

Vermont DE Demonstration Draft Implementation Plan

ACTIVITIES / MILESTONES	KEY STAFF Proj. Director & ...	TIMELINE No later than...
<i>ORGANIZATIONAL CAPACITY AND MANAGEMENT PLAN</i>		
Routine meetings of DE Demonstration Steering Committee	AHS & DVHA leadership, Consultants	On-going
Finalize MOU with CMS	AHS, DVHA	Jul 15, 2013
Cooperative Agreement Funding Award Notice	CMS	Aug 15, 2013
Cooperative Agreement Funding Begins	CMS, AHS	Sep 1, 2013
Submit Updated Implementation Plan for the approved activities in Cooperative Agreement	AHS, Consultants	Sep 6, 2013
Determine specific tools, data elements and definitions for documenting program outcomes	CMS, AHS	Dec, 2013
Retain / Hire key project staff and consultants <ul style="list-style-type: none"> • Obtain VT legislative authority • Recruit and hire new positions • New positions start • Retain / establish contracts with consultants 	AHS Secretary, DVHA Commissioner	Jun 2013 Jul-Aug, 2013 Sep 2013 Jun-Aug 2013
Continue DE Demonstration Stakeholder meetings	AHS, DVHA	Monthly
Establish DE Consumer Advisory Committee	AHS, DVHA, DAIL, DMH	Sep 2013 and on-going
Develop Readiness Review Tool	CMS, AHS, Consultants	Aug-Nov, 2013
CMS and State readiness review / final preparations <ul style="list-style-type: none"> • Review of state, and DVHA capacity and state oversight and monitoring capabilities • Test all operational systems 	CMS, AHS/DVHA leadership & DE staff; DVHA Medicaid and DE Medicare Compliance Directors	Nov-Dec, 2013

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Three-way contract documents finalized between CMS, State and MCE	CMS, AHS Secretary, DVHA Commissioner	Nov 2013-Jan 2014
Sign three-way contract between CMS, AHS and DVHA <ul style="list-style-type: none"> • Contingent on satisfying readiness requirement • Ensure all required waivers and/or state plan amendments are in place • Ensure all required legislative and budget authority is in place 	CMS, AHS Secretary, DVHA Commissioner	Feb 2014
Demonstration begins	CMS, AHS, DVHA	Sep 1, 2014
Actively work with the Cooperative Agreement Awarding Officer, operations support contractor and evaluation contractor	AHS, DVHA	On-going
Assure DVHA operations comply with Medicare, Medicaid and DE Demonstration requirements	DVHA Compliance Directors	On-going
Maintain HPMS Contact List	DVHA Compliance Directors	On-going
Provide formal semi-annual progress reports and on-going ad hoc status reports to CMS	AHS & DVHA DE-related staff	On-going
Comply with OMB A-133 Audit requirements	AHS & DVHA DE fiscal & operations staff	Annually
<i>SELECTION AND SUPPORT OF INTEGRATED CARE PROVIDERS (ICPs / ICPs-Plus) AND PROVIDER NETWORK MANAGEMENT</i>		
Identify reimbursement methodologies for ICP / ICP-Plus contracts, including: <ul style="list-style-type: none"> • Enhanced Care Coordination payments • ICP-Plus bundled payments for services • Performance incentives and shared savings 	DVHA DE Payment Reform Specialists, Consultants, with provider input	Apr-Sep, 2013

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Issue Request for Proposals (RFP) for ICPs / ICPs-Plus • Include Provider Infrastructure Grant application	DVHA Commissioner	Oct 1, 2013
Responses to ICP / ICP-Plus RFP due to State	Interested Organizations	Dec 1, 2013
Review responses to ICP / ICP-Plus RFP and select entities with which to pursue contractual agreements	DVHA, DAIL & DMH Leadership	Dec 2013
Finalize ICP / ICP-Plus contracts	DVHA Commissioner, DE Provider Relations / Contracting staff	Jan–Feb 2014
Establish provider payment rates for ICPs and ICPs-Plus	DVHA DE Payment Reform Specialists, Consultants	Oct 2013-Feb 2014
Establish payment methodology and rates for non-ICP-Plus providers, including shared savings • Publish rates for public input	DVHA DE Payment Reform Specialists, Consultants	Sep 2013-Feb 2014
Update Provider Handbook to incorporate DE provider requirements	DE Provider Relations / Contracting staff	May-Jul 2014
On-going oversight and support for all provider contracts and business requirements	DE Provider Relations / Contracting staff	Sep 2014-on-going
<i>DEVELOPMENT AND SUPPORT OF ASSESSMENT & CARE MANAGEMENT PROCESSES</i>		
Finalize format for the Comprehensive Care Plan	VCCI and provider care coordination staff, Consultants	Sep, 2013
Develop Policies and Procedures for Needs Assessment, Care Planning, Care Coordination & Self-Management, including expected staffing ratios	DVHA and provider clinical staff, Consultants	Sep-Nov, 2013
Develop infrastructure for utilization of Clinical Registry / Care Management Tool	AHS DE Senior Planners, Clinical Registry vendor	Sep 2013-Jul 2014

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<ul style="list-style-type: none"> • Design data dictionary and processes to routinely transfer data from provider systems and Needs Assessment tools to Clinical Registry • Upload enrollee historical data • Develop user access • Develop custom reports • Develop Care Coordination System Manual for ECCs, ICTs and other providers 		
<p>Develop infrastructure for the DE Needs Assessment tools & connection to Clinical Registry</p> <ul style="list-style-type: none"> • Map, design, and implement exports electronic interfaces to enable data transfers between the Needs Assessment tools and Clinical Registry • Distribute incenses/develop user profiles/support laptop installations • Provide end user instructions, training, and technical assistance 	AHS DE Senior Planners, Clinical Registry vendor	<p>Dec 2013-Jun 2014</p> <p>Jul-Aug, 2014</p> <p>Jul-Aug, 2014</p>
<p>Develop and implement risk stratification methodology to determine Needs Assessment priority and to support provider assignment of Enhanced Care Coordinators</p>	DVHA DE Data Analysts, risk stratification vendor (TBD)	Jan 2014-on-going
<p>Develop triage protocols between various care coordination entities (BP CHTs, VCCI, SASH and ICPs and ICP-Plus)</p>	Consultants, VCCI staff, provider care coordination staff	Jan–May, 2014
<i>DEVELOPMENT AND IMPLEMENTATION OF MODEL OF CARE TRAINING</i>		
<p>Development Model of Care Training Plan</p> <ul style="list-style-type: none"> • For DVHA, other AHS/Department staff, Providers, ECCs & Interdisciplinary Care Teams • Includes cultural competency, critical incident and fraud & abuse reporting, HIPAA compliance, ADA 	DE Training Coordinator	Sep-Dec 2013

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Develop Model of Care Training Curricula	DE Training Coordinator, Consultants	Jan 2014–on-going
Develop electronic training and document system <ul style="list-style-type: none"> • Issue RFP • Select vendor • Design and finalize product 	DE Training Coordinator, Contracted Vendor	Nov 2013-May 2014
Implement Initial Model of Care Trainings	DE Training Coordinator, Consultants	Jun 2014 – on-going
Conduct Annual MOC Trainings and ad hoc trainings as needed	DE Training Coordinator, Consultants	On-going
Monitor participation and evaluate trainings	DE Training Coordinator	On-going
<i>ESTABLISH GRIEVANCE AND APPEALS PROCESS</i>		
Develop Policies and Procedures for Enrollee Rights, Grievances and Appeals	AHS DE Policy Analyst, Consultants, with stakeholder input	Sep-Nov, 2013
Develop Policies and Procedures for Part D Grievances and Appeals	DE Pharmacy HPA	Sept-Nov, 2013
Formalize Demonstration grievance and appeals processes <ul style="list-style-type: none"> • Formal Rulemaking (6 months) • Assure Notices for eligibility and coverage changes and denials meet CMS requirements 	AHS DE Policy Analyst	Begin process on Dec 1, 2013
Establish external appeal fair hearing processes	AHS DE Policy Analyst	Begin process on Dec 1, 2013
Develop Tracking System for grievances & appeals	DVHA DE G&A staff	Jun-Aug, 2014

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<i>ESTABLISH DE PROCESSES FOR UM, QI AND CLINICAL OPERATIONS</i>		
Develop Policies and Procedures for DE Demonstration Utilization Management (across Medicare and Medicaid) <ul style="list-style-type: none"> Includes Out-of Network Service Authorization; Practice Guidelines; Coverage Determinations; and Identification, Reporting and Non-payment of Provider Preventable Conditions 	DVHA DE Manager for Clinical Operations, DE Medical Director	Sep-Dec, 2013
Develop Policies and Procedures for DE Demonstration Quality Improvement	AHS QI Manager, DVHA QI Manager, DE Medical Director	Sep-Dec, 2013
Establish and implement quality improvement activities (see Evaluation and Reporting section for details)	AHS QI Manager, DVHA QI Manager, DE Medical Director	Jan 2014-on-going
Establish and implement clinical operations unit policies and procedures for DE Demonstration	DVHA DE Manager for Clinical Operations, DE Medical Director	Mar 2014-on-going
Incorporate DE Demonstration elements into DVHA Program Integrity Plan and activities	DVHA Program Integrity Director	Jun 2014-on-going
<i>DEVELOP AND IMPLEMENT PHARMACY PROGRAM</i>		
Ensure MMP benefit program meets CMS drug coverage and MA-PD plan requirements <ul style="list-style-type: none"> Develop and monitor utilization, quality, and cost reporting and develop corrective action plans to address clinical, operational, and/or quality issues 	DVHA Pharmacy Director, DE Pharmacist	Sep 2013-on-going
Work with IT, PBM and others to develop the DE Demonstration pharmacy benefit from Parts B, D & Medicaid into a unified benefit <ul style="list-style-type: none"> Oversee development & implementation timelines, benefit design, eligibility, plan and drug coding, quality testing, and other operational processes Update Pharmacy Handbook 	DVHA Pharmacy Director, DE Pharmacist	Sep 2013-Aug 2014

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Revise the DVHA Pharmacy Benefit Management (PBM) contract to support the Part D services for the State's DE population	DVHA Pharmacy Director, DE Pharmacist	Sep 2013-Feb 2014
Establish integration of Medication Therapy Management Program (MTMP) <ul style="list-style-type: none"> • Develop protocols to assure integration of the MTMP within the Model of Care • Develop data-driven mechanisms to identify targeted beneficiaries, assure appropriate medication use, & reduce risk of adverse events • Provide ongoing quality, utilization, cost, and outcomes monitoring and management of MTMP and integration with Model of Care 	DE Pharmacist, DE Pharmacy Health Programs Administrator (HPA)	Sep 2013-Aug 2014 Sep 2014 – on-going
Oversee retrospective drug utilization review program and coordinate/align with Medicaid retrospective DUR initiatives	DVHA DE Pharmacist	Mar 2014 – on-going
Design quality improvement initiatives and monitor outcomes	DVHA DE Pharmacist	Mar 2014 – on-going
Develop protocols to integrate Part D and Medicaid appeals processes <ul style="list-style-type: none"> • Work with Policy Unit, Chief Medical Officer, and Medical Director to assure that CMS requirements are met • Monitor turnaround times and other critical quality and compliance indicators • Provide clinical support of appeals process 	DE Pharmacy HPA DVHA DE Pharmacist	Sep 2013 – on-going
Implement Program <ul style="list-style-type: none"> • Ensure on-going operational integration with MOC • Monitor utilization, financial, operational and quality reporting requirements related to PBM support of the MMP 	DVHA Pharmacy Director, DE Pharmacist, DE Pharmacy HPA	Sep 2014 – on-going

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<ul style="list-style-type: none"> Oversee MTMP and resolve operational issues as identified Support MMP providers, and ensure problems are resolved in timely manner 		
<i>DEVELOP INFORMATION TECHNOLOGY COMPONENTS</i>		
<p>IT/Systems adaptations for eligibility determination, enrollment, claims processing, encounter reporting</p> <ul style="list-style-type: none"> Update eligibility and enrollment system logic for Demonstration and opt-out beneficiaries Modify MMIS <ul style="list-style-type: none"> For encounter data specs To accept new ICP-Plus payments To process Medicare claims Update specifications /interfaces to exchange data with CMS and providers 	<p>AHS DCF, AHS IT</p> <p>DVHA MMIS contractor AHS and DVHA DE Financial Analysts</p>	<p>Jan–Jun 2014</p>
<p>Develop the Health Information Exchange connectivity to enable providers to access integrated care plan information on-line</p> <ul style="list-style-type: none"> Develop provider systems’ interfaces, file set-up 	<p>Vermont Information Technology Leaders (VITL), Blueprint</p>	<p>Sep 2013–Jun 2014</p>
<p>Test IT process for auto assignment of eligible beneficiaries into the DE Demonstration.</p>	<p>AHS IT AHS DCF Member Enrollment DVHA MMIS</p>	<p>Jun 2014</p>
<i>MARKETING AND OUTREACH</i>		
<p>Develop Member outreach/marketing and enrollment support materials</p> <ul style="list-style-type: none"> Work with beneficiary representatives to ensure materials are accessible for all beneficiaries 	<p>DVHA Member Relations, Call Center vendor, Marketing & Outreach contractor, with stakeholder input</p>	<p>Jan–Mar, 2014</p>
<p>Vermont Marketing and Outreach begins</p> <ul style="list-style-type: none"> Beneficiary notification of Demonstration and information about opt-out procedures 	<p>DVHA Member Relations, Call Center vendor, Healthcare and LTC Ombudsman, others</p>	<p>Apr–May, 2014</p>

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Medicare roll-out of Medicare plan options <ul style="list-style-type: none"> Includes VT DE Demonstration info 	CMS	Mid-Sep– early Oct, 2014
<i>ENROLLMENT AND ON-GOING MEMBER SUPPORT</i>		
Develop Policies and Procedures for Enrollment / Disenrollment	AHS DCF Member Enrollment, DVHA DE COB staff	Sep-Nov, 2013
Develop Policies and Procedures for PCP and ICP/ICP-Plus Selection and Assignment	DVHA Member Relations	Sep-Nov, 2013
Develop Policies and Procedures for Member Call Center	DVHA Member Relations	Sep-Nov, 2013
Develop design for DVHA DE Demonstration web-site for enrollees and providers	DVHA Member Relations	Sep-Nov, 2013
Develop Notices for eligibility, coverage changes and denials	AHS DCF Member Enrollment, with consumer input	May-July, 2014
Develop DE Demonstration Enrollee Handbook	DVHA Member Relations	Mar-May 2014
Implement DE training for Call Center staff	Call Center vendor	May 2014
Activate DVHA DE Web-site and Member Call Center	DVHA Member Relations	Jun 2014
Initial passive enrollment notice sent to dual eligible beneficiaries	AHS DCF Member Enrollment	Jun-Jul 1, 2014
Passive enrollment reminder notice sent to dual eligible beneficiaries	AHS DCF Member Enrollment	Jul-Aug 1, 2014
VT DE Demonstration beneficiary selection of PCP and ICP / ICP-Plus	Enrollees, Member Call Center, Health Care & LTC Ombudsman, others	Jun-Sep 1, 2014 & on-ongoing
Begin auto enrollment of eligible beneficiaries into DE Demonstration (9/1/14 effective date)	AHS DCF Member Enrollment	Jul 1- Aug, 2014
Member enrollment in DE Demonstration is effective	AHS DCF Member Enrollment	Sep 1, 2014

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Annual CMS Coordinated Election period <ul style="list-style-type: none"> • Vermont beneficiaries may choose to opt-out of the Demonstration 	CMS	Oct 15-Dec 7, 2104; monthly opt-in/out
Monthly tracking, systems updates of beneficiaries who opt in or out of Demonstration	DVHA DE COB Specialist	Monthly
<i>EVALUATION AND REPORTING</i>		
Continue analyses of integrated Medicare – Medicaid data to inform areas for targeted intervention to improve quality of care, costs	DVHA DE Data Analysts	Sep 2013 – on-going
Determine the specific tools, data elements and definitions for CMS evaluation	CMS, AHS	Dec, 2013
Develop state-specific provider performance and outcome measures	AHS QI Specialist, AHS and DVHA DE Data Analysts, Consultants	Sep-Dec, 2013
Augment existing consumer surveys to focus on DE Demonstration elements	AHS QI Specialist, AHS and DVHA DE Data Analysts, Consultants	Jan-Jun, 2014
Develop operational capacity to implement state & provider performance / outcome metrics <ul style="list-style-type: none"> • Develop mechanisms for capturing data • Develop new analytic views/reports 	AHS QI Specialist, AHS & DVHA DE Data Analysts, Consultants	Jan-Jun 1, 2014
Implement state infrastructure to collect, monitor and report new required data elements	Same as above	Sep, 2014
Participate in CMS Evaluation activities, including site visits	AHS, DVHA, providers	Sep 2014 - on-going
Establish requirements for Vermont financial reporting to CMS <ul style="list-style-type: none"> • Identify population / sub-population categories • Identify types / levels of service data for Medicaid and Medicare 	CMS, AHS CFO, AHS & DVHA DE Financial Analysts, Consultants	Sep 2013 - June 2014