

# IDAHO HEALTHCARE COALITION

450 W State Street  
Boise, Idaho 83720

## MEETING NOTES

SUBJECT: Idaho Healthcare Coalition Meeting      MEETING DATE: February 11, 2015

ATTENDEES:      **Members Present:**      LOCATION: 450 W. State Street, Boise

Dr. Ted Epperly, Denise Chuckovich,  
Richard Armstrong, Dr. Andrew Barron,  
Melissa Christian, Jeff Crouch, Dr. Keith  
Davis, Tom Fronk, Lisa Hettinger, Dr.  
Michael Mercy, Susie Pouliot, Elke  
Shaw-Tulloch, Mary Sheridan, Larry  
Tisdale, Ross Edmunds, Dr. David  
Peterman, Anne Wilde, Scott Carrell,  
Dr. Robert Polk, Rene LeBlanc, Maggie  
Mann, Geri Rackow

**Members Absent:**  
Representative Fred Wood,  
Tammy Perkins, Neva Santos,  
Dr. Dave Schmitz, Janet Willis,  
Senator Lee Heider

**DHW Staff:**  
Cynthia York, Julie Wall,  
Carla Cerchione

**Deputy Attorney General:**  
Nicole McKay

**Teleconference:**  
Dr. Mike Dixon, Dr. Scott Dunn,  
Casey Meza, Dr. David Pate, Karen  
Vauk

**Guests:**  
Dick Schultz (Noridian), Jami Berger  
(Noridian), Jeremy Chou (Givens  
Pursley), Dr. Sandeep Wadhwa  
(Noridian), Dr. Rhonda Robinson Beale  
(Blue Cross of Idaho), Marnie Packard  
(Select Health), Phillip Mendoza



## **ADOPTION OF MINUTES**

Minutes of the January 14, 2014, Idaho Healthcare Coalition (IHC) meeting were accepted as prepared.

## **Notes**

*(Please note that all sub bullets below are intended to convey discussion during the meeting. Those sections that are prompted by follow-up, or vote are meant to convey action occurring or actions needed.)*

**Opening Remarks:** “Alone we can do so little; together we can do so much.” –Helen Keller

1. Members watched [Secretary Sylvia Burwell historic Medicare Announcement](#). There are three things that need to change to reform the healthcare delivery system. (1) Change the way care is delivered. (2) Change the way providers are paid. (3) Change the way information is distributed. Medicare has a timeline to move from volume to value based payments. This aligns with the work being done through the SHIP.
2. Guests included Dick Schultz, Dr. Sandeep Wadhwa and Jami Berger, all from Noridian, Jeremy Chou (Givens Pursley), Dr. Rhonda Robinson Beale (Blue Cross of Idaho), Marnie Packard (Select Health), and Phillip Mendoza.
3. Agenda items were reviewed.

## **Discussion Items:**

### **1. DHW Report, including CMMI Updates – Denise Chuckovich, IDHW**

- Bridget Harrison (CMMI) has been assigned as the SHIP Project Officer for Idaho. The SHIP team will be having weekly conference calls with Bridget.
- We are waiting for the legislature to approve spending authority.
- The SHIP team has their first deliverable. All SIM awardees must develop and submit their Stakeholder Engagement Plan by March 30, 2015.

### **2. SHIP Conflict of Interest and Anti-Trust Considerations – Nicole McKay, Deputy Attorney General**

- Collective decision making around payment is prohibited. How each payer chooses to pay for value rather than volume will be different. Nicole will perform some additional research.

### **3. Updates re SHIP contracts under development**

- SHIP Project Management and Financial Analysis Contract RFP – Julie Wall, IDHW
  - The Project Management and Financial Analysis contract has been released for bid. The RFP will close March 12. DHW would like to have a signed contract June 16<sup>th</sup>.
- SHIP PCMH Technical Assistance Contract RFP – Julie Wall, IDHW
  - This RFP is still being refined and then it will be posted. DHW would like to have a signed contract in early July.
- Development of RC statement of work for public health districts – Elke Shaw-Tulloch, IDHW Health Division

- Elke has had two in-person meetings with the Public Health Districts since the last IHC meeting. They are working together to refine the scope of work for the public health districts' contracts. All seven of the Idaho Public Health Districts executive directors are now members of the IHC.
- Data Analytics RFI – Scott Carrell, IHDE
  - Denise Chuckovich, Michael Farley, Cynthia York, Lisa Hettinger and Scott Carrell worked on the Data Analytics RFI. Some areas in the RFI were intentionally left blank allowing for the bidders to inform. The RFI will be posted any day.

#### **4. SHIP organizational chart/ personnel recruitment update – Cynthia York, IDHW**

- All the SHIP positions have been posted. Applications have been scored or are in the process of being scored by a subject matter expert. A hiring list will be created from the top scoring applicants. The interview team will then begin the interview process. Cynthia is going to review the HIT Project Manager posting, solicit feedback and repost this position. Once the other positions have been filled, Cynthia will re-evaluate the second administrative assistant position. The job description may change depending on the needs of the SHIP team.

#### **5. TPCI and SAN Proposals Update – Tom Fronk, IPCA**

- The SAN grant was submitted February 4th. Thank you to Susie Pouliot, Neva Santos, Denise Chuckovich and Kathy Coumerilh at IPCA for all their hard work putting this grant together. The project will provide a venue for aligning now disconnected transformational efforts. This initiative will complement the SHIP. This is a four year grant focused on provider education and will help to sustain SHIP sustainability efforts.

#### **6. Medicaid Redesign and Expansion Update – Dick Armstrong, IDHW**

- Thank you to Susie Pouliot and Neva Santos for presenting at the Germane Committees. A bill has been crafted but a sponsor has not yet stepped forward.

#### **7. IHC Workgroup Reports –**

- Behavioral Health/Primary Care Integration Workgroup Proposed Charter – Written Report provided.
  - Ross Edmunds is hoping to be notified this week regarding the National Academy for State Health Policy (NASHP) grant. He has received positive feedback.
- SHIP Multi-Payer Workgroup – David Peterman, MD, Jeff Crouch
  - The Multi-Payer Workgroup is presently reviewing the original SHIP quality measures. The initial three SHIP metrics (1) tobacco cessation, (2) weight assessment and counseling for children and adolescents and (3) comprehensive diabetes care, may not necessarily be the metrics that drive quality.
- Idaho Medical Home Collaborative – Scott Dunn, MD, Ted Epperly, MD
  - NCQA recognition is a very lengthy, confusing and expensive process. A few practices withdrew from the program because they couldn't meet the two year deadline for the pilot program. Is there another option other than NCQA that will require less administrative support and cost less that will produce a similar

outcome? The two options are to use a national certifying body or to create an Idaho solution. One concern is that there will not be enough practices willing to go through the NCQA recognition process. Providers fear that the payment will not change. The payers emphasized that they want results. The process is less important to them than the results.

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**Discussed the feasibility of a state run certification program.**