



Minutes of Board of Directors Meeting January 9th 2:00pm ET

ATTENDEES

Board Members

- Cindy Bo (phone)
- Traci Bolander
- Tom Brown (phone)
- Kent Evans
- Alan Greenglass
- Kathy Janvier
- Stephen Kushner
- Rita Landgraf
- Emmilyn Lawson
- Jan Lee
- Lolita Lopez
- Julane Miller-Armbrister
- Nicholas Moriello
- Faith Rentz
- Gary Siegelman (phone)
- Kara Odom Walker
- Andrew Wilson

Agenda

- Call to Order
- Board Business
- DCHI Board and Stakeholder Open Meeting
- DHSS Presentation: Health Care Spending Benchmarks & Medicaid Buy-In Study Group
- Primary Care Collaborative Report & Primary Care Physicians in Delaware 2018 Survey
- DCHI Current Initiatives Update & Discussion
- Public Comment

- Executive Session

Resolutions

- Approved December meeting minutes with correction to the spelling of Dr. Channin's name.
- Approved the Patient and Consumer Committee member nominations:
 - Charita Jackson-Durosinmi
 - George Meldrum
 - Salvatore Seeley
- Approved the Patient and Consumer Committee member renewals:
 - Emily Coggin Vera
 - Marianne Foard
 - Joann Hasse
 - Brian Olson
 - Ann Phillips
 - Tim Rodden
 - Ronaldo Tello
 - Kirk Dabney
- Approved the Clinical Committee member renewals:
 - David Bercaw
 - Traci Bolander
 - Donna Gunkel
 - Robert Monteleone
 - Joseph Rubacky
 - Sara Slovin
 - Doug Tynan
 - Kathy Willey
 - Megan Williams
- Approved the Payment Work Group member renewals:
 - Steven Constantino
 - Carl Curto
 - Barry Dalhoff
 - Ryan Foreman
 - Donna Goodman
 - Emmilyn Lawson
 - Keith Markowitz
 - Chris Morris
 - Kevin O'Hara
 - Dwayne Parker

- Faith Rentz
- Matthew Swanson
- Alex Sydnor
- Mark Thompson
- Mike Tretina
- Cindy Winnings
- Approved the Financial Report / Status

Summary of Discussion

Board Business

- Lolita Lopez chaired the meeting in Matt Swanson's absence.
- December Board minutes were reviewed. The Board unanimously approved the December meeting minutes with correction to the spelling of Dr. Channin's name.
- New Board members Kent Evans, Emmilyn Lawson, and Andrew Wilson introduced themselves. Each provided a synopsis of their background and why they chose to become members.
- Cindy Bo was delayed in joining the meeting, so the Nominating Committee Report and Vote: Board Committee Members update was postponed until 3:15pm. At that time, Cindy provided an update on the nominations and renewals for DCHI committees.
 - There were three nominations received for the Patient and Consumer Committee.
 - Charita Jackson-Durosinmi has dedicated twenty-five plus years of service working to serve special and at-risk populations; fifteen of those years were spent providing services directly to the Migrant and Seasonal Agricultural Workers and their families. Charita will be representing the migrant population.
 - George Meldrum currently serves as the State President of AARP. George will primarily be representing the AARP and the aging Delaware population.
 - Salvatore Seeley is a clinical social worker specializing in sexual health counseling and therapy. He has spent the past eighteen years creating mental health programs, HIV

prevention programs and capacity building at CAMP Rehoboth, the LGBTQ community center in Rehoboth Beach, Delaware. Salvatore will be representing the LGBTQ community.

- Each nominee was unanimously approved.
- The Committee members up for renewal on the Patient and Consumer Committee, Clinical Committee, and Payment Work Group were reviewed. The board unanimously approved the renewal of each member.

- The Year- End Financial Report / Status was provided by Will Davis, the DCHI Accountant, later in the meeting when he joined the meeting by phone. Hard copies of the financial report were provided. Will reviewed the full report with the Board. He explained that the large differences between the 2017 and 2018 Year- End Statements of Cash Flow were due to increased staffing, increased contracts, higher insurance costs, higher worker's compensation costs, and office space changes.
 - Julane explained that funders are solicited throughout the year and DCHI continues to explore how to expand the funding stream.
 - The Year-End financial report was unanimously approved.

DCHI Board and Stakeholder Open Meeting

Save the Date

DCHI is planning a 2019 Open Board and Stakeholder meeting. Planning for the meeting is co-chaired by Rita and Matt. The meeting will be used as a time to reflect on progress and achievements, and to gather input on future opportunities to advance comprehensive health care reform in DE. The meeting is intended to provide a real opportunity for stakeholder input and feedback on the SIM effort and the needs going forward. The meeting should be inclusive and interactive.

The meeting will be in place of a regularly scheduled board meeting, on the same date (February 13), but with an expanded time (1pm-5pm).

- 56 people currently registered
- Optimal capacity between 100-150 to facilitate the small table discussions
- An email marketing campaign is being implemented to invite DCHI stakeholders, followed by the public

Goals and Logistics

DCHI is working with Concept Systems as Facilitators for the event. The plan is to generate active audience participation through, small groups and intimate discussions. This meeting will be an opportunity to engage stakeholders in strategic planning for DCHI.

Speakers will be local stakeholders and Committee Chairs. Each Committee will have stakeholders pass through in a “carousel” type format. They will be asked to talk about successes and challenges under the SIM grant, and goals/opportunities moving forward. The key message is that while the SIM grant is over, the work is not over. There is still a lot to be done to accomplish the aims. Priorities identified will be considered for addition to the Committee Charters and the strategic areas for focus for DCHI going forward.

In planning for the meeting, it was recommended that the Board consider what the future of innovation and transformation will look like for DCHI and to recognize and be reminded that the DCHI committees’ areas of focus are not silo initiatives but are interdependent.

DHSS Presentation

Health Care Spending Benchmarks

Secretary Walker presented slides documenting the State’s increasing health care costs and projections. She recapped how Governor Carney signed Executive Order 25 into law on November 25th. This EO establishes a Subcommittee of DEFAC for setting the health care spending benchmark for calendar year 2019.

The membership of the Subcommittee includes:

- A Chair and Vice-Chair, both of whom shall be members of DEFAC and have health care expertise. Appointed by the DEFAC Chair.
- 3 existing members of DEFAC appointed by the DEFAC Chair.
- 2 members representing health economists, appointed by the Governor.
- 2 members representing quality improvement experts from 2 health care systems or hospitals, which operate in the state, appointed by the Governor.

In December, that Subcommittee set the benchmark at 3.8%. The benchmark is a target and not intended to be a cap or penalty. For subsequent calendar years, the benchmark will be:

- 2020: 3.5% per capita Potential Gross State Product (PGSP) growth rate

- 2021: 3.25%
- 2022: 3.0%
- 2023: 3.0%

Additionally, Health Care Quality Benchmarks have been set for:

- Adult Obesity
- High School Students Who Were Physically Active
- Opioid Related Overdose Deaths
- Concurrent Use of Opioids and Benzodiazepines
- Tobacco Use
- Emergency Department Utilization Rate
- Persistence of Beta-Blocker Treatment After a Heart Attack – Commercial Insurance
- Persistence of Beta-Blocker Treatment After a Heart Attack – Medicaid
- Statin Therapy for Patients with CVD – Commercial Insurance
- Statin Therapy for Patients with CVD – Medicaid

By Jan. 31, 2019: DHSS Secretary will publish a technical manual with the methodology for the spending and quality benchmarks.

By May 31st of each year: DEFAC will report to the Governor and the Health Care Commission on any changes to the spending benchmark approved by DEFAC.

4th quarter of each year: HCC will report on the performance relative to the spending and quality benchmarks.

Ongoing: HCC will engage providers and community partners in discussion -- with the State and each other -- about how to reduce variation in cost and quality, and to help the State perform well relative to each benchmark.

Discussion Points:

- There was a question regarding how old the data is / will be. Secretary Walker explained that the State will generate its own data in order to have the most up to date information. Expenditure data may have a three to six-month lag, but it shouldn't be years.
- There was a question regarding how DCHI and HCC can partner to move the work forward. Secretary Walker encouraged both groups to work with external partners who are already implanting validated programs to improve health care results, rather than attempting to reinvent the wheel.

- There was a question regarding how to engage patients / consumers in these benchmarks and define their role. DCHI and the HCC should consider how to improve consumer focused marketing around the topic of health care innovation and transformation.

Medicaid Buy-In Study Group

Secretary Walker provided an update on the Medicaid Buy-In Study Group. They have met six times. The recommendation is a reinsurance like option to increase affordability by decreasing premiums. It is dependent on a full actuarial analysis. An option for consideration is initiating an individual level mandate as a state policy. The mandate can be flexible. It does not have to match federal mandate levels. A final report will be presented during legislative session.

Discussion Points:

- It was brought up as a reminder that Medicaid Buy-In was initially used for those with disabilities beyond the required poverty level.
- It was mentioned that the population at hand is still feeling unsettled about where this decision has landed. The Board was encouraged to remember that affordable insurance is not the same as affordable care. The total cost of health care should still be considered.

Next Steps:

- DCHI should formulate how to provide input.

Primary Care Collaborative Report and Primary Care Physicians in Delaware 2018 Survey

- The Primary Care Collaborative Report is in draft form. There was confusion around the opportunity to provide stakeholder responses for inclusion in the draft. This report is not intended to be an end all, be all. The collaborative is not over. There is still interest in dialogue around stakeholders and how their different roles may bring new points of view. The final draft will go to the General Assembly and the Health Care Commission. It will include additional comments from stakeholders in an appendix. The Primary Care Collaborative is looking to hear those comments and have those conversations now.
- The results of the Primary Care Physicians in Delaware 2018 Survey show a severe decline in numbers at the same time health transformation work is seeking to elevate the use of PCPs as first line care. Stakeholders need to continue to analyze strategies for DIMER and DIDER continuation and growth.

Next Steps:

- DCHI needs to formulate how to provide input to the Primary Care Collaborative Report.
- The Patient and Consumer Committee and the Payment Work Group should provide a cohesive set of recommendations to improve the number of practicing PCPs in Delaware.

DCHI Current Initiatives Update and Discussion

- Rita Landgraf gave an update on the **Patient and Consumer Committee**. The Committee finalized membership nominees for full slate to present to the DCHI Board for new and/or renewed memberships for the coming year. The Committee will continue to monitor and address gaps in membership, including representation from millennials. The Committee processed updates from DCHI December Board Meeting and discussed their role and engagement as it pertains to Healthy Communities Delaware population health efforts, being a voice for consumers relative to claims data gaps and analysis (ex. understanding overall health of populations without dental insurance and claims), understanding how recent or planned policy changes might impact patients/consumers, and recognizing the importance and complexity of behavioral health integration. Plans for 2019 include Committee utilization of information provided through the DCHI Strategic Planning process to help inform committee accountability targets and prioritization. The next meeting is February 18th at 10:00 AM in Dover.
- In Tom's absence, Traci Bolander gave an update on the **Payment Work Group**. Speire engagement is completed effective this month. They will deliver a draft report and recommendations to the Payment Work Group to advance their work around VBP. The Work Group will finalize the report, and its use and distribution. The Work Group will hear from DHIN for an update and discussion on the HCCD as an initial step toward addressing data concerns raised during the group's deliberations over the last few months. Traci commended the Payment Work Group for collaboration, tough conversations, and collective commitment to finding answers, determining rules of engagement, etc.

Public Comment

- No public comment.
- The meeting then adjourned into Executive Session.

Next Meeting

- February 13, 2019
- Time: 1:00pm ET – 5:00pm ET
- Location: The Outlook at Duncan Center, Dover