Innovation Consortium) 	<ul style="list-style-type: none"> • Stakeholder Panel Presentations on Existing Kentucky Efforts in Each Reform Area (PCMH, ACO, EOC, and Community Innovation Consortium) 	<ul style="list-style-type: none"> • Other State Approaches to Quality Measure Alignment, PCMH and ACO Measurement, and Behavioral Health and Oral Health Measurement • Presentation of Outline for SIM Quality Plan

Workgroup Schedule

- Recaps the series of monthly meetings and emphasizes the consistent attendance throughout the Model Design period, averaging approximately 50 stakeholders from across the health care landscape at six in-person workgroup meetings.



Stakeholder Inventory Survey

- Presents quality-related findings from the stakeholder inventory survey:
 - **48%** of the total stakeholder respondents (**123 total**) indicated their participation in a quality initiative supporting health reform in some capacity
 - **53%** described the level of success of their quality initiative as either extremely or very successful
 - **42%** described the initiative as neither successful nor unsuccessful
 - **5%** described their initiatives as somewhat or completely unsuccessful

Guiding Principles

The plan also outlines two sets of guiding principles focused on (1) the overall SIM quality strategy and (2) measure selection for each reform initiative.



Guiding Principles for an Overall Quality Strategy

- | Patient and Provider Impact |
|--|
| <ul style="list-style-type: none"> • Applicable across provider types and the care continuum • Patient-centric • Understandable by patients • Equitable across the spectrum of stakeholders • Allow for patient accountability • Simple; low administrative burden |

- | Appropriateness |
|---|
| <ul style="list-style-type: none"> • In alignment with national metrics • Address priorities for health improvement • Able to be benchmarked • Contain appropriate units of measure • Equitable across the spectrum of stakeholders • Easily measurable, but accurate |

- | Design Features |
|--|
| <ul style="list-style-type: none"> • Consistent definition • Timely and current • Flexible • Achievable • Clinically useful • Reliable and valid • Promotes safety • Ability to support rapid-cycle change |

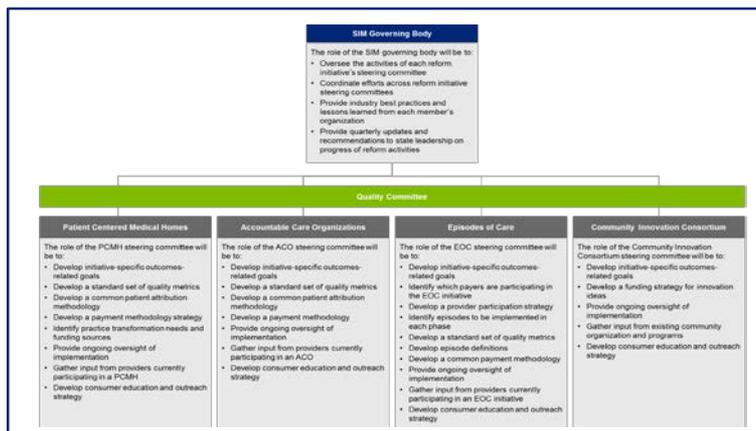
- | Financial Impact |
|---|
| <ul style="list-style-type: none"> • Low-cost, high-value • Balance efficiency in care delivery versus outcomes • Risk-adjustable • Usable for payment reform • Process and outcome-driven |

Guiding Principles for Measure Selection

Kentucky will be establishing Steering Committees and a Quality Committee that will be responsible for applying these guiding principles to the SHSIP components and select measures that are multi-payer aligned, actionable, and focused on population health.

Quality Governance Structure

The plan goes into greater detail to describe the relationship between roles and responsibilities of the Steering Committees for each reform initiative and of the Quality Committee.



SIM Governance Structure



Quality Committee Role

- Work with each Steering Committee to develop a cohesive quality strategy across all the reform initiatives
- Leverage the work of the Quality Strategy/Metrics Workgroup and specifically focus on applying the guiding principles developed by this workgroup
- Support the development of the quality strategies of each Steering Committee, monitor each reform initiative's performance against quality metrics, and report quality outcomes for each reform initiative to the Steering Committees and the SIM Governing Body
- Develop and monitor adherence to an overall quality strategy
- Develop SIM dashboard, which will outline progress against population health goals and goals for each reform initiative

Each Steering Committee will use the guiding principles for measure selection that were developed by the Quality Strategy/Metrics Workgroup to choose the most appropriate metrics for each reform initiative.

Overview of Kentucky's Quality Strategy: Core Elements

In addition to developing guiding principles, the Quality Strategy/Metrics Workgroup identified four core elements of Kentucky's overall quality strategy, which are described at length in the draft plan.

1. Link quality metrics to the PHIP goals and objectives

- Quality and Steering committees to establish causal relationship between attainment of quality goals for each reform to achievement of PHIP goals
- Align data collection and reporting requirements for providers to report on these quality measures



2. Leverage existing state and national efforts to develop a core measure set (e.g., the Institute of Medicine (IOM))

- Steering Committees to consider measures from CMS inventory, IOM, National Dental Quality Alliance (NDQA) and other sources
- Steering Committees to prioritize the universe of measures using CMS tool



3. Standardize and streamline quality reporting processes wherever possible

- Quality Committee to gain multi-payer and provider support for quality reporting requirements developed throughout the SIM pre-implementation period
- Recurring meetings with payers and multi-disciplinary providers throughout the measure development process



4. Develop a statewide quality reporting strategy that also measures quality improvement at the community level (Consortium)

- Individually measure each project/initiative and its community-level impacts
- Develop reporting strategy for the community-based reforms that are able to measure success within distinct populations, geographies, and health statuses

Overview of Kentucky's Quality Strategy: Supporting Elements

In addition to the core elements, the Quality Strategy/Metrics Workgroup identified four supporting elements that build upon each core element. These supporting elements are described at length in the draft plan.

1. Expand Medicaid MCO quality incentive program

- Stakeholders support adopting an expanded Medicaid MCO quality incentive program to align with each SIM initiative and promote the standardization of measure sets and streamlined reporting
- Consider linking value-based models to incentive and/or withhold programs



2. Leverage existing community health needs assessments when developing quality goals for each reform initiative

- Coordinate on-going health planning activities at the community level with provider and state-based health planning efforts
- Use existing reporting structures as a means to streamline and reduce provider burden



3. Improve measurement strategy of screening and counseling activities

- Expand focus beyond medical care for and treatment of the chronic conditions to early interventions and preventive care
- Quality Committee and Steering Committees to consider the inclusion of quality measures related to screenings, preventive care, and early interventions



4. Promote rapid cycle evaluation and monitoring

- Quality Committee and Steering Committees to develop their measurement strategies to allow for early evaluation of each step of the initiatives in order to facilitate needed changes in the design of the initiatives

Data Sources

In order to calculate and report on the quality metrics selected by each SIM reform Steering Committee, the Commonwealth is committed to undertaking a data needs assessment at the beginning of the pre-implementation period of the SIM project.

- 1 Develop an inventory of the current data available publicly across the Commonwealth
- 2 Identify the data needed to calculate and report on progress being made against quality metrics
- 3 Develop a plan to obtain data that is required, but that is not currently available or being collected

SIM Reform	Metric	Data Source	Data Owner	Currently Available?	Relevant Data Stakeholders
	<i>(e.g. Readmission within 30 days)</i>	<i>(e.g., Claims)</i>	<i>(e.g. Medicaid)</i>	<i>(e.g. Yes)</i>	<i>(e.g., State, Payers)</i>

PCMH

ACO

EOC

Community Innovation Consortium

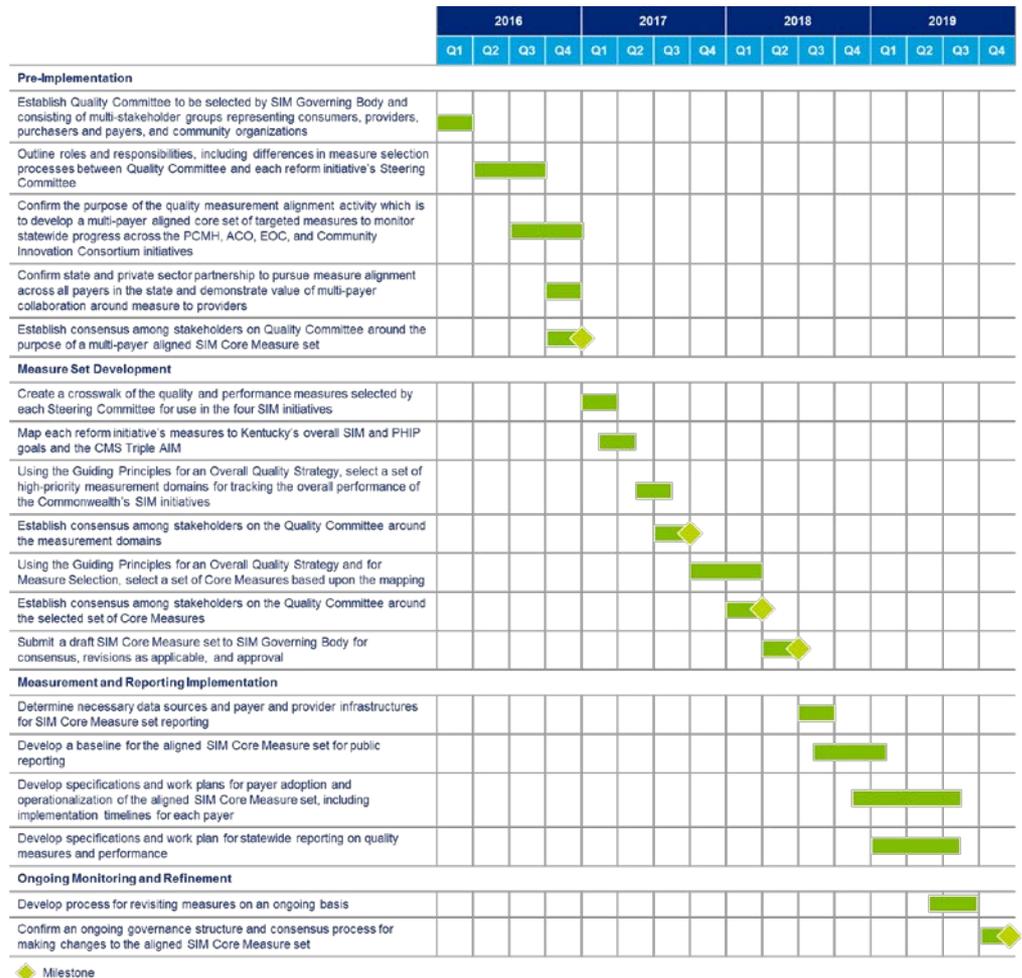
The data needs assessment tool will provide the Commonwealth with a template to track the data needs for each of the chosen metrics, as well as evaluate progress towards having the ability to collect needed data.

Future State Quality Measure Alignment

The Commonwealth developed a detailed work plan focused on achieving stakeholder buy-in and developing a set of SIM Core Measures that will, by aligning quality measures across all payers in the state and being mapped to the PHIP goals, measure the statewide progress across.

Work Plan Overview

- The SIM initiatives span several different multi-payer delivery system and payment reform efforts.
- There is a need to focus on quality measurement alignment among the Commonwealth's payers because of its potential to improve delivery system performance and significantly reduce the administrative burden on providers.
- A successful quality measure alignment strategy will require committed stakeholder engagement to pursue measure alignment across public and private payers, combined with a well-founded governance structure and consensus process for both developing and continuously improving the core measure set.
- Leveraging successful approaches taken by other SIM states who are currently testing their models, the Commonwealth developed a proposed plan to accomplish this work.



Work Plan for Quality Measure Alignment (Page 13)

Breakout Groups: Feedback on Quality Measure Alignment Plan

Break

Recap KY SIM HIT Innovation Forum

The Kentucky SIM team hosted the first half-day SIM HIT Innovation Forum on Tuesday, September 29, 2015 in Bowling Green, KY in conjunction with the 8th annual KHIE eHealth Summit that was held on Wednesday, September 30, 2015.

200/ **Attendees**
 Approximately 200 attendees registered and attended the SIM HIT Innovation Forum

Keynote Speech: “From Data Drivers to Google Glass: Recent Innovation in Health Technology”

- Piper Nieters Su, J.D., Vice President, Health Policy, The Advisory Board Company

Panel: Using Technology and Data Infrastructure to Realize the Potential of SIM Reforms

Facilitator:

- Christopher Clark, Executive Director, Office of Administrative and Technology Services (OATS), Kentucky CHFS

Panelists:

- Patricia MacTaggart, Senior Advisor, Office of the National Coordinator for Health IT
- Greg Moody, Director, Ohio Office of Health Transformation
- Troy Trygstad, Ph.D., Pharm D, Vice President of Pharmacy Programs, Community Care of North Carolina (CCNC)
- Trudi Matthews, Managing Director, Kentucky Regional Extension Center
- Praveen V. Arla, D.O., Chief Medical Officer, Southern Kentucky Healthcare Alliance
- Josh Rosenthal, Ph.D., Co-Founder and Chief Scientific Officer, RowdMap

Panel: Kentucky Tech Innovators Driving Improved Health and Health Care

Facilitator:

- Rob Sprang, Director, Kentucky TeleCare

Panelists, Personal Mobile Health:

- Natalie Hodge, M.D., Co-Founder and Chief Medical Officer, Personal Medicine Plus (PMP)
- Brandi Harless, Co-Founder and Chief Executive Officer, PMP
- Robert Esterhay, M.D., Founder and Vice-President of Digital Health Innovations, Medica Nexus
- Judah Thornewill, Ph.D., Chief Executive Officer, Medica Nexus

Panelists, Screening and Tracking:

- Ted Smith, Ph.D., Chief of Civic Innovation, Louisville Metro Government
- Mary Horsley, R.N., Clinical Trials and Telemedicine Director, St. Claire Regional Medical Center

Panelists, System Quality and Efficiency:

- William C. Thornbury, Jr., M.D., Founder and Chief Executive Officer, meVisit Technologies
- Sunnie Southern, R.D.N., Founder and Chief Executive Officer, Viable Synergy LLC

Panelists, Data and Analytics:

- Kevin Bramer, President and Chief Executive Officer, Lucina Health
- Frank Frigo, Co-Founder and Chief Product Officer, Edj Analytics

Recap Feedback from Technical Assistance (TA) Team

The Kentucky SIM team met with CMS TA partners from the Center for Health Care Strategies (CHCS) and the State Health Access Data Assistance Center (SHADAC) on October 6-7th to discuss feedback and recommendations for Kentucky's draft Value-based and Quality Measure Alignment plans.

Overview of TA Materials

The CMS TA partners provided the Kentucky SIM team with a variety of different tangible resources for inclusion in and/or guidance for developing the remaining sections of the SHSIP:

1. Feedback and recommendations to be incorporated into draft Value-based Plan
2. A compilation of PCMH quality metrics across SIM Model Test states
3. Information regarding the Minnesota e-Health Initiative
4. Strategies for incorporating population health in Medicaid delivery system reforms
5. Resources to support efforts to develop specific oral health improvement strategies
6. Information on the governance structures that states have created to oversee the SIM initiative
7. Examples of existing diabetes measure composite targets/goals for the PHIP
8. Resources on rural health models
9. Future review of draft sections of the Kentucky SHSIP

The general feedback from the CMS TA team was that Kentucky is making significant progress in its Model Design in comparison to other Round Two Model Design grantees.

Recap Feedback from Individual Stakeholder Meetings

In addition to monthly full stakeholder and workgroup meetings, the Kentucky SIM team has conducted a variety of different individual stakeholder meetings with representatives from payer, provider, and advocacy groups.

Over a **dozen** individual stakeholder meetings with payers, providers, and advocacy groups since August 2015

- Meeting Topics
 - Directional support for SIM
 - Harmonization approaches
 - PCMH approaches
 - Total cost of care approaches and infrastructure
 - Concerns/questions about EOCs
 - Concerns about SIM timing and available provider and payer resources
 - Inclusion of oral health care
 - Inclusion of behavioral health care
- Changes to Kentucky's Model Design as a result of the meetings
 - Adoption of NCQA PCMH certification standard
 - Inclusion of pre-certification support in the PCMH payment model
 - Addition of a primary care/oral health pilot program within PCMH
 - Extension of the timing of the EOC initiative to add a public reporting phase prior to the beginning of the risk model
 - Clarification of an "opt-out" approach for provider participation in SIM

Update on Value-based Plan Changes

As a result of the multiple individual stakeholder meetings the Cabinet has conducted regarding SIM, specific changes are being made to the draft Value-based Health Care Delivery and Payment Methodology Transformation Plan.

Clarifying Provider Participation Language

- The Commonwealth understands that providers are at different stages of adapting to value-based purchasing strategies being pursued by payers and recognizes that provider capacity to engage in multiple initiatives is limited.
- The goal of the SIM initiative is for each provider to participate in at least one of the four components of the plan. A provider can opt out of any mandatory SIM initiative (e.g., EOCs) if the provider can demonstrate its active participation in another initiative.

EOC Opt-out Provision Language

- The Commonwealth believes that EOCs can be a potential entry point for providers making the transition to value-based care who may not yet be prepared to take on performance and financial risk for the total cost of care for broad population groups.
- However, the Commonwealth realizes that organizations may be already pursuing one of the other value-based strategies outlined in this plan or may want to focus their efforts on one of those strategies.
- In these instances, the Commonwealth will allow organizations to opt out of the EOC initiative if they can demonstrate their engagement in one of the other initiatives.

Update on Value-based Plan Changes: Oral Health

Based upon multiple discussions with the Kentucky oral health community and active KY SIM stakeholders, the KY SIM team developed an approach to further incorporating oral health as a component of the draft Value-based Plan.

Patient Centered Medical Homes (PCMH) Initiative

- Incorporate components of the "Oral Health Delivery Framework" developed by Qualis Health which include co-located medical/dental service clinics and primary care dentistry referral networks as recommendations for all providers participating in PCMH initiative
- Conduct a three-tiered pilot with more advanced PCMH sites to compare: (1) PCMHs with co-location of dental services, (2) PCMHs with a referral process for dental services, and (3) PCMHs without a dental component

Accountable Care Organizations (ACO) Initiative

- Recommend adoption of oral health performance and/or quality measures within measurement strategy for ACO initiative
- Highlight an oral health component as a section of the RFI and subsequent RFP to include individuals receiving Medicaid medical services and LTSS and/or LTC in an ACO

Community Innovation Consortium

- Add to the consortium description a list of suggested areas of focus, including oral health. Other examples may include behavioral health, physical health comorbidities, obesity, tobacco use, diabetes, and other population health efforts

Similar discussions with other stakeholder groups (e.g., behavioral health, public health, and community-based organizations) are scheduled and may result in similar changes to the Value-based Plan.

Q&A

Next Steps for the Model Design

Stakeholder feedback will be incorporated into the draft Quality Measure Alignment Plan after today's meeting and incorporated continuously into the Value-based Plan in early November. The Kentucky SIM team is working towards a complete draft SHSIP for stakeholder input on **November 25, 2015**.

November 2015 SIM Calendar*

M	T	W	T	F
2	3	4	5	6
9	10	11	12	13 ✓ Post Draft HIT Plan for Feedback
16	17	18 <i>November Stakeholder Meeting</i>	19	20
23	24	25 ✓ Post Draft SHSIP for Feedback	26 <i>Thanksgiving</i>	27
30 ★ Draft HIT Plan to CMS				

■ Stakeholder meeting date
 ★ Deliverable due date
 ✓ Post draft document

**All meeting and/or deliverable dates are subject to change*