

HSCRC Care Coordination Workgroup

DRAFT Work Plan

11/2/14

Meeting Dates	Meeting Goals
<p>November 17, 2014 3-4:30 pm at HSCRC</p>	<p>Workgroup Kick Off Meeting</p> <ol style="list-style-type: none"> 1. Intros, Overview of Charge & Outline Schedule of Work 2. Work to Date , including synthesis of Care Management paper done by HMA for the HSCRC, and Care Coordination highlights from Data & Infrastructure and Alignment & Engagement Workgroups 3. Frame Key Issues and Decision Points related to Care Coordination 4. What is a realistic timeline for Care Coordination implementation? We need balance between getting started quickly and the longer-term need for infrastructure (CRISP initiatives, workforce development, building provider collaborations). What are the potential barriers and ways to address them?
<p>December 12, 2014 1-4 pm at MHA</p>	<ol style="list-style-type: none"> 1. Four outside experts advise Work Group on promising care management strategies 2. Facilitated discussion between these experts and members of the Work Group 3. Key goal: To reduce hospital use without creating similar costs elsewhere; building local health system management through having hospital leaders understand the array of services and needs in their most seriously ill population. Effective care coordination can help achieve these goals through a package of services that reflect the patients' priorities and meet all critical needs. There is a reciprocal obligation to manage the service supply and quality to create good care plans. 4. What are the main features of the existing landscape? Gaps, many separate initiatives without linkages? How can we develop regional and statewide collaboration to move toward a better model of coordinated care? 5. Recommendations for action steps
<p>January 7, 2015 10-12 pm At HSCRC</p>	<ol style="list-style-type: none"> 1. Follow-up discussion on best-practice care management elements and potential for statewide / regional collaboration (i.e., on infrastructure of care management across settings, predictive modeling, IT, work force), including timeline for implementation 2. Selected stakeholder groups make brief presentations to the Work Group 3. Decisions on main features of Work Group's conclusions

<p>January 23, 2015 10-12 pm At HSCRC</p>	<ol style="list-style-type: none"> 1. Identification of the key elements of a “Toolkit” of Care Management models and practices from which hospitals and others may draw 2. Development of plan to avert each hospital “reinventing the wheel” by using proven strategies from the Toolkit. 3. Identification of specific communities/regions where a group of hospitals could work together, and with advanced primary care groups and other community organizations to redesign care delivery to reduce the use of avoidable care in high-cost settings.
<p>February 12, 2015 2-4 pm At HSCRC</p>	<ol style="list-style-type: none"> 1. Care Coordination Strategies and Priorities Recommendations 2. Development of action steps, including the roles of state agencies, hospitals, and other key stakeholders 3. Review first draft of report and suggest improvements
<p>February 27, 2015 10-12 pm At HSCRC</p>	<ol style="list-style-type: none"> 1. Develop Care Coordination Timeline and Implementation Plan Recommendations 2. Review second draft report and make recommendations for final changes
<p>February 28 Deliverable</p>	<p>Care Coordination Workgroup Report</p>

Note: This is a preliminary work plan. It is possible that meetings or conference calls could be modified or that some materials may be reviewed via email.

ALL MEETINGS SCHEDULED WILL BE HELD AT THE HSCRC UNLESS OTHERWISE INDICATED