

Steering Committee March 2017 Meeting Summary

Attendance

Steering Committee Members

Present: Jack Billi, Bob Guenzel, Norman Herbert, Mary Beth Skupien, Doug Strong, Rosalie Tocco-Bradley, Brent Williams, Marianne Udow-Phillips

Phone: Dave Brooks, Connie Conklin, Ann Davis, Tony Denton, Pam Smith

Absent: Trish Cortes, Nancy Graebner, Peter Jacobson, Bob Laverty, Ellen Rabinowitz, David Sarns, Marti Walsh

Work Group Chairs

Present: Ruth Kraut

Phone: Paul Valenstein

Guests

Present: Gregory Dill

CHRT staff

Present: Nancy Baum, Kirsten Bondalapati, Elizabeth Jahn, Jeremy Lapedis, Carrie Rheingans, Karin Teske

Key Summary Points

- **SIM Operations Plan:** The majority of the meeting was spent discussing the SIM operations plan. The following sections were discussed:
 - *SIM Governance:* CHRT serves as the backbone organization. The Livingston and Washtenaw CHIR (LWCHIR) will contain the following committees: SIM Work Group; Intervention Subcommittee; Data/IT Subcommittee; Clinical Subcommittee; and a Community Health Improvement Subcommittee (to be formed in Spring 2017).
 - *Community Health Needs Assessment:* The LWCHIR will continue our community-engaged process to create a single CHIR-wide health assessment and health improvement plan focused on high utilizers of emergency departments for SIM year 1. This assessment will identify areas in which the region may intervene to reduce unnecessary emergency department (ED) utilization.
 - *Intervention:* The SIM Intervention is designed to link clinical and social services by addressing the needs of frequent ED users. The Intervention will use a predictive model and provider referrals to identify a target population. The target population will receive enhanced care coordination from “hublets”—existing community providers that will come together assess intervention participants and coordinate care for those participants. The Intervention will also use community health workers to help selected intervention participants navigate healthcare and social service resources. Regular cross-hublet Plan-Do-Check-Act (PDCA) cycles will occur to build relationships between hublets, to make

adjustments to the SIM intervention, identify and problem-solve gaps in care, and to coordinate with existing programs (such as Medicaid Health Plans).

- *Core Metrics, Monitoring and Reporting*: The LWCHIR will collect data from various aspects of SIM work in the community including: Data from annual PCMH social needs screenings of patients; Assessments of intervention participants; assessment of care managers' ability to improve care coordination; intervention participant experience assessment.
- *Data and IT*: The LWCHIR will select an electronic platform that will help the SIM intervention better coordinate care. The LWCHIR will also seek to build on existing health information exchange activities underway in our region.
- *Sustainability*: In addition, a Sustainability Task Force will be created in August 2017 as a subset of the Clinical Subcommittee, and will begin meeting in the last quarter of 2017. The group will develop a plan to have sustainability measures in place by the end of the grant period.
- *Budget*: The budget was presented as approved by the SIM Work Group, with a modification to the CHW budget to include transportation.
- Jack Billi moved to approve the operations plan, which was seconded by Brent Williams. The operations plan was then unanimously approved by the steering committee. Norman Herbert, Doug Strong and Paul Valenstein, as WHI co-chairs and SIM Work Group co-chairs, will sign an approval letter to be submitted with the operational plan to the state. The operations plan will be submitted to the state on April 3, 2017.
- A discussion of what was different in the SIM Intervention described two key differences:
 - The SIM Intervention aspires to have a community-wide care management function, which will create stronger relationships and communications across organizations in our region. This function is sometimes played by select care and case managers, but is largely absent at an institutional level.
 - The SIM intervention will begin to quantify gaps in services in our region and elevate them to the WHI steering committee as well as other bodies, such as the Coordinated Funders or Livingston Human Services Collaborative Body.
- **American Health Care Act (AHCA)**: The AHCA is the Republican-proposed healthcare bill that is moving its way through the House of Representatives. As the AHCA is written, many people would lose health insurance, including many on Medicaid. It would also make health insurance more expensive for people who are older and people who are sicker. It is uncertain whether this bill has support to pass in both chambers of congress.

Action Steps

- Norman Herbert, Doug Strong and Paul Valenstein, as WHI co-chairs and SIM Work Group co-chairs, will sign an operations plan approval letter to be submitted with the operations plan to the state on April 3, 2017.

Next Meeting

March 10, 2017

Friday, April 14, 2017 2:30 – 4:00 PM