

SustiNet Health Partnership

Medical Home Advisory Committee

Co-Chairs

Ellen Andrews
Tory Westbrook

Board of Directors Liaison

Bruce Gould
Joseph McDonagh



Phone:

866.466.4446

Facsimile

860.297.3992

E-Mail

SustiNet@CT.Gov

Post Office Box 1543
Hartford, CT 06144-1543
www.ct.gov/SustiNet

Patient Centered Medical Home Committee Meeting by Webinar

February 23, 2010

Meeting Minutes

Webinar Participants: *Ellen Andrews, Co-chair; Tory Westbrook, Co-chair; Jody Terranova; Dean Sperry; Kimberly Haddad; Maureen Smith; Ken Lalime; Richard Duenas; Drew Morten; Bruce Gould; Jennifer Jaff; Judith Meyers; Laurie Cancialosi; Amy Casavina Hall; Scott Wolf; Mary Whittaker; Lisa Cannella; Joanna Douglass*

Ellen Andrews opened the webinar by welcoming all participants. Today's presentation features Jim Hester of Vermont's Health Care Reform Commission and Ann Torregrossa of the Pennsylvania Governor's Office of Health Care Reform, speaking on health care reform with a focus on patient centered medical homes in VT and PA.

To access Jim Hester's presentation, [click here](#).

Ellen opened up the floor for questions, asking Jim how his organization chose communities for piloting this program. Jim said that they conducted an assessment of primary care providers, created an application and held a competition. Ellen asked who keeps the database for evaluation and coordination. Jim said that key data is in a statewide HIE that is administered by the state agency that administers health insurance plans. Ellen asked if the fee for the community care teams is in addition to the fees the practice receives per member per month, and Jim said that there are two different sources for payment. Each payor pays the practice its management fee and then each payor is assessed an allocation of community health team costs. Between these two payments, the maximum fee for care management is \$2.50 per member per month, and the maximum fee for the community health team is \$1.50 per member per month, so the total maximum fee is \$4.00. Ellen wanted to know how much it costs VT to cover Medicare patients, and Jim said it costs about a million dollars per year.

Tory Westbrook asked if there was resistance to the .2% surcharge that funds the VITL system. Jim said that it was a small enough charge that it was not resisted. Ken Lalime

SustiNet Health Partnership

asked who paid for the DocSite product and the interfaces for the multiple systems, and how the incentive was determined. Jim said that the incentive was negotiated between Blueprint leadership and the payors. DocSite was funded by Blueprint as part of the initial budget. The connections to DocSite are being built out as part of the exchange, so VITL is providing support for this. Judith Meyers asked if Jim would further describe the ACO National Learning Collaborative Network. Jim said that Brookings and Dartmouth are sponsoring this. There is a small Learning Collaborative Network of 3 - 4 sites that is implementing ACO (inaudible). There is also a Learning Network that has a larger number of sites, 35 – 40, that participate in monthly seminars, thus learning from each other in preparing to become ACOs.

To access Ann Torregrossa's presentation, [click here](#).

Ellen opened up the discussion with Ann by asking if everyone receives the shared savings payments. Ann said that everyone does, and that it varies by regional area. She said that she would send a chart showing the various distributions. There is a payment of \$1.50 per month per member, and in the fourth month there is an additional \$1.50 per month per member to be used for care management resources. After eighteen months, they are eligible for shared savings if they meet required performance criteria.

Ellen asked Ann how her organization decided where to begin with this program. Ann said they contacted primary care associations and the Medical Society to make them aware of this opportunity. There was an application process and an assessment was made. 30 - 50 practices were chosen to be in the Learning Collaborative. The Collaborative has worked very well in engaging practices over the long haul on a difficult transformation. The practices are learning much from each other and competitiveness has dropped considerably. Ann spoke very positively about this program.

Jennifer Jaff asked what the role of the patient is in care management and what feedback has been received. Ann replied that there was a baseline done with patients and a control group to rate patient satisfaction with access, quality, etc. She said that the patient's role is to be the center of the care team. She said that an interesting part of this is helping patients take control of certain elements that affect their health. Parts of the team work with patients to identify goals that they are willing to work towards. Group visits are held that act as support groups for patients with specific goals, and they receive information about community resources.

Meeting was adjourned.

Next meeting will be held on 2/24/10 by webinar.