

Members in attendance: Dr. Carnazzo, Dr. Wergin, Dr. Knowles, Dr. Darst, Dr. Werner, Dr. Woodruff (via telephone)

Members not in attendance: Ken Klaasmeyer, Sen. Gloor

DHHS Staff in attendance: Pat Taft, Margaret Brockman, Heather Leschinsky, Susie Lyness

Approval of November 2, 2011 Meeting Minutes and Approval of Agenda

The meeting convened at 1:02 pm. The agenda and the meeting minutes were approved as written.

Staff Update

Margaret Brockman, Heather Leschinsky and Pat Taft presented the staff update.

- To date \$233,000+ has been spent on PMPM payments and the average monthly number of Medicaid clients is 7300, 5,200 at Kearney Clinic and 2,100 at Plum Creek.
- TransforMED's two year contract ends September 2012, but they have agreed to amend the date to March 31, 2013. Between September and March, there will be no technical help for the practices but TransforMED will continue to be available to finalize all of the data from the pilot for the final report.
- Managed Care RFP expansion – two companies have been selected from the RFP process; Amerihealth and Coventry

United Health Care Medical Home Pilot

Kathy Mallatt, Jim Elliston, Laure Hope, Dr. Tom Tonniges, and Deb Shoemaker presented a power point presentation highlighting the Medical Home Pilot at People's Health Center. The pilot was modeled after the Medicaid plan in Arizona, which ran the Nebraska data to establish the patient registry. They were limited to one practice with the potential to expand. People's Health Center in Lincoln was chosen because they have a large Medicaid cliental and were already committed to transforming into a Medical Home.

Blue Cross Blue Shield (BCBS) Update

Dr. Filipi reported the following:

Pilot period - October 1, 2010 to July 1, 2011

## Participation

- 78 physicians in nine communities
  - Nebraska City, Lincoln, Omaha, Kearney, Lexington, West Point, Auburn, Grand Island, Geneva
- When compared to other Nebraska Primary Care Practices, Patients in the PCMH:
  - Had 10% fewer inpatient admissions
  - Had 27% fewer emergency room visits
  - But, overall cost of care of diabetic patients increased in PCMH.

For Diabetes:

<b>Level 1 (lower target)</b>	10/01/2010	06/30/2011	Compliance Increase	<b>% Increase</b>
A1C < 8.0	559	801	242	<b>43.29%</b>
LDL < 130	517	756	239	<b>46.23%</b>
BP < 140/90	436	803	367	<b>84.17%</b>
All Measures in Compliance	203	491	288	<b>141.87%</b>
<b>Level 2 (higher target)</b>	10/01/2010	06/30/2011	Compliance Increase	<b>% Increase</b>
A1C < 7.0	427	567	140	<b>32.79%</b>
LDL < 100	374	564	190	<b>50.80%</b>
BP < 130/80	220	462	242	<b>110.00%</b>
All Measures in Compliance	57	164	107	<b>187.72%</b>

## TransforMED Update and Data Review

Colleen Stack with TransforMED provided by phone an update on the work with the practices, and reviewed the recent data collected by TransforMED on progress at each practice in their transformation work. She felt both practices have been reaching out to patients regarding ER visits, but hospital notification needs to be worked on. Access to care and patient information is being worked on more aggressively. She felt that no one was being turned away, but could be more efficient.

Colleen also provided the Council with the data on the recent surveys of the practice providers and staff. The Council was concerned with the provider dissatisfaction on the survey, and it was pointed out that it is not unusual at this point in time to see some dissatisfaction as change is hard to adjust to. It was felt that once they see more patient improved health data, it would improve their satisfaction. Colleen said that a retreat had been suggested.

#### Review of DHHS Claims Data

Pat Taft and Margaret Brockman reviewed the most recent quarterly reports based on DHHS Claims. It was pointed out that at this point no conclusions can be formed as the data is still incomplete, since it is on paid claims and providers have up to a year to turn in claims. More substantial data will be available in the coming months.

#### Updates from Pilot Practices

Dr. Miller with Plum Creek and Dr. Shaffer with Kearney Clinic joined the meeting via telephone. Dr. Shaffer felt that everything was improving. They are developing their diabetes registry and making some good changes. Dr. Miller felt that there had been a dramatic change in their practice and that they were much more effective. TransforMED has kept them on task.

When the question of provider satisfaction was addressed, both Dr. Miller and Dr. Shaffer felt that change was the most significant factor. When there is a major change in the business model there will be a dip in satisfaction. They also felt that once the providers see that the customer satisfaction numbers have improved, the provider satisfaction will do the same. The Council asked “what can we do to improve provider satisfaction?” It was suggested that a more personal connection might be what is needed. There has been a lot of communication on line but not in person, and there hasn’t been enough work on bringing providers on-board.

Dr. Carnazzo asked each practice to give an example of what they had found difficult with the transformation process. Dr. Shaffer stated that change doesn’t come from one person, you need a team and leaders to make effective changes. With TransforMED and DHHS involved there was more “buy-in” from providers, not just Dr. Shaffer pushing forward. Dr. Miller said that now patient screening is much more consistent and accurate. Physicians can now spend more time on immediate issues, more one on one time.

Dr. Werner asked what could be done to bolster moral. A “pat on the back” letter from the Council to the two practices was suggested. It was also suggested that a personal visit to go over the data with the providers might also be helpful – and a site visit by Council members would be the most effective.

Serena Phillips, Care Coordinator from Kearney Clinic reported that they have seen great changes. She gave an example of a teenage, noncompliant, diabetic girl who has shown a marked improvement by the patient centered concept.

Tammy Schroeder & Steve Jensen from Plum Creek reported on the patient registry. They are getting closer to using the registry as part of their daily workflow.

### Legislative Update

Sen. Gloor was unable to attend, but Margaret Kohl, legislative aide, provided the update in his absence. Child welfare is the main focus of the legislature at this time. Ms. Kohl reported that the Appropriations Committee is changing provider rates by adding back 1 ½ % to specialty providers. The Banking Committee is considering bringing private pay into Medical Home, a multi-payer, and on the Federal level there is talk of state invocation grants to help plan and implement multi-payer.

### Recommendation for Follow-up with Practices

The Council unanimously recommends a personal letter to each physician in each practice be sent from the Council commending them on their work to date and encourage them to continue. The letter would list all of the Council members, but signed by Dr. Werner as Chair. A similar letter should go to the newspapers with a copy sent to the hospitals.

After the discussion with the two pilot practices, the Council determined that a site visit by the Council members would be the most effective. They determined that April 19, 2012 works for their schedule. The members will divide up and visit each site in late afternoon with food provided.

### Next Meetings

The next meeting is scheduled for Wednesday, May 23, 2012 at 1:00 pm in Lincoln. The following meeting was scheduled for Tuesday, August 28, 2012 in Kearney – time to be determined. There is an interest to invite the practice physicians to attend if they can.

### Public Comment

Dr. Tonniges wanted to commend the Council on getting Dr. Ken Shaffer involved with the Medical Home Pilot. He and Dr. Shaffer attended their first meeting regarding Medical Home 35 years ago.

Dr. Werner adjourned the meeting at 4:48 p.m.