



Summary Minutes of Board of Directors Meeting November 14th 2:00pm ET

ATTENDEES

Board Members

- Matt Swanson
- Jan Lee
- Tom Brown
- Rita Landgraf
- Lolita Lopez
- Alan Greenglass
- Nicholas Moriello
- Stephen Kushner
- Gary Siegelman
- Kathy Janvier
- Faith Rentz
- Julane Armbrister-Miller
- Cindy Bo (phone)
- Janice Nevin (phone)
- Kara Odom Walker (phone)

Agenda

- Call to Order
- Board Business
- Discussion: DCHI 2019 Strategic Planning Process
- DCHI Initiatives Update & Discussion
- Public Comment
- Executive Session

Resolutions

- Approved October meeting minutes.

- Approved the By Law change requested by the 2019 Nominating Committee. The By Laws are effectively changed to reflect one of the two designated seats assigned to “One Practicing Physician” is now titled “One Practicing Physician or Advanced Practice Provider”.

Summary of Discussion

Board Business

- October Board minutes were reviewed. The Board unanimously approved the October meeting minutes.
- Cindy Bo provided an update on the 2019 Nominating Committee Progress and considerations. An overview of the current status of board openings was provided, noting 2 at-large seats as well as one practicing physician and one member involved in purchasing health care coverage for employees. The committee’s current recommendations for the board’s preliminary consideration are as follows:
 - Emmilyn Lawson
 - Recommendation for an at-large seat with a focus on payer representation.
 - Emmilyn is the Market President of AmeriHealth Caritas Delaware. She has 20 years of experience in Medicaid Managed Care. She is a member of the DCHI Payment Work Group.
 - Andrew Wilson
 - Recommendation for the second at-large seat with a focus on policy/government representation.
 - Andrew is an Attorney at Morris James LLP. He works as an associate and a Legislative Specialist in Morris James’ Health Care Industry and Government Relations Groups. He is experienced in external affairs including policy research and development, advocacy and health care legislative, regulatory and procurement issues.
 - Andrew is affiliated with the Medical Society of Delaware. The board is recommending that Andrew’s experience with government relations and healthcare policy are the focus areas of his contribution to the DCHI board. The Board discussed potential conflicts and concluded that conflicts are

minimal and manageable. Any potential conflict with the Medical Society is reported as cleared.

- E Kent Evans
 - Recommendation for the designated seat open of “Member involved in purchasing health care coverage for employees”.
 - Kent is the Senior Vice President and Practice Leader of Employee Benefits Practice of USI Insurance Services LLC. He has over 25 years of experience as a licensed insurance representative specializing in representation of group benefit clients. Kent is experienced and knowledgeable in debate on national health care issues.
 - His competencies are in the business community. He has ties to the Medical Society of Delaware through USI, the insurance arm for a subsidiary for the Medical Society. USI is however, an independent corporation.

The Nominating Committee proposed a By Laws change request to enable diversification of the Board. Specifically, Cindy Bo described the nominating committee’s barrier to filling one of the two designated slots for a “Practicing Physician Role”. To allow for greater flexible and in acknowledgement of how care delivery is changing, **the board resolved to change the bylaws to reflect that one of the two existing designated board positions for a “One Practicing Physician” be changed to an Advanced Practice Provider”. The proposed change will read: One practicing physician and one Advanced Practice Provider.** The Board can make recommendations for candidates to fill the newly designated slot for an Advanced Practice Provider, pending anticipation of the bylaw change.

The board reviewed the standing Term Renewals/Resignations. Gary Seigelman has agreed to renew his term, pending board vote. Tim Constantine will resign effective December 31, 2018 due to his new position at Highmark and pending relocation. Nick Moriello, who is currently on the board will fill the designated Board slot vacated by Tim Constantine. Nick Moriello has assumed a new professional position at Highmark and will replace Tim on the DCHI board as the representative for one member with expertise in payer administration”

Current Committee Chairpersons and Board officers were nominated to continue for the 2019 term. All current officers of the board, Matthew Swanson as Chair, Tom Brown as Treasurer and Lolita Lopez as Secretary, and current committee chairpersons have agreed to continue in their respective roles, pending board vote.

Discussion Points

- All nominations will be presented to the board for a vote at the December Board Meeting. Meanwhile, board members were encouraged to contact Cindy Bo with any further nominations or concerns about nominations presented at the November meeting.
- Workforce Development was discussed as a potential and hopeful initiative and committee reinstatement in 2019.

Next Steps:

- If Committee Chairpersons intend to propose new members for their committees in 2019, resumes and bios need to be sent to the Nominating Committee. The vote for all committee members, new and standing, will occur in January.
- Any further communications regarding the Nominating Committee's recommendations must be sent to Cindy Bo as soon as possible.

2019 Strategic Priority Identification and Timeline

Matt Swanson led the board in a process-oriented discussion to prepare the board for strategy planning for the 2019 priority area determination. A review of past priorities noted DCHI highlights including last year's focus on repositioning the organization, advancing VBP and payment for behavioral health integration.

The leadership team is planning a 2019 SIM cross committee stakeholder meeting. The purpose of this meeting is to celebrate accomplishments, reflect upon lessons learned from the SIM work, as well as opportunities to continue to advance the work and to receive input from stakeholders on DCHI's strategy going forward. It is important to emphasize the need to continue to push forward health care transformation initiatives.

Discussion Points:

- Feedback was welcomed from board members and it reflected a willingness to partner with DHIN and HCC.
- It was noted that although the SIM grant will be closing, formal reports from SIM activities will not be complete. Instead, DCHI's role in this event should be seen as a promoter of enthusiasm for the overall ecosystem and continuing the momentum that has been created for the SIM initiatives.

Next Steps:

- Confirm logistics and circulate a Save the Date for the 2019 Cross Committee Meeting.

DCHI Initiatives

- Tom Brown gave an update on the **Payment Work Group**.
The work group has identified the Health Care Payment Learning and Action Network Alternative Payment Model as the agreed upon framework. Currently gauging risk and the type of environment the providers and payers are currently in and what kind of risk is needed to project an alternative payment framework.
The committee is working to arrive at a place on the continuum of opportunities towards a report of recommendations and commitment to stakeholder advised goals. The findings would be an evaluation of the landscape and focus on adoption and penetration of VBP to map a trajectory for VBP penetration statewide. The Medicaid MCO contract trajectory is already mapped out. The work group is using this as a reference point. The discussion has moved to commercial markets.
 - Discussion Points:
 - There are many unknowns, determining cost can be challenging.
 - Value Based Payment requires the determination of both quality and cost. Ensuring quality is important and the framework chosen by the workgroup is an existing, nationally replicated model and considerations regarding quality components are “built in”.

- Traci Bolander provided an update on the **Behavioral Health Integration Payment** discussion group and progress. Results from presentations from each of the payers have been assembled in a grid related to the behavioral health reimbursement codes to reflect where there is payment for existing, common practice scenarios, gaps in who is paying, and opportunities to enhance payment for the codes that were identified on the grid. While there is indication of reimbursement occurring across all payers in the largely traditional, co-located model, there is heavy concentration of responses indicting “no reimbursement” for BHI for the levels of integration that are already occurring or being planned. The November BHI meeting will encompass reviewing the investments into payer reform and practice transformation, clearly identifying BHI as a need; the payer community needs to identify its level of commitment to sustaining BHI.
 - Discussion Points:

- Earlier this year, the chamber and the roundtable were hoping to assemble a group to address this, but Board members suggested DCHI may be better suited to house and continue this discussion.
 - This work will potentially fall underneath the Payment Work Group or stand by itself, with recommendations for advancing and sustaining BHI.
 - HMA's intention is to use this information to support their final report for sustainability.

- Alan Greenglass gave an update on the **Clinical Committee**. During the November 13th meeting, the committee approved the proposal to change the format of committee member engagement. The proposed Clinical Committee restructure elements are: a core/steering committee that will meet bi-monthly, consisting of highly engaged, original members. The steering clinical committee group will also facilitate an at-large, ad-hoc group brought together around specific issues 3-4 times per year. The committee wants to tackle issues related to strengthening primary care, such as current fragmentation and administrative burden.
 - Discussion Points:
 - Nancy Bo requested the Clinical Committee and board members consider the importance of ensuring clinicians engagement on the at large committee and t steering committee.
 - Next Steps:
 - The group will reconvene in January to create specific plans to move forward.

- Rita Landgraf provided an update on the **Patient and Consumer Committee** work. The revised charter is completed and approved by the board. The committee continues to meet monthly and is looking forward to submitting recommendations for committee members. The committee wants to focus on including community members on the committee as it is their primary focus. The plans for 2019 will begin and the committee plans to address accountability targets and begin prioritization.
 - Discussion Points:
 - It may make sense after the cross-committee meeting to engage attendance of patient and consumer members on other committees to reflect integration of consumers – not just in public session but an integrated part of the deliberation.

- A more active role on the part of the Patient and Consumer representative has been voiced by all committees.
 - The final meeting of the Primary Care Collaborative is December 12th. PCA participation in the panel would be welcomed.
- Workforce is not an active committee currently, but priority planning reinforced the need to discuss the reengagement of workforce. The board reaffirmed the space for DCHI to reengage in this work. An observation was noted that the broad landscape of workforce include barriers that are heavily legislative. DCHI must determine if there is a potential shift that should be occurring or one where advocacy from DCHI can have a meaningful impact
- Julane Armbrister gave an update on DCHI’s continued efforts to be supportive of the **Healthy Neighborhoods/ Healthy Communities, DE** work. The DCHI committee has not been meeting, but the leadership continues to gauge where there are opportunities for DCHI support and involvement. As a reminder, the DCHI Healthy Neighborhoods Program created the organizing framework for the current local councils. Healthy Communities, DE reports that SIM funding has flowed into the 3 HN communities.
 - Update and Discussion Point on current UD/DPH sustainability model and planning:
 - The Healthy Communities leadership team has created a leadership council to serve as the policy and guiding entity for the sustainability model. There is significant cross over of HN stakeholders that are on the leadership council, with Matt Swanson on the leadership group, representing DCHI.
 - DCHI is in conversation with Healthy Communities on avenues for DCHI support.

Public Comment

- No public comment.

The meeting then adjourned into Executive Session.

Action Items

- N/A

Next Meeting

- December 12th, 2018
- Time: 2:00pm ET
- Location: Del Technology Park, Newark