



# Delaware Center for Health Innovation

patient/consumer advisory

## MEETING INFORMATION

- Date: Mar. 18<sup>th</sup>, 2019
- Location: Zoom Web/Conference Call Meeting
- Next Meeting: Apr. 15, 2019; 10:00 AM, Dover (location TBD)

**Attendees:** Charita Jackson- Durisinmi, Alana King, George Meldrum, Julane Armbrister-Miller, Kirk Dabney, Joann Hasse, Rita Landgraf, Brian Olson, Tim Rodden, Emily Vera

## SUMMARY OF DISCUSSION

### Call to Order

### Welcome

- Committee Chairperson, Rita Landgraf, welcomed our new committee members and thanked the committee for their flexibility in joining the meeting via webinar/call

### DCHI February Open Stakeholder Meeting

- Very pleased with level of participation at this meeting.
- Participants were complimentary of DCHI in promoting stakeholder engagement as a platform. Need to continue this work. DCHI should continue serving as convener and facilitating a platform for inclusion and engagement. Meetings should be open to public. Use website to inform people about when meeting is held. Other feedback:
  - Important to look at how all issues affect patients, not just those issues that come to our attention through professional lives
  - Workforce Development – encompasses community health workers, nursing, primary care, care coordination
  - Advancing Pay for Value – now looking at how to address as climate has changed through regulatory efforts and benchmarking
- Priority Areas for DCHI
  - Sustainability
  - Payment Reform- continue to explore viable options (including, but not limited to, a spending benchmark)
  - Strengthening Primary Care
  - Population Health
  - Expand Statewide Engagement –ex. how does DCHI intentionally engage employers, be more intentional in engaging legislators? Note: applies to PAC relative to our messaging and engagement

- Focus on non SIM grant, critical initiatives – opportunity now to go beyond what was originally identified in SIM plan; ex. good pilots occurring in our state around CHWs, long-term care and quality of life. Innovation can be much broader compared to what we have been focusing on during SIM
- PAC Table Feedback
  - Rita heard the need to do more. Some people felt like there is a void to overall stakeholder engagement. Vehicle prior was cross-committee forums. Even before DCHI was created, there were broader forums held.
  - Access- access to care, health options, right place to get the right care, school wellness centers, meeting people where they are
  - Structure- how do we look at the approach to this work (ex. committee structure at DCHI, partnerships) and should changes be made
  - System Innovation- priorities across all table feedback
- Target sectors
  - Children and schools; community; consumers, patients, providers; SDOH, employers, workforce. Didn't want to forfeit workforce & development, but concerns we've lost ground on education underway and reevaluate our focus moving forward
- Means
  - Advocacy- we are a convener, influencer
  - Best practices – how do we bring to forefront
  - Committees- are these the right structures?
  - Communication- have website and blogs we drive people to but are there more intentional opportunities?
  - Convening
  - Data
  - Education/Training
  - Funding
  - Innovation
  - Integration
  - Knowledge
  - Partners and Representation
- PAC Committee Response/Reflection
  - Much to absorb
  - How do we ensure that we are an organization that is open? Not everyone can have a seat on the board but that doesn't mean their participation and engagement is not critical and valued
  - Does DCHI play a role to be hub in innovation work?
  - Workforce Development- do have vehicles like Primary Care Collaborative and HCC w/DHIMER and DHINER looking at workforce relative to physicians and dentists, but what about other positions?
  - Keep framing that it is patient-centered but there is very little consumer engagement underway. Information is delivered to them, but they're not part of transformation efforts. Need good definitions of care coordination, value-based payment, transformation, and

- examples (if you're Patient A, this is what happens). Most consumers don't know what this is (ex. what an ACO is, if their doctor is part of one, how it's supposed to function).
- Opportunity for PAC to do a deeper dive around methods and message.

### Other DCHI Updates

- Behavioral Health Integration
  - 11 BH care providers and 11 primary care- HMA at forefront to assist
  - Collaborative care codes will give us guidance on how payers are or are not reimbursing. Value is people are ready for exploration
  - What's our take-away? Very complicated work. Good news is there continues to be positive actions. DCHI board will continue to make this a high priority.

### Brainstorm on Broader Committee Engagement

- We all represent org's that consumers are already a part of. Could we each go to our consumer engagement vehicles and start test modeling some of that engagement?
  - Ex. Does anyone have any feel for how the patient portals are working? Do most Dr's think it's worthwhile? Make note to explore and bring back- can add that as data we need. Is DHIN making progress on establishing patient portal? Can also bring that back.
  - George- AARP has tremendous amount of data on members. Will look into priorities. Had a tele town hall w/Sen. Coons. #1 issue was high cost of prescription meds. Will see how we can integrate this w/AARP DE.
  - Rita- DCHI is creating our own board and stakeholder feedback- creating a case if you will that allows messaging (Julane and Rita to put together). Board and committees to review and make sure language we're using resonates w/consumer not familiar w/healthcare transformation.
  - **Action Steps: Each member to bring back updates on respective agency's priorities through consumer lens at your org. This will allow PAC to have a better understanding of what consumers are telling us and what our organizations are doing- then analyze if it is or is not aligned so DCHI can address gaps.**
  - Charter and metrics
    - Raising awareness externally and internally
    - PAC attendance/membership on other DCHI committees
      - As DCHI continues to think about their internal structure and how to change or integrate, we can divide ourselves up to attend other committee meetings. Came to the point that we were invited to sit on those committees to help them stay focused on consumer perspective Still imp't? Tim- found it valuable to attend Workforce Dev, esp work on CHWs, and cross-committee meetings were important. Yes sitting in room is helpful reminder and also allows us to be a part of conversations/input from onset. Joann- Only time I could add input was public comment at end. Sometimes I would insert myself sooner. Not sure how much value. Likely more helpful to ask members of committee if they thought it was important. Mixed feelings. Rita- yes,

heard from Board members that is was valuable and wanted PAC folks to actually sit on committee.

- Need a vehicle to formulate communication across committees. People want more opportunity to understand globally what is going on and opportunity to engage. Ex. Video that has enough info. but isn't overwhelming – could test pilot with groups we already know

**Other Business**

- George will be away in April but will send info. ahead of time.
- Tim- has a conflict morning of April 15. Can send info. ahead of time.

**Next Meeting: Monday, April 15th, 10 AM, Dover (location TBD)**