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# Presentation to the House Health Care Committee

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Vermont Health Care Innovation Project  
(SIM)

January 22, 2015

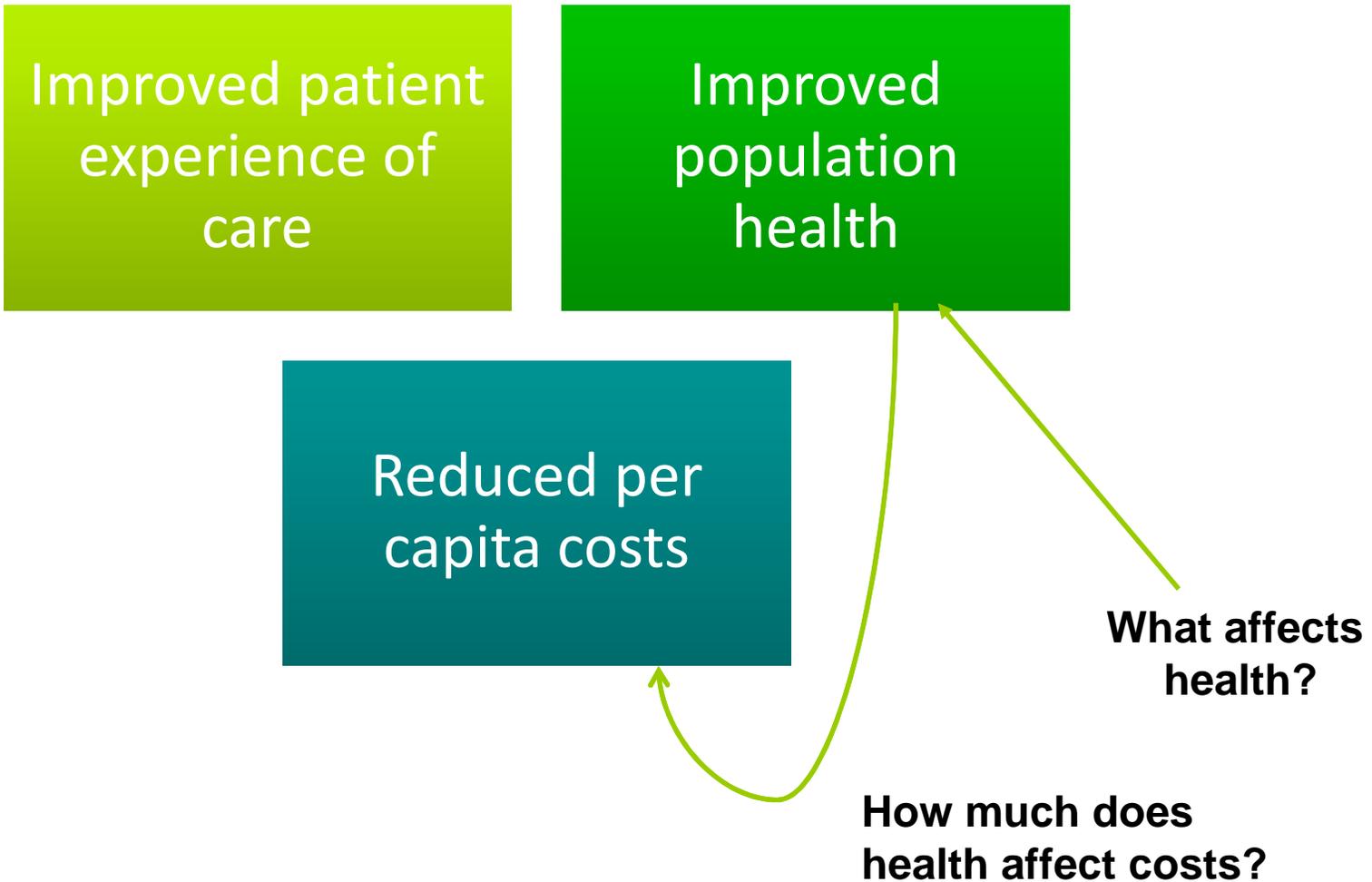
# State Innovation Model (SIM) Testing Grant:

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- Awarded to only 6 states in round one
- Vermont received \$45 million
- Funds spread across 4 years

# VHCIP's goal: the "triple aim"

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# Trying to affect the “value equation”

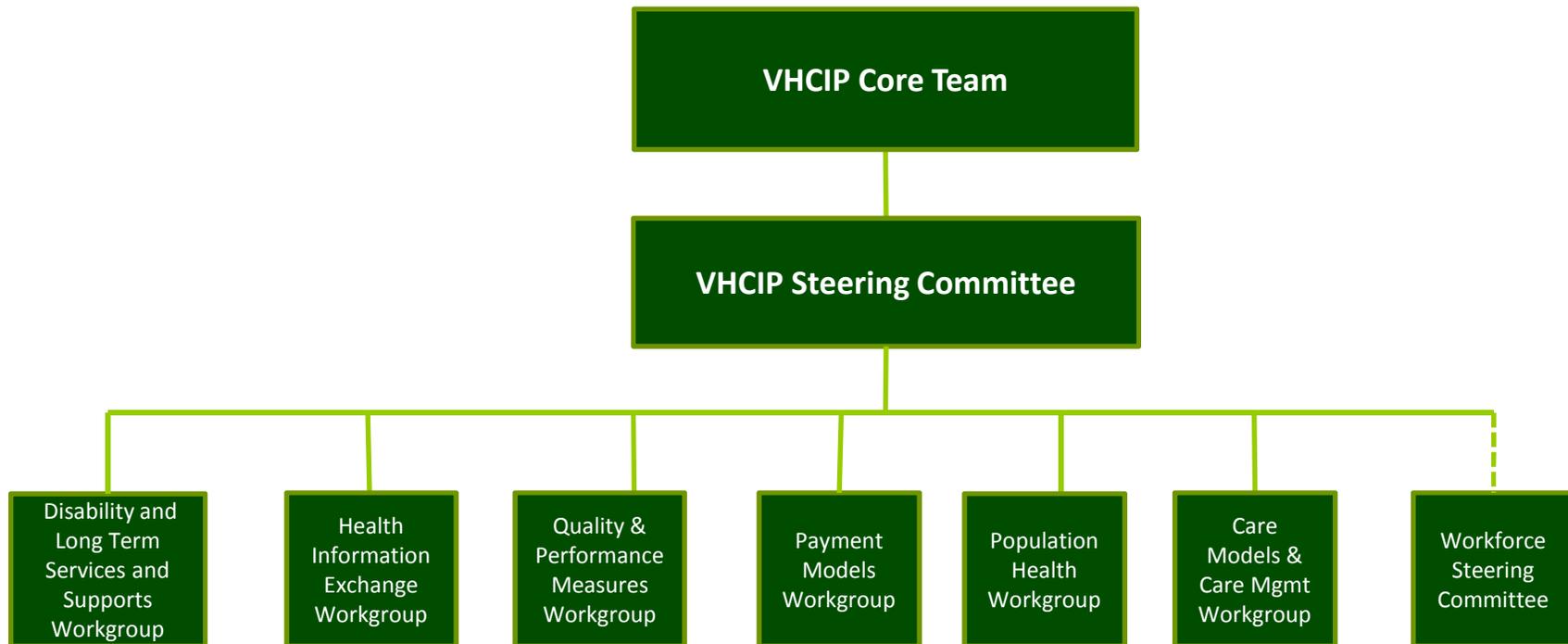
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1. Measure both
2. Create accountability for both
3. Expand unit of payment and scope of quality measurement

# Project structure

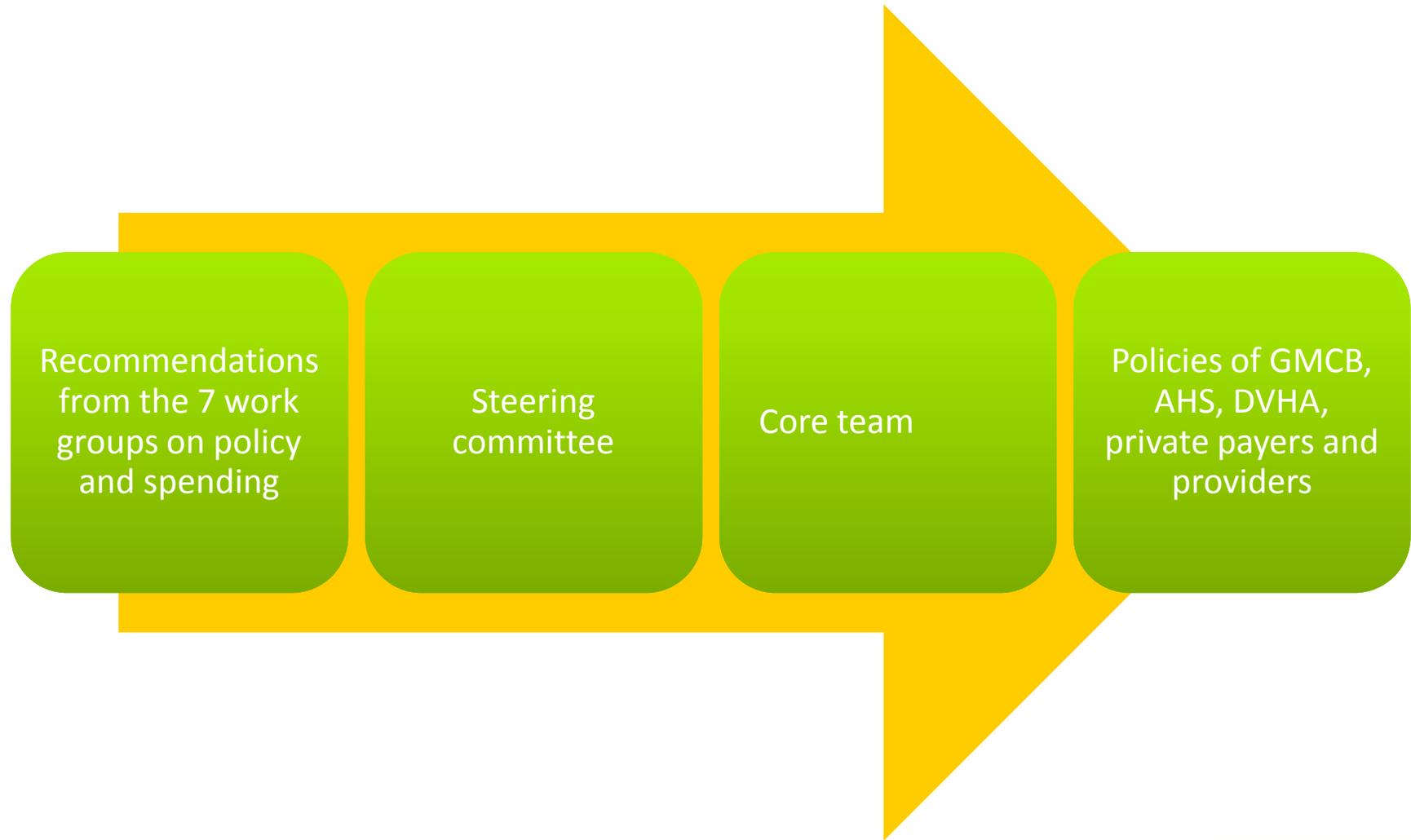
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**More than 300 people are involved in these groups!**

# How does the project work?

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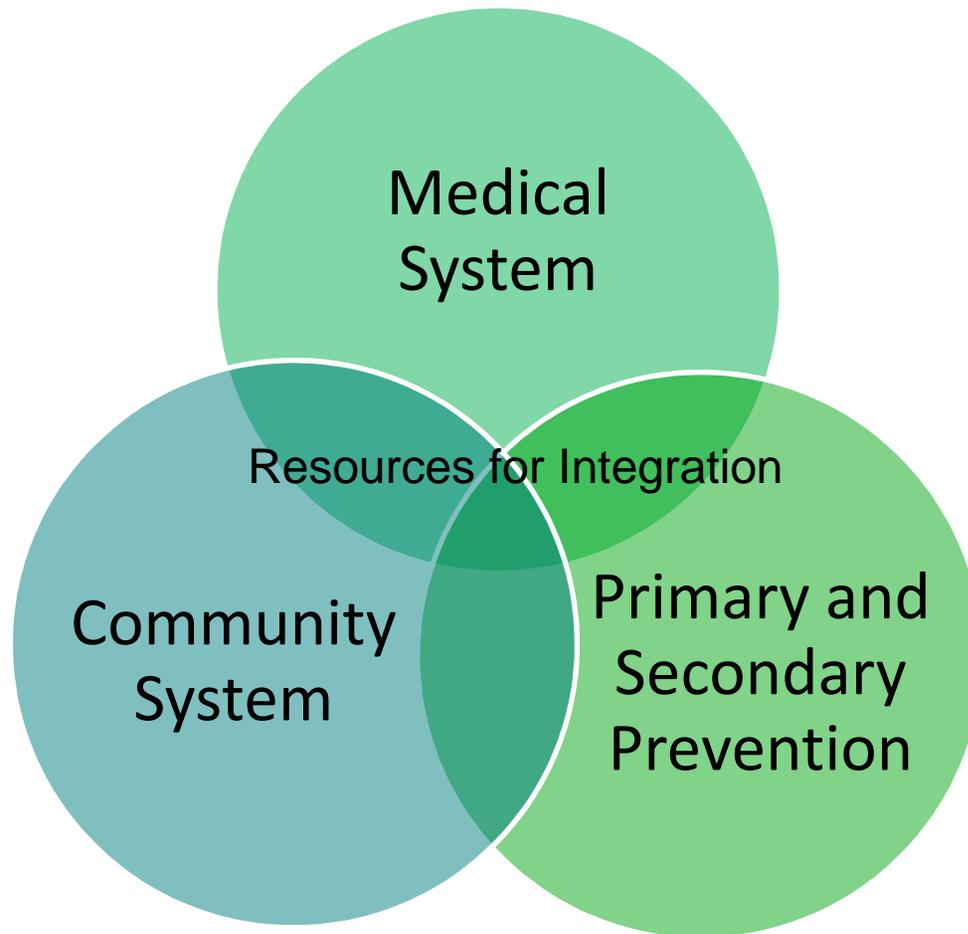
# Three Main Goals:

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- Care Delivery: enable and reward care integration and coordination;
  - HIT/HIE Investments: develop a health information system that supports improved care and measurement of value; and
  - Payment Models: align financial incentives with the three aims.
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- Public/Private Partnership

# Inter-related systems

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# What would constitute success?

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A health information technology and health information exchange system that works, that providers use, and that produces analytics to support the best care management possible.

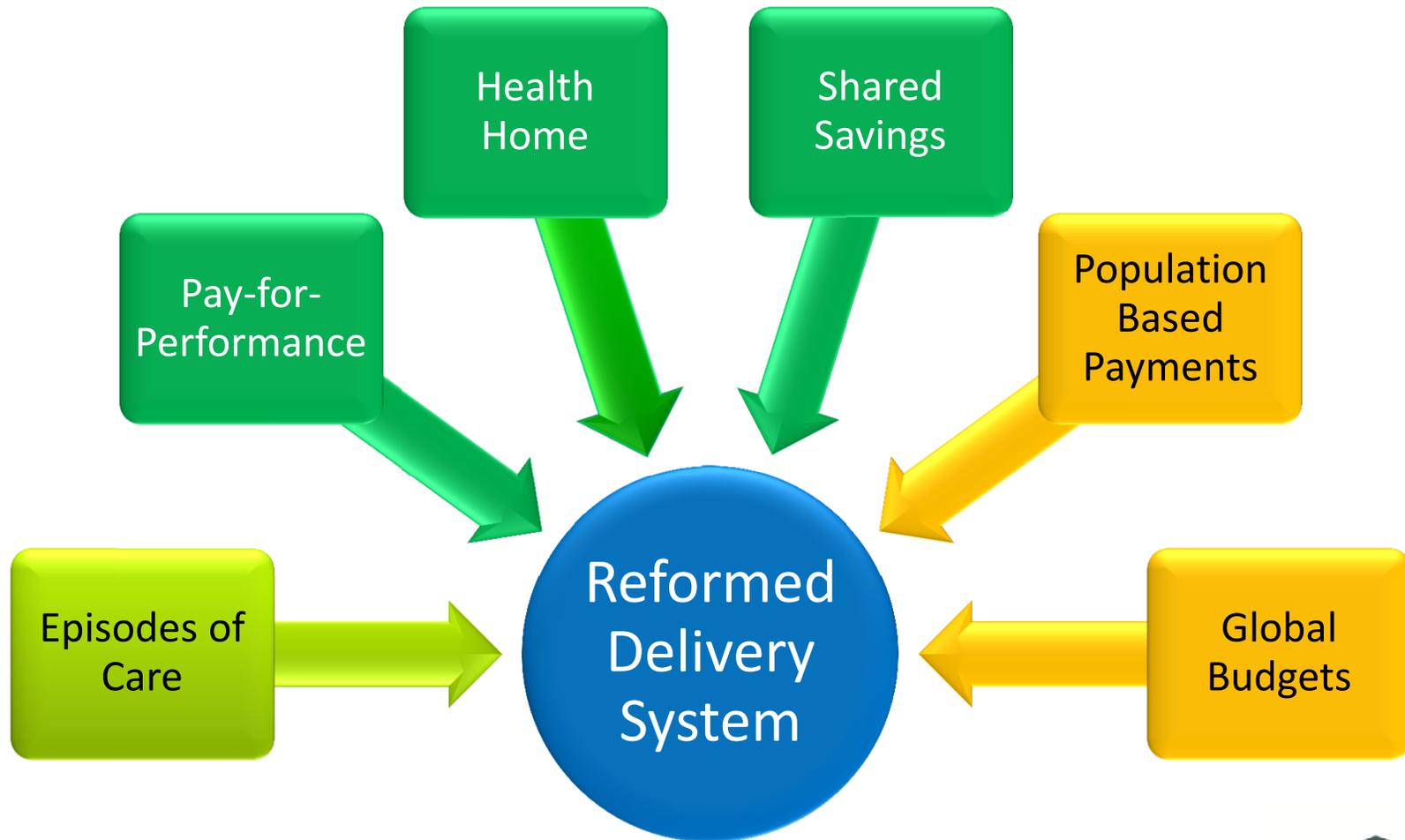
A predominance of payment models that reward better value.

A system of care management that is agreed to by all payers and providers that:

- utilizes Blueprint and Community Health Team infrastructure to the greatest extent possible
- fills gaps the Blueprint or other care models do not address
- eliminates duplication of effort
- creates clear protocols for providers
- reduces confusion and improves the care experience for patients
- follows best practices

# Payment Model Development

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# 2014 Accomplishments

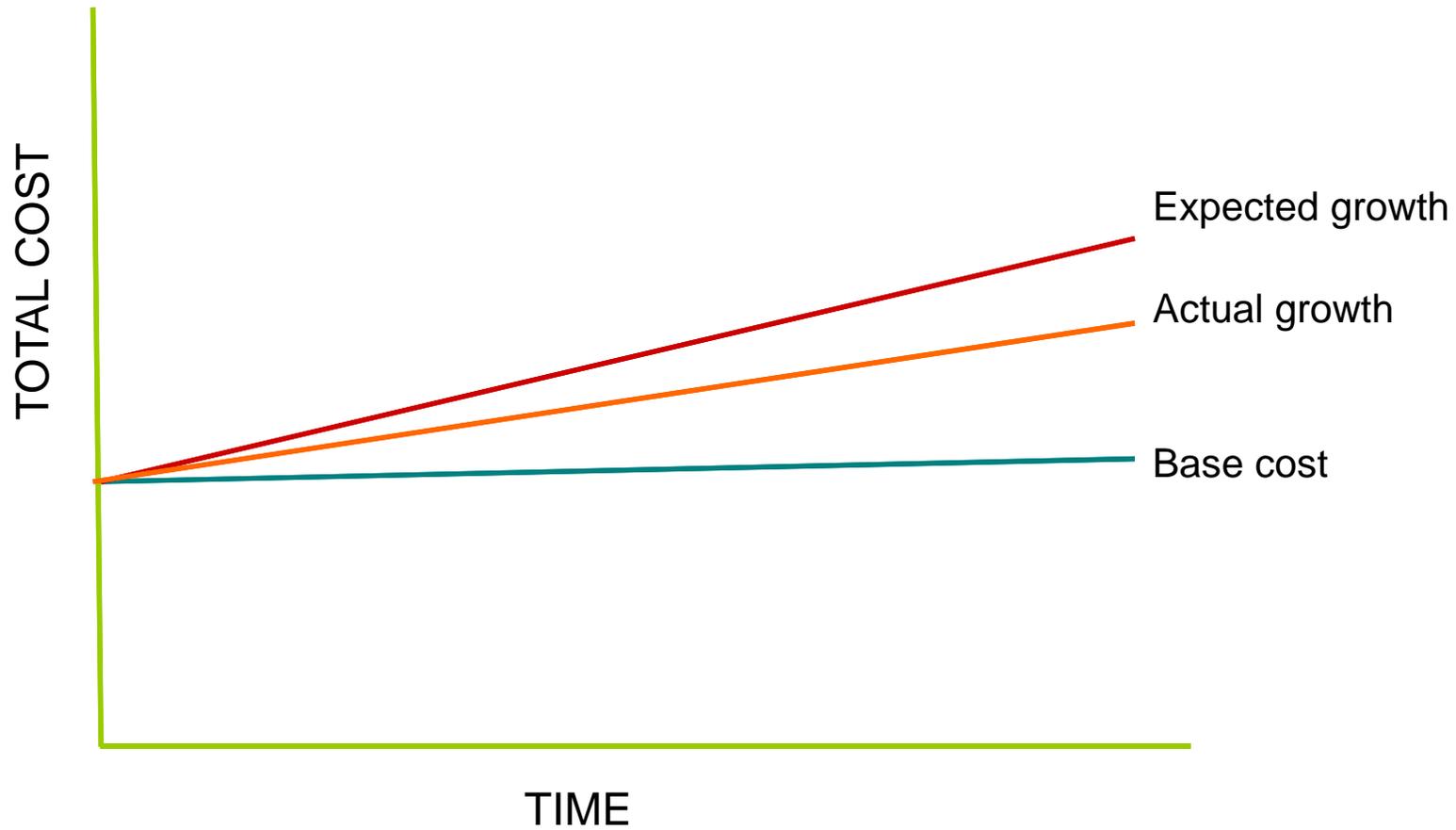
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- Medicaid and commercial Shared Savings ACO Programs Launched
  - Attributing Providers: ~427-500\*
  - Beneficiaries: 153,878\*
- Blueprint for Health (P4P)
  - Attributing Providers: 638\*
  - Beneficiaries: 274,558\*
- Episode of Care Planning

\*all numbers include Medicare, Medicaid and commercial programs

# Savings are dollars not spent

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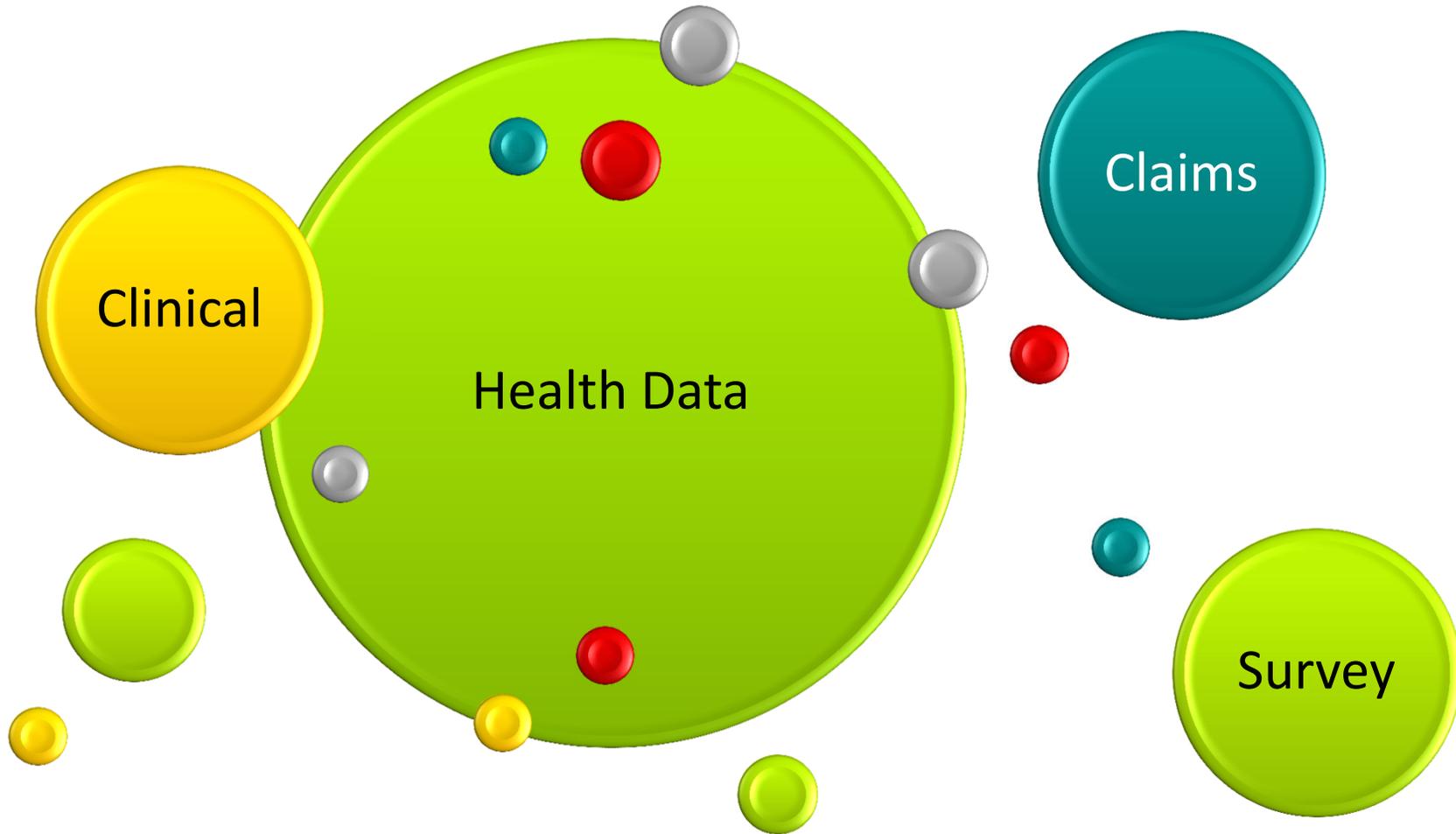
## Coming up in 2015

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- Year 2 of the Shared Savings Program
- Episode of Care Design
- Blueprint for Health program changes
- Health Home – new opportunities
- Population-Based Payment Design
  - ACO providers
  - Non-ACO providers
- Accountable Health Community exploration
  - NVRH, Brattleboro, NMC

# HIE/HIT Infrastructure

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# Progress in 2014

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- Electronic Medical Record Installation and Interoperability
  - Providers connected with at least one interface to the VHIE: 177
- Event Notification System: testing
- ACO Gateways: 1 built
- Data Quality Initiatives:
  - Designated Agencies; ACOs; Blueprint
- Uniform Transfer Protocol- supports transitions
- DLTSS Data Analysis-electronic reporting capability
- **Providers Impacted by 2014 investments: 399**

# Coming up in 2015

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- HIT Strategic Plan
- ACO Gateways: Finish build
- Data Warehousing: Begin build
- Data Quality Initiatives Continue
- Uniform Transfer Protocol and DLTSS Data Analysis next steps
- Continue expanding provider connectivity to the VHIE
- Event Notification System: Test and Launch

# Delivery System

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- Build on the Blueprint for Health foundation
- Integrate care management efforts across payers and providers
- Address gaps in care management/care coordination

# Progress in 2014

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- Landscape analysis
- Learning Collaboratives soft-launch:
  - Providers: 58
  - Vermonters: TBD
- Sub-Grant Program: Delivery System Focus
  - Providers: 692
  - Vermonters: 281,808
- ACO/Blueprint Alignment begins

# Coming up in 2015

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- Learning Collaboratives:
  - Providers: over 100
  - Vermonters: TBD
- Sub-Grant Program: Delivery System Focus
- Further alignment towards unified or aligned system of care management

# Questions?

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