



maryland
health services
cost review commission

Population Health Innovations Subgroup

September 24, 2024

Agenda

- Population Health / High Value Care Plans
 - Update on Structure and Requirements
 - Programs Inventory Overview & Discussion
 - High Value Care Plan Overview
 - VBCI Demo
- Revenue for Reform
- Advancing Innovation in Maryland (AIM)
- Next Steps

Updated Structure and Timelines

- **Part 1: Population Health Programs Inventory**
 - Purpose: To construct a comprehensive inventory of hospital population health programs to provide greater insight to HSCRC staff and commissioners on hospital strategies to drive improved health outcomes and equity. **This will also satisfy a separate reporting requirement on initiatives targeted at addressing the RRIP disparities gap.**
 - Due: December 31, 2024
 - Submission required to avoid 0.19% clawback in January rate order and to be eligible for Readmission Disparity Gap Incentive.
 - HSCRC will provide an e-submission tool through CRISP.
- **Part 2: High Value Care Plans**
 - Purpose: For hospitals to self-identify opportunities to address avoidable utilization / cost and outline strategies to drive out low value care.
 - Due: March 1, 2025
 - Submission required to avoid 0.19% clawback in July rate orders.

Part 1: Population Health Management Programs Inventory

1. Staff Structure / Organization Chart

- Can be system-wide or hospital-specific
- Population Health Teams and Clinical Care Teams, if appropriate

2. Inventory of Population Health Management Programs

- Program Name and 2-3 Sentence Description
- Level of Investment
- HSCRC will provide high-level categories & prompts
- Can be system-wide or hospital-specific programs
- Key metrics used to evaluate program and/or brief summary of program results

3. HSCRC will ask whether programs/strategies impact specific initiatives and measures

- Health Equity Initiatives (Timely Follow-Up Measure, Readmissions Disparities Measure)

4. Inventory can leverage prior and existing reports (e.g. Community Benefit Reports, population health cost report)

DISCUSSION: Defining Population Health Programs

- Starting definition of population health programs
 - Programs designed to improve health outcomes and equity for a specific set of patients or the community more broadly.
- What programs should be submitted as part of the programs inventory?
 - Programs designed to improve the well-being and care for a specific set of patients, e.g. clinical subset, patients with common attributes, payer-specific patient group, etc.
 - Programs designed to reduce health disparities and achieve health equity
 - Programs designed to improve community health more broadly
 - Programs addressing social determinants of health

DISCUSSION: Categorizing Programs & Patient Populations

- HSCRC intends to add drop-down categories and/or checkboxes to group program / intervention types and patient populations.
- What categories should be used to group programs/interventions? *Examples:*
 - Community-Based Care Coordination
 - Community-Based Health Programs
 - Mobile Integrated Health
 - Disease Management for Chronic Disease
 - Telehealth/Telemedicine
 - HRSN/SDOH Supports
- What categories should be used to group patient populations? *Examples:*
 - Patients with Chronic Conditions
 - Patients Defined by Clinical Risk
 - Patients with Unmet Health-Related Social Needs
 - Demographic Populations (e.g. race, gender, income level)
 - By-Payer
 - Other

Population Health Programs Inventory - Next Steps

- Email feedback on definitions, categories, and patient populations to hscrc.grants@maryland.gov.
- HSCRC will aim to issue instructions and an e-submission tool in mid-October.
- Submissions due 12/31/2024 (timeliness of submissions is critical).

Part 2: High-Value Care Plans

- Opportunity analysis conducted using Milliman's MedInsight Value-Based Care Insights (VBCI) tool to identify clinically defined subpopulations with improvement opportunity.
- Hospitals can opt to select an alternate tool, so long as they can quantify the opportunity by reference to a relevant benchmark in the data or from literature.
- Description of new and existing strategies and programs specific to addressing priority area of focus
- Existing programs cited in the High Value Care Plan (Part 2) should link back to the population health programs inventory (Part 1).
- Performance improvement targets

Value-Based Care Insights (VBCI) Tool Demonstration

- VBCI Tool goes Live on 10/22
- Additional Demonstrations Hosted by CRISP
 - Tuesday, October 22nd | 12-1pm
 - Friday, October 25th | 12-1pm
 - Monday, October 28th | 12-1pm
 - Thursday, October 31st | 10-11am

Revenue for Reform – No Updates

- Based on feedback received to date, HSCRC does not intend to add, remove, or make substantial changes to the Revenue for Reform tracks for FY 2026.
- HSCRC will revisit population health priorities, multi-year plans, and future direction in connection with the State's AHEAD Health Equity Plan (HEP) in 2025, which will inform the FY 2027 policy.
- Staff will give an update to Commissioners in November 2024.

AIM - Call for Ideas

- Advancing Innovation in Maryland (AIM) is a contest that seeks to surface ideas for potential implementation to advance Maryland's unique healthcare model, which has the goals of improved patient care and health outcomes, greater equity, and affordability. The AIM contest is supported by a public-private partnership involving the Maryland Department of Health (MDH), the Health Services Cost Review Commission (HSCRC), and local foundations.
- AIM is seeking ideas in three categories:
 - Innovative Interventions: Ideas for interventions that a hospital can implement, by themselves or in coordination with community partners;
 - Innovative Collaborations: Ideas for programs or platforms that the hospital system as a whole or in a region can implement, by itself or in coordination with community partners; and
 - Innovative Payment Approaches: Ideas for payment innovations that the Health Services Cost Review Commission can implement.
- Up to 10 applicants with winning ideas will be selected to receive cash prizes of \$1000 from the Horizon Foundation and be presented to the Secretary of Health and HSCRC for further discussion.
- Submissions are due October 25 at 5PM EST.
- For more details and submission requirements please visit the [AIM Webpage](#).

Next Steps

- There is no follow-up meeting scheduled at this time.
- We may reconvene this group again to further discuss the High Value Care Plans, New Paradigms in Care Program, and results of the Population Health Programs Inventory.
- Email hscrc.grants@maryland.gov with questions or feedback.