

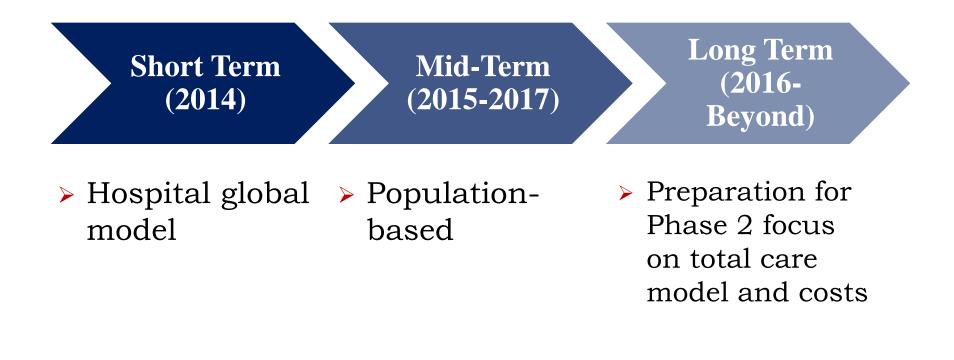
Physician Alignment and Engagement Future Work Plan

June 25, 2014

HSCRC Health Services Cost

Review Commission

HSCRC Model Development and Implementation Timeline



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HSCRC Public Engagement Short Term Process Phases

- Phase 1:
 - Fall 2013: Advisory Council recommendations on broad principles
 - January 2014- July 2014: Workgroups
 - Four workgroups convened
 - Focused set of tasks needed for initial policy making of Commission
 - Majority of recommendations needed by July 2014
- Phase 2: July 2014 July 2015
 - Always anticipated longer-term implementation activities
 - July Workgroup reports to address proposed future work plan
 - Advisory Council reconvening

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Public Engagement Process Accomplishments

- Engaged broad set of stakeholders in HSCRC policy making and implementation of new model
 - 4 workgroups and 6 subgroups
 - 85 workgroup appointees
 - Consumers, Employers, Providers, Payers, Hospitals
- Established processes for transparency and openness
 - Diverse membership
 - Educational phase of process
 - Call for Technical White Paper Shared Publically
 - Access to information
 - Opportunity for comment

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Role of Workgroups

- Purpose of Workgroups is to encourage broad input from informed stakeholders
- Commission decision making is better informed with robust input from stakeholders
- Workgroups identify areas where there is consensus as well as areas where there are differences of opinion
- Non-voting groups

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Current Process, Looking Forward

- Aggressive work plans needed to meet deliverable schedule
 - Time and resource intensive for HSCRC and stakeholders
 - Staff driven work plans and leadership needed for tight timelines
 - Coordination among groups sometimes challenging
 - Subgroups effective strategy to address more technical topics and coordination among groups

Looking ahead to next phase:

- Less frequent meetings would allow more time for analysis and review between meetings
- Ad hoc subgroups effective in engaging stakeholders in development of implementation plans
- Work plan may require different configuration of workgroups
- Opportunity to engage stakeholders to lead different initiatives
- More focus on outreach and education about new model

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Alignment and Engagement is Multi-Stakeholder and Multi-Agency Effort

- HSCRC policy must be considered as part of larger State Strategy
 - Stakeholders leading some initiatives
 - Multi-Agency efforts underway
- Multi Agency and Multi Stakeholder interest in related issues:
 - Alignment; and
 - Care Coordination
- Other workgroups have effectively used subgroups to review more technical issues and make progress between workgroup meetings

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Future Work

- Care coordination requires focused attention
 - Need to understand care coordination strategies
 - Need to identify data needs and use cases
 - Data and infrastructure needs to be determined
- Alignment recommendations implementation strategy and monitoring
- Outreach and education
- LTC/Post Acute consider strategies
- Evidence Based Care
- Tort Reform/Cost of Defensive Medicine



Next Steps

- Staff and stakeholder development work on Alignment recommendations
- Care coordination planning
- Form alignment technical subgroups and develop work plans:
 - Physician alignment
 - LTC/Post Acute
- Multi-Agency, Multi-Stakeholder Alignment Workgroup
 - Fall Meeting to review progress
 - Likely less frequent meetings to allow more time for work between meetings

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