



CENTER FOR IMPROVING VALUE IN HEALTH CARE

**Board
Minutes**

December 9, 2010

3:00 – 5:00 p.m.

The Colorado Health Foundation – Board Room

501 S. Cherry St., Suite 1100

Denver, CO 80246

ATTENDEES	<p>Board (in person): Phyllis Albritton, Peg Brown, Kelly Dunkin, Mark Levine, Lisa Miller, Annette Quintana, Barbara Ryan, Kelly Stahlman, Steven Summer, Jay Want (chair)</p> <p>Board (by phone): Marian Heesaker, Mike Huotari, Jean Scholz, Dick Thompson, Karen Zink</p> <p>CIVHC Staff: PK, JN and JD</p> <p>Guests: Amy Downs and Alison Summerton</p> <p>Public: Ksevia Draaghtel, Laurel Petralia, Vatsala Pathy, Crystal Berumen, Arja Adair, Chet Seward, Andy Fine, Jill VanDenBos</p>
ABSENT	Joscelyn Gay, Donna Marshall, Paul Melinkovich, Jean Scholz, Beth Soberg,
RECORDER	Janie Dunckley

AGENDA ITEM	Welcome and Executive Director Updates
DISCUSSION	<p>Phil Kalin gave a brief review of the Executive Directors report. Major bullets below.</p> <p>Grants:</p> <ol style="list-style-type: none"> 1. APPROVED!- The Colorado Health Foundation- General Operating- \$4.9M (three years) <ol style="list-style-type: none"> a. Kicks off no later than January 1- agreement needs to be finalized b. Contingencies (e.g. obtain additional outside funding by years 2 and 3, transition from State of Colorado so CEO reports directly to Board plus salary oversight by board, use of \$900K for Advisory group projects, financial mgmt, use of fiscal intermediary) c. Anne Warhover will speak about grant at upcoming board meeting 2. RWJ Grant submission on 12/13- Consumer Engagement - Health Risk Appraisal focus <p>Advisory Groups:</p> <ol style="list-style-type: none"> 1. APCD <ol style="list-style-type: none"> a. Multiple committees continue to progress very well b. Interim recommendations planned for CIVHC board meeting in January and final report in February c. RFI's for technical solutions will be released in late December d. Financial requirements by 3rd week in January so grant funding requests are timely e. Draft rules to HCPF by early January

	<ol style="list-style-type: none"> 2. Data Group- Recommendations to be reviewed at meeting (below) 3. Payment- Presentation; Jan 6 Planning Meeting with Delivery 4. Delivery System- Launch of Re-admission Task Force on Dec 13th (David Kaye and George DelGrosso co-chairs) <p>CIVHC Organization:</p> <ol style="list-style-type: none"> 1. Nominating Committee interviews, recommendations, next step is Vice Chair nomination 2. Website –Go live in December 3. Game plan for CIVHC+ going live in in January/February; interim relationship in discussion with CO Non-profit Development Corp. (fiscal policy, accounting etc) <p>Discussions with Professional Employment Orgs for salary/benefit management; Will start recruiting staff and looking for space</p>	
ACTION	PERSON RESPONSIBLE	DUE DATE
N/A		

AGENDA ITEM	Board nominations	
DISCUSSION	<p>Barbara Ryan briefly reviewed the work of the Nominating Committee over the last month. They met once and then interviewed two potential board members, Greg D’Argonne and Jay Brooke. The committee thought highly of both candidates and offer them as recommendations for the Governor to appoint to the CIVHC Board.</p> <p>Motion to recommend Greg D’Argonne and Jay Brooke to the Governor as CIVHC Board Members was passed.</p> <p>The nominating committee also recommended that Phyllis Albritton, Annette Kowal, Donna Marshall and Barbara Yondorf be recommended to the Governor as voting members of the CIVHC board. The motion passed.</p>	
ACTION	PERSON RESPONSIBLE	DUE DATE
Submit recommendations & applications to Governor’s Office of Boards and Commissions.	CIVHC Staff	ASAP

AGENDA ITEM	Data & Transparency Advisory Group Metric Recommendations
DISCUSSION	<p>Lalit Bajaj & Phyllis Albritton, co-chairs of the Data & Transparency Advisory Group, gave a brief introduction of the group about the process they used to recommend the 13 top level metrics that are designed to measure progress towards CIVHC’s long term goals. CIVHC utilized CHI as consultants to the project and they were represented in the presentation by Amy Downs, CHI’s Director of Policy and Research.</p> <p>Phil Kalin reminded the board of the commitment and need to pick measures that can be used to engage Coloradans in conversations about the overall system changes that will be required to achieve better health, health care and lower costs.</p>

These are designed to be utilized as a dashboard to measure CIVHC's and Colorado's progress in our work.

The 13 metrics are considered "tier 1" metrics. There are others that will be addressed, but those are in lower tiers right now. It was also pointed out that these metrics will be fluid overtime. In the future CIVHC will need to figure out how to make metrics applicable to consumers and to help the change behaviors.

Metrics

(See presentation and appendix for more information including metric source)

Bending the cost curve

- Annual percent change in per capita expenditures for health services
- Utilization of health care services per 100,000 population (i.e. could focus on imaging, ED and inpatient hospital)
- Annual change in health insurance premiums is commensurate with consumer price inflation (CPI)
- Health care spending in Colorado relative to gross state product (GSP)
- Days spent in hospital/decendent and associated to expenditures during the last six months of life
- Percentage of health care expenditures associated with outcomes-based models of payment

Improved population health

- Percentage of Colorado population ages 0-64 who have any type of health insurance coverage
- Percentage of adults who report they needed to see a doctor within the last 12 months but could not because of cost.
- Percentage of adults and children who are obese.
- Percentage of physician practices with electronic medical records/linked with health information exchange.

Consumer-centered experience

- Consumers' average rating of health care over past 12 months (scale of 1-10)
- Consumers' assessment of whether or not doctor or other health provider asked which choice of treatment option they thought was best for them.
- Percentage of Coloradans with advanced directives.

Increased transparency (no specific metrics)

- Advisory group reviewed websites and communication products that provided information that was accessible
- Group determined that transparency is a tool and not something quantifiable
- Transparency and accessibility will be utilized and embedded in all of CIVHC's work and regularly monitored
- CIVHC board will stay apprised of ways in which projects and information are provided in accessible and transparent formats

	The board gave general approval to the overall direction of the metrics and the work of the Data & Transparency Advisory Group.	
ACTION	PERSON RESPONSIBLE	DUE DATE
Develop process for gathering baseline measures, plans for integrating into “dashboard”	Data and Advisory Committee	March, ‘11

AGENDA ITEM	Payment reform Advisory Group Update	
DISCUSSION	<p>Dr. Mark Laitos and Len Dryer, co-chairs of the Payment Reform Advisory Group, briefly introduced themselves and then gave a short introduction to the history and transition of the Payment Reform Advisory Group (PRAG). As they moved through their presentation, they covered the purpose and objectives of the PRAG and all of the accomplishments to date. Accomplishments included:</p> <p>Formed</p> <ul style="list-style-type: none"> • Regularly convened a diverse group of stakeholders • Established a consensus on Payment Reform Principles <p>Planned</p> <ul style="list-style-type: none"> • Developed work plan <p>Informed</p> <ul style="list-style-type: none"> • Inventoried major payment reform methods and initiatives nationally and in Colorado • Identified federal funding opportunities • Established monthly sessions to dialogue with innovative program leaders <p>Engaged</p> <ul style="list-style-type: none"> • Designed Stakeholder Listening Tour to understand perspectives of differing constituencies <p>Collaborated</p> <ul style="list-style-type: none"> • With Delivery System Advisory Group for stakeholder tour, educational sessions and strategic planning <p>Initiated</p> <ul style="list-style-type: none"> • A joint strategy meeting with Delivery System Advisory Group (to be held January 6 and facilitated by national health leader, Harold Miller) <p>The presentation concluded with “Work in 2011 and Beyond”</p> <ul style="list-style-type: none"> • Driven by joint strategy meeting work • Continued collaboration and integration with Delivery System Reform Advisory Group • Digest and apply Stakeholder Listening Tour learnings • Address potential access to APCD for metrics tracking • Support ongoing pilots and initiatives (Medical Homes, ACC, Prometheus, etc) • Pursue national initiatives and develop integration plan with statewide initiatives • Build support and consensus for payment changes • Develop strategies to remove barriers to change or support innovation (legislation, rule-making, board leverage) 	
ACTION	PERSON RESPONSIBLE	DUE

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Delivery System Redesign Advisory Group
Minutes

		DATE
Add public health as a stakeholder at forum	Janie Dunckley	01/2011
Change language around rate setting	Staff	01/2011

AGENDA ITEM	Public Comment	
DISCUSSION	Arja Adair: At the recent IHI Annual Meeting, it was discussed the Justice Department and the Federal Trade Commission are not on the same level or mindset regarding ACA. This is something for the all advisory groups and the board to keep in mind when developing initiatives.	
ACTION	PERSON RESPONSIBLE	DUE DATE
N/A		