Call to Order and Welcome  
Michelle Mills  

1:00

Old Business

Approve April Minutes  
Review April Breakout discussions  

1:05

New Business

Two Approaches to Statewide Provider and Patient Directories  
Michigan Health Information Network, Tim Pletcher, PhD  
Rhode Island Institute for Healthcare Quality, Elaine Fontaine  

1:15

One Approach to a Statewide Personal Health Record  
Alexandra Cohen, New York eHealth Collaborative  

2:05

-- Break --  

2:30

Health IT Infrastructure Needs to Support Population Health Improvements in Colorado  
Art Davidson, MD, Denver Health  

2:40

Discussion: What Did You Learn, What Else Do You Want to Learn?  

3:05

Preparing for June 8th Commission meeting  

3:30

Public Comment  

3:50

Closing Remarks and Adjourn, Michelle Mills  

3:55
# VALUE BASED PAYMENTS

## APRIL COMMISSION MEETING:
BARRIERS IDENTIFIED AND RECOMMENDATIONS PROVIDED

<table>
<thead>
<tr>
<th>Barriers</th>
<th>Recommendations</th>
<th>Commission Role</th>
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</table>
| • Many models of value-based payments; not clearly defined  
• Insufficient analytics and insufficient standards for data systems  
• Disincentives exist to data sharing  
• Patient attribution is difficult  
• Provider attribution model does not match delivery models  
• Workforce shortages  
• Several stand alone solutions  
• No alignment of patients, providers, payers, programs/payments | • Increase capabilities in analytics and improve standardization of data systems for better interoperability  
• Leverage EHRs / HIEs to provide services for providers participating in value-based payment models  
• Need for state directed policies with incentives and/or mandates  
• Leverage 90/10 funding to build; but have the bigger picture in mind. The churn of Medicaid population requires attention to wider range of patients  
• Better tools and data for coordination of care are needed  
• An inventory of state Health IT assets should be done (or updated) | • Evaluate incentives and measurements for using data exchange for care coordination  
• Recommend direction of funding/resources  
• Recommend standards for data systems procured with state/federal funds  
• Recommend / direct the development of guidance documents and education tools  
• Evaluate barriers to data sharing and develop strategies for eliminating barriers |
## APRIL COMMISSION MEETING: BARRIERS IDENTIFIED AND RECOMMENDATIONS PROVIDED

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<tbody>
<tr>
<td>• Many levels of health literacy / multitude of languages and education levels</td>
<td>• Incentives for patients and providers</td>
<td>• Evaluate incentives for patients to engage</td>
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<td>• Don’t have a clear engagement approach: What is engagement and what drives it?</td>
<td>• Coordinated education and outreach strategies</td>
<td>• Recommend a client needs assessment to inform decisions</td>
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<td>• Lack of tools to engage patients - need more accessibility, usability, ease</td>
<td>• Define / study patient engagement</td>
<td>• Develop a vision for statewide linkage of patient portals (network of network for patient access to data)</td>
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<td>• Limited availability and usefulness of data</td>
<td>• Leverage data: HIE clinical and demographic data, CIVHC claims data, state population data</td>
<td>• Recommend standards</td>
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<tr>
<td>• Concerns for data rights and security</td>
<td>• Ensure protections for patient data rights</td>
<td>• Suggest policies for investments that are tied to architecture standards</td>
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<tr>
<td>• Lack of incentives for providers beyond Meaningful Use</td>
<td>• Ensure strong security standards</td>
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<tr>
<td>• Care coordination limitations</td>
<td>• Promote consistent models for data sharing</td>
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<td>• Resource limitations</td>
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<tr>
<td>• Lack of Health IT coordination</td>
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TWO APPROACHES TO STATEWIDE PROVIDER AND PATIENT DIRECTORIES

- Michigan Health Information Network 15 mins
  - Tim Pletcher, PhD

- Rhode Island Institute for Healthcare Quality 15 mins
  - Elaine Fontaine

- Joint Q&A 20 mins
ONE APPROACH TO A STATEWIDE PERSONAL HEALTH RECORD

- New York eHealth Collaborative
  - Alexandra Cohen

- Q&A
HEALTH IT INFRASTRUCTURE NEEDS TO SUPPORT POPULATION HEALTH IMPROVEMENTS IN COLORADO

- Denver Health
  - Art Davidson, MD

- Q&A

15 mins

10 mins
DISCUSSION

- What Did you Learn?
- What Else Do You Want to Learn?
  - Matt Benson, North Highland

25 mins
JUNE MEETING PREPARATION

Commission Goal

▪ Provide input on the initial CMS-funded Health IT systems to serve Colorado’s Medicaid population

Process

▪ By June 1st, Commission members will receive two briefs:
  ▪ Medicaid Master Data Management (Provider Directory and Client Index)
  ▪ Medicaid PHR and online patient engagement

▪ Commission members should review briefs and come to June 8th meeting prepared to provide feedback on potential value propositions and extensibility of Health IT systems beyond Colorado’s Medicaid population
JUNE MEETING PREPARATION

Commission Goal

- Develop a tactical approach for ongoing Commission engagement to guide technology planning

Process

- Commission will receive a summary of current and previous workgroups/committees/task forces for Health IT planning
  - Discuss workgroup(s) needed to guide planning for CMS-funded technologies
    - Analyze duplicative efforts or gaps in existing Health IT planning efforts
  - Recommend workgroup structure to support Commission
  - Recommend a process for aligning existing workgroups with Commission

Commission Discussion

- Discuss timeline for development of the Commission’s Strategic Plan
PUBLIC COMMENT
ADJOURN