

One Care Implementation Council Meeting

April 24, 2015 1 PM – 3 PM

One Ashburton Place, 21 Floor

Boston, MA

Attendees: Suzann Bedrosian, Bruce Bird, Joe Finn, Dennis Heaphy (Chair), Jeff Keilson, David Matteodo, Dan McHale, Dale Mitchell, Olivia Richard, Bob Rousseau, Howard Trachtman (Co-Chair), Florette Willis (Co-Chair)

Unable to Attend: Myiesha Demery, Rebecca Gutman, Denise Karuth, and Vivian Nunez

Handouts: Agenda, Meeting Minutes (3/13/15), 2015 Work Plan template (Draft), 2014 Work Plan Status Update. Documents will be available online at www.mass.gov/masshealth/onecare.

Next Open Council Meeting: May 29, 2015
1:00-3:00pm
1 Ashburton Place, 21st Floor
Boston, MA 02139

1) Welcome

Howard Trachtman, Implementation Council Co-Chair, reviewed the meeting agenda and led introductions.

A motion was made to approve the minutes from the March 13, 2015 Implementation Council meeting.

The motion was approved unanimously.

2) Facilitated Work Plan Discussion

Maggie Carey, UMass Medical School, introduced a discussion on the development of the 2015 Work Plan. Relevant meeting material included a draft template work plan document and 2014 Work Plan status document.

- The Council reviewed the work plan template goals as defined by the Implementation Council procurement documents and the Implementation Council charter. The Council also reviewed SMART (Specific, Measureable, Achievable, Relevant and Time-bound) criteria as a strategy to determine whether an objective was actionable.
- A Council member suggested that the issue of homelessness be raised as a priority area of the Council in the coming year. It was suggested that an initial activity on the issue of homelessness should be to identify the number of One Care enrollees experiencing homelessness and under-housing. The Council or another group could be convened to make recommendations on the issue.
- A council member suggested gathering enrollee feedback around their experiences in regards to the Triple Aim: better care, better outcomes, and cost effectiveness.
 - It was noted that the Early Indicators Project (EIP) and Quality Workgroup are currently collecting data from individuals around domains relevant to aspects of the triple aim. The Encounter Data Workgroup may also provide an opportunity to review data around these topics.
- A second recommendation from the Council member was in regards to measuring enrollee health literacy and health activation. It was suggested that Certified Peer Specialists could assist in collecting information on enrollee's experiences.
- A member of the audience suggested that the Council include One Care plans and MassHealth as stakeholders in addition to members and providers.
- Several suggestions were made by Council members in regards to ways to gather feedback from stakeholders. Recommendations included: online, through chat functions, online forums, or survey monkey; hosting an in-person event or forum; and convening workgroups targeting certain stakeholders such as LTS Coordinators.

- A Council member suggested including in the work plan an objective around developing a measurement system to assess the LTS Coordinator role and implementation.
 - It was suggested that the Council hear directly from the LTS coordinators in regards to successes and challenges they are facing in order to come up with actionable solutions that would benefit the coordinators, One Care plans and enrollees.
 - A member of the audience supported the suggestion to include a work plan objective on LTS Coordinators and noted that many variables such as resources, training and access issues are affecting the current implementation of the role.
- A Council member asked what data would be available from MassHealth regarding access, utilization and feedback from members to inform the work of the Council over the coming year.
- It was suggested that the Council include in the work plan activities around issues identified by the EIP survey.
 - It was noted that the EIP Survey 2 Report will be available soon and further analysis of Survey 2 results are ongoing.
- It was noted that the Council has not completed many of the activities from the 2014 work plan and the suggestion was made that the Council revisit the unfinished activities in developing the 2015 work plan.
- The Council agreed to convene a workgroup to draft a 2015 Work Plan and make a recommendation to the Council at the May 29, 2015 meeting.

Motions

A motion was made that MassHealth reconvene the LTS Coordinator Stakeholder Workgroup.

- The motion passed unanimously.

A motion was made to amend Goal 2 on the 2015 Work Plan template to include “housing” after “behavioral health.”

- Discussion:
 - A comment was made that enrollees with housing needs will need assistance with finding housing. It was noted that Certified Peer Specialists are trusted partners with a unique skill set and could provide this service.
 - A suggestion was made for a friendly amendment to include employment in addition to housing.

- The friendly amendment was declined.
- A suggestion was made to include employment counseling services under goal 3, supporting MassHealth efforts to ensure quality of care.
- The Chair suggested further discussion on the topic of employment.
- The motion passed unanimously.

3) New Business

Dennis Heaphy, Chair, gave an update on the status of the 2014 Annual Report.

- The Chair requested that a small group of Council members convene to review and provide input on the current draft of the Annual Report.
- The report will be distributed to all Council members for review. The small group will be charged with revising the Annual Report and recommending a final draft for approval by the Council at the May 29th meeting.

4) Subcommittee and Workgroup Updates

Susan Fendell, Mental Health Legal Advisory Committee and a member of the Behavioral Health Privacy Workgroup, provided an update on the ongoing work of the workgroup which includes Implementation Council, MassHealth, One Care plan and stakeholder representation.

- It was noted that as a result of the Implementation Council concern around behavioral health privacy and the inclusion of the issue in the 2014 Council work plan, MassHealth convened the behavioral health privacy workgroup.
- Ongoing work of the workgroup includes the development of agreed upon behavioral health privacy principles and sharing of best practices by One Care plans around the issue of behavioral health privacy.

Dennis provided an update on the recommendations made by the Subcommittee on Council Member Vacancies.

- The Subcommittee noted that the Council could benefit from adding skills and characteristics that were recently lost by vacancies: ID/DD experience; quality and consumer-based participatory research experience; geographic diversity; community-based organizations experience.
- It was also noted that the Council could benefit from new members that represent important populations affected by One Care including: people experiencing homelessness; people with substance use disorders; multicultural representation; people who are hard of hearing or who have vision loss; people served by community health centers; and people who don't self-identify as having a disability.

- Council members were asked to send any contacts they may have to Council staff for inclusion in outreach efforts to promote applications to fill open seats on the Council.
 - Direct outreach to the Massachusetts Commission for the Blind was suggested.

5) Comments from Attendees

- A member of the audience representing the PCORI project on consumer reported quality supported the suggested work plan objectives around increasing the use of Certified Peer Specialists in One Care. It was noted that CSP can be especially helpful with employment issues.
- A member of the audience from the Boston Center for Independent Living supported the suggested Council work plan activity regarding LTS Coordinators.

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Friday May 29, 2015
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