MINUTES OF THE COMMUNITY HEALTH CARE INVESTMENT AND CONSUMER INVOLVEMENT COMMITTEE

Meeting of June 4, 2014

MASSACHUSETTS HEALTH POLICY COMMISSION

THE COMMUNITY HEALTH CARE INVESTMENT AND CONSUMER INVOLVEMENT COMMITTEE OF THE MASSACHUSETTS HEALTH POLICY COMMISSION Center for Health Information and Analysis Daley Room, Two Boylston Street, 5th Floor Boston, MA 02116

Docket: Wednesday, June 4, 2014, 11:00 AM - 12:30 PM

PROCEEDINGS

The Massachusetts Health Policy Commission's Community Health Care Investment and Consumer Involvement (CHICI) Committee held a meeting on Wednesday, June 4, 2014 in the Daley Room at the Center for Health Information and Analysis located at Two Boylston Street, 5th Floor, Boston, MA 02116.

Committee members present were Dr. Paul Hattis (Chair), Ms. Jean Yang, Mr. Rick Lord, and Ms. Kim Haddad, designee for Mr. Glen Shor, Secretary of Administration and Finance.

Ms. Veronica Turner arrived late.

Dr. Hattis called the meeting to order at 11:09 AM.

ITEM 1: Approval of minutes

Dr. Hattis made no changes to the minutes. Mr. Lord moved to accept the Committee minutes from May 21, 2014. Ms. Haddad seconded. The Committee unanimously approved the minutes.

ITEM 2: Update on Phase 1 of CHART Investment Program

Mr. David Seltz, Executive Director, stated that the goal of the meeting was to provide an update on Phase 1 of the CHART Investment Program and the community hospital study. He noted that the committee would also hear two presentations from CHART Phase 1 awardees. Mr. Seltz noted the importance of continued engagement with stakeholders and consumers around both of these efforts.

Mr. Iyah Romm, Director of System Performance and Strategic Investment, introduced Ms. Margaret Senese, Program Manager for Strategic Investment, to present on CHART Phase 1.

Ms. Senese provided a brief synopsis of key events involving CHART-eligible hospitals and a status report on the progress of CHART Phase 1 projects. She stated that the HPC staff has, to date, visited 21 CHART hospitals, with additional visits scheduled in the coming months.

Ms. Senese added that CHART hospitals are extremely grateful and excited about continuing this work.

Ms. Senese stated Phase 1 projects are proceeding well, noting infrequent and minor issues with timelines and external vendors. She added that awardees may request no-cost extensions for Phase 1 funding by filing a Notification of Challenges by the end of June. She stated that staff will reply to these requests as promptly as possible.

Dr. Hattis asked what portion of awardees would be seeking no-cost extensions. Mr. Romm responded that the goal of the CHART Investment Program is to maximize the benefit of HPC awards in communities. As such, the HPC would grant extensions, as needed, to achieve that end.

At this point, Ms. Veronica Turner arrived at the meeting.

Ms. Senese discussed the evaluation of CHART Phase 1 projects. She stated that the HPC contracted with Safe & Reliable Healthcare (S&R), who will facilitate the review by providing the capacity to conduct assessment and evaluation at each CHART hospital. She noted that the CHART hospitals are excited about working with S&R.

Dr. Hattis asked whether S&R would connect with all of Phase 1 CHART hospitals. Ms. Senese responded that the evaluation would include all CHART awardees.

Ms. Senese stated that the HPC will also offer CHART awardees the option to complete a voluntary interview assessment tool: the World Management Survey. She stated that staff would be reaching out to participating hospitals and providing assistance with this tool.

Dr. Hattis asked for clarification on the purpose of these varying tools. Mr. Romm responded that the World Management survey will evaluate individual hospitals and determine areas of improvement. He explained that the evaluation by S&R will be more comprehensive. He stated that S&R will do an assessment of hospital culture and use that as the basis to understand the capacity of these organizations. The output of the S&R assessment will be an action-oriented report back to the hospitals and HPC.

Ms. Senese stated that CHART hospitals have requested a means through which they can share information and showcase Phase 1 work. To that end, she announced that the work of S&R and the World Management Survey will inform the curriculum for the first CHART Leadership Academy, which will be held on September 2, 2014. She stated that the event will encourage a seamless and collaborative transition into CHART Phase 2. Mr. Romm added that the HPC staff is seeking to make the Academy as impactful as possible by tailoring it to the needs of CHART hospitals.

ITEM 3: Update on the Community Hospital Study

Mr. Romm provided a brief update on the community hospital study. He stated that this will be a collaborative effort among many different stakeholders.

Mr. Romm discussed the proposed analytic approach for the community hospital study and provided an overview of the two aims: (1) analyzing acute care supply and identifying opportunities to align capacity with community need and (2) identifying and addressing barriers to structural transformation in Massachusetts community hospitals. While this study will inform CHART Phase 2, Mr. Romm noted that it will include data on all community hospitals in the Commonwealth.

Ms. Yang stated her excitement about this study and asked for detail on the analytic approach. She added that it is important to consider the evolution of community hospitals in the analysis.

Mr. Romm added to Ms. Yang's comments, stating that the analysis will also need to consider what services intersect with hospital care, what challenges hospitals face with their work force, and what impacts there are on the local economy.

Mr. Romm outlined the broad timeline and work plan for the community hospital study, including a projected release in early 2015. He noted that the analytic scope would continue to be fine-tuned throughout the summer.

Mr. Lord asked for clarification on the criteria for CHART hospitals. Mr. Romm responded that, by statute, the CHART hospitals are non-profit, non-teaching hospitals that have a relative price below the state median. He noted that some community hospitals are ineligible based on just one of these factors, making their inclusion in the study imperative.

Dr. Hattis commended the staff on the framework for the community hospital study. He stated that the report has the potential to provide useful insight for a multitude of stakeholders throughout the Commonwealth.

Mr. Romm stated that the study will not be grounded in the past, but will reflect upon and incorporate solutions driven by the analysis of solid data. He added that the HPC staff will also build interagency consensus with the Executive Office of Health and Human Services, Department of Public Health, and various other state agencies on the analytic scope of the study.

ITEM 4: Presentations from CHART Phase 1 Awardees

The committee heard presentations from two CHART Phase 1 hospitals. Mr. Kim Hollon, President and CEO of Signature Healthcare, and Dr. James Fanale, Senior Vice President of System Development at Beth Israel Deaconess Hospital - Plymouth, presented on the progress their institutions have made as a result of CHART Phase 1 awards. These presentations can be found on the HPC's website.

The committee engaged in conversation with the presenters. Dr. Hattis thanked them for their work.

Mr. Romm stated that these are only two examples of the 27 projects funded through CHART Phase 1 and reflect the work of the larger cohort.

ITEM 5: Schedule of Next Committee Meeting (August 6, 2014)

Seeing no further business before the Committee, Dr. Hattis adjourned the meeting at 12:27 PM.