



OHIP/OSIM HEALTH EFFICIENCY & EFFECTIVENESS WORKGROUP MEETING MINUTES



Health Efficiency & Effectiveness Workgroup	
DATE	03/25/2015
TIME	1:30 pm – 3:30 pm
LOCATION	OHCA, Beavers Bend Conference Room #1137
FACILITATORS	Chair, Health Efficiency & Effectiveness Workgroup: Becky Pasternik-Ikard Project Manager, Health Efficiency & Effectiveness Workgroup: Valorie Owens
MEMBER ATTENDEES	Lisa Anderson, Mary Brinkley, Michael Brose, Lou Carmichael, Dr. Steven Crawford, LaWanna Halstead, Dr. Lynn Mitchell, Marla Throckmorton
GUESTS	Nichole Burland, Jana Castleberry, Malinda Douglas, Adam Gibson, Rachel Jones, Jennifer King, Isaac Lutz, Kimrey McGinnis, Alex Miley, Ryan Morlock, Derek Pate, Melissa Pratt, James Rose, John Vetter

AGENDA

1. Welcome / Introductions

- Welcome from Chair, Becky Pasternik-Ikard, OHCA Deputy State Medicaid Director

2. Updates on project activities since previous Workgroup meeting

- **Introduction of new Workgroup Member:**
Karen Hylton is the Programs Manager in Adult and Family Services for the Oklahoma Department of Human Services. Karen supervises the Health-Related and Medical Services Section of Adult and Family Services. Her unit is responsible for the State Supplemental Payment program and Medicaid eligibility programs for the Aged, Blind and Disabled populations. It is also responsible for all the activities surrounding the Children with Special Health Care Needs portion of the Title V Maternal and Child Health block grant.
- **OKSTATESTAT - Healthy Citizens and Strong Families:** <http://www.ok.gov/okstatestat/>
An initiative of Governor Fallin, this new state website identifies measurable objectives for state government. The website looks at 160 metrics in five areas: Healthy Citizens & Strong Families; Safe Citizens & Secure Communities; Educated Citizens & Exemplary Schools; Prosperous Citizens & Thriving Economy; and Effective Services & Accountable Government. The Healthy Citizens & Strong Families section contains data on Wellness, Prevention, Access, and Social Stability. In the Access section are some of the initiatives being pursued by the OHIP/OSIM Health Transformation Workgroups. One of the efforts targeted by the Health E & E Workgroup is the objective to decrease the rate of preventable hospitalizations among Medicare beneficiaries from 76.9 per 1,000 in 2013 to 69.21 per 1,000 by 2019.
- **Update on OSDH Tribal Public Health Advisory Committee:**
The OSDH Tribal Public Health Advisory Committee has conducted two meetings since it was formed in December 2014. Members are appointed by their tribal elected leader or health director. Urban clinic and tribal serving entity representatives are appointed by their Board of Directors. The Committee is continuing to build their membership at this time. The Advisory

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Committee is chaired by Dr. Terry Cline and Co-Chaired by Julie Cox-Kain. It is staffed by the OSDH Office of the Tribal Liaison. The TPHAC has adopted a charter which is still awaiting final approval by Dr. Cline. During the March meeting the group identified the following priorities: 1. Explore 1115 waiver options with the OHCA and the OSDH; 2. American Indian specific data development and the establishment of the health information exchange; 3. Public health Accreditation mentoring and technical assistance; 4. Collaborative implementation of the OHIP flagship issues.

- **Launch of Healthy Oklahoma 2020: Oklahoma Health Improvement Plan**

The new OHIP launched on March 10th. Healthy Oklahoma 2020 updates Oklahoma's existing health improvement plan, and seeks to build on OHIP's successes while addressing areas where Oklahoma has traditionally fallen short regarding the physical, social and mental wellbeing of all Oklahomans. The updated OHIP is guided by four flagship issues – reducing tobacco use, reducing obesity, improving the health of children, and improving behavioral health. It also prioritizes Health Transformation, and identifies four core areas of work: 1. Health Efficiency and Effectiveness; 2. Health Information Technology (IT); 3. Health Workforce, and; 4. Health Finance. <http://www.ohip2020.com/>

3. Oklahoma State Innovation Model (OSIM) Updates:

- **Introduction of OSIM Staff:**

C. Alex Miley is the Director of the OSIM Project at the Center for Health Innovation and Effectiveness (CHIE). She has previously worked at OHCA in the Adult Medicaid Quality Grant and INTEGRIS Health System. She received her Bachelors in Biomedical Sciences from Oklahoma City University and graduated with a Master of Public Health from the University of Alabama Birmingham.

Isaac Lutz is the OSIM Project Coordinator at CHIE. He has five years of experience working in the public sector. Prior to his work at OSDH, Isaac worked at the United States Peace Corps and OHCA. He is a graduate of Indiana University and received a Master of Public Administration (MPA) from the University of Oklahoma.

- **Introduction of OSIM Program Evaluation Contractor: OU E-TEAM**

Dr. Adam Gibson, the lead on the State Evaluation Plan, along with John Vetter, Senior Research Associate, was in attendance and welcomed. *Please see attached document for profiles of the OU E-TEAM.*

- **Introduction of OSIM Evaluation & Performance Reporting Subcommittee:** *(please see attached document titled Subcommittee Roles & Responsibilities)*

Malinda Reddish Douglas, DrPH, CPH, has been with the OSDH for 25 years and currently works as the Senior Chronic Disease Epidemiologist and Institutional Review Board Administrator in the Office of the State Epidemiologist. Previously, she served as the senior chronic disease epidemiologist in the Chronic Disease Service, director of planning and program integration/strategic planner in the Tobacco Prevention Service (now the Center for the Advancement of Wellness), as a program evaluator for Family Support and Prevention Service, as an epidemiologist in the Maternal and Child Health Service, and as an epidemiologist in the Injury Prevention Service.

Miriam McGaugh, PhD, is the OSDH Director of Community Epidemiology & Evaluation. Her team supports 14 program areas and all the county health departments in the state with community-based analytics and evaluation. Dr. McGaugh earned her BS in Biology from Oklahoma City University, an MS in Epidemiology from the University of Oklahoma College of Public Health, and her PhD in Educational Psychology at Oklahoma State University. Dr.

McGaugh is also an adjunct professor at Oklahoma State University Marketing Department where she teaches Base and Advanced SAS programming classes.

Derek Pate, DrPH, is the Director of Health Care Information at the OSDH. The Health Care Information System (HCI) is responsible for the development and operation of a method for collecting, processing and disseminating health care data including Vital Statistics, Hospital Discharge and Outpatient/ASC Surgery, and Behavioral Risk Factor Surveillance System Data. HCI and other agency data are disseminated through OK2SHARE, Reports, and a Geographic Information System (GIS).

Pam Archer, M.P.H., is the OSDH Director of the Office of Scientific and Research Integrity. In addition, she was appointed by Commissioner Cline to serve as the Research Integrity Officer for the OSDH. She is responsible for conducting preliminary assessments of allegations of research misconduct and for overseeing inquiries and investigations.

Ryan Morlock is a statistician for the Oklahoma Health Care Authority, and prior to this role he worked at APS Healthcare as a contractor to the OHCA. Along with program evaluation services, he has experience with quality measures, such as HEDIS and CAHPS satisfaction surveys.

- **OSIM Program Evaluation / Actuarial Analysis:**

Reviewed the Health E & E contract deliverables that will be vetted by the Workgroup:

1. Program Evaluation Contract: a) Population Health Needs Assessment b) State Evaluation Plan
 2. Actuarial Analysis Contract: a) Care Delivery Models b) High-cost Delivery Services
- Please refer to the attached document titled, "Health Efficiency and Effectiveness Project Management Plan" for information on the Scope of Work and Deliverables.*

- **OSIM overarching timeline and deliverables:**

Quickly referenced deliverables according to Workgroup:

1. Health Workforce Assessment: a) Data Catalog, b) Baseline and Landscape, c) Gap Analysis, d) Environmental Scan, e) Emerging Trends, f) Policy Prospectus
2. Financial and Actuarial Analysis: a) Market Effects of Health Care Transformation, b) Care Delivery Model Analysis, c) High-cost Delivery Services, d) Financial Forecast of Delivery Models
3. Program Evaluation: a) Population Health Needs Assessment, b) In-state Evaluation with Quality Metrics
4. Health Information Technology: a) EHR Adoption Analysis, b) HIE Environmental Scan, c) VBA Roadmap

- **OSIM Website and Member Acknowledgements:**

Advised Members of new OSIM website that is still under development, but that will host all the information on OSIM activities, as well as information on each of the four Health Transformation Workgroups. Requested brief bios and pictures of each Member, as the composition of the Workgroup will be featured on this site.

[http://www.ok.gov/health/Organization/Center for Health Innovation and Effectiveness/Oklahoma State Innovation Model \(OSIM\)/index.html](http://www.ok.gov/health/Organization/Center%20for%20Health%20Innovation%20and%20Effectiveness/Oklahoma%20State%20Innovation%20Model%20(OSIM)/index.html)

4. Data Updates (please see attached documents)

- **Preventable Hospitalizations:**

Provided a document showing trend analysis of preventable hospitalizations.

- **Hospital Emergency Room Visits:**

Provided a document showing trend analysis of ER visits, along with the NYU Algorithm for classifying ED utilization (outdated methodology, but springboard for conversation on different classifications being used by providers). Members shared their different models – some examples provided:

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- Urgent Care or expedited access allows immediate access for patients of record; has open access for uninsured; allows walk-ins for dental emergencies.
- Tribal Center: once screened for eligibility, can see anyone who is a Member of a federally recognized tribe, or a descendent (proof required). Can see non-natives that are eligible for Medicare. A community needs assessment was the driver for the creation of a “sick clinic”.
- Use of a 5/50 model (5% of patients generate 50% of costs), developed a model to address these specific groups. Created an electronic alert for staff if an individual entering the ER was previously treated and has returned. The alert goes to a transition team of nurse practitioners, social workers, nurses, etc. to assist and develop a more robust discharge plan for the individual.
- Identification, outreach and reporting on “frequent fliers”, those patients that utilize the ER multiple times per year, as well as provider reporting (if a patient goes to the ER, the patient’s primary care provider is notified).
- ER patients are screened, and if the event is not a true emergency, the patient has the option to pay an insurance co-pay (or for the non-insured, pay a \$200 fee), or be referred to a nearby urgent clinic.

Discussed the probable creation of a Subcommittee(s) to address defining and measuring non-emergent use of the ER.

- **OHIP Workgroups with Overlapping Objectives/Strategies:**

Provided handouts of the OHIP 2020 Infrastructure and Health Literacy/Education objectives and strategies to compare to targeted efforts within the Workgroup.

5. Stakeholder Engagement

- **Promotion Efforts to Date:**

Requested input as to if any Members had held presentations or disseminated information on OHIP/OSIM to their respective organizations/associations.

- **Potential Promotion Activities & Events:**

Discussed potential future events in which the work of OHIP/OSIM could be highlighted.

6. Wrap-up

Next Meeting Date/Time/Place:

The next two meetings will occur on May 14th (9am-12pm) and August 20th (1-3pm). Location is TBD.

- At the May 14th meeting, the Workgroup will review (in advance) and discuss the initial draft of the Population Health Needs Assessment, and the draft of the Actuarial Analysis that relates to Care Delivery Models.
- At the August 20th meeting, the Workgroup will review (in advance) and discuss the draft of the Actuarial Analysis that relates to High-Cost Delivery Services, and the final draft of the Population Health Needs Assessment.