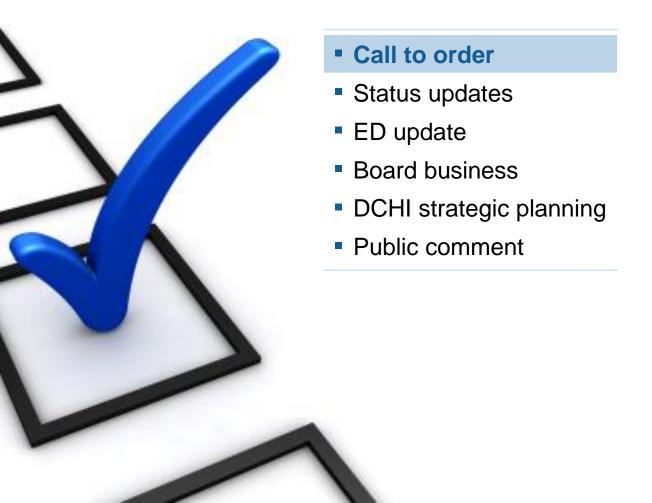
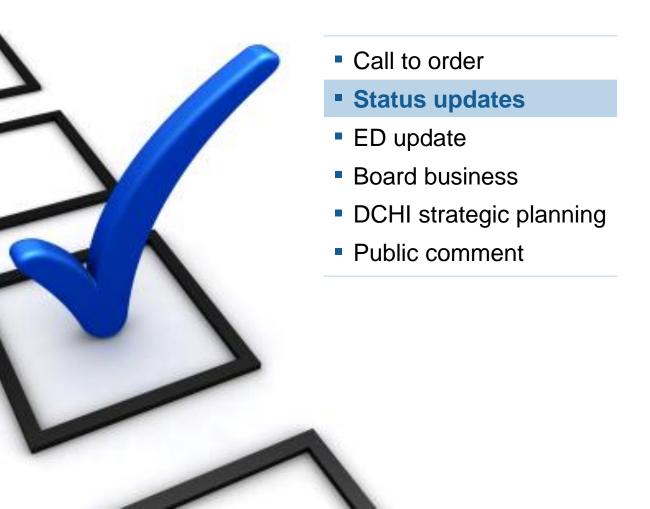


Board Meeting

Agenda



Agenda



Summary of October DCHI Board meeting

- Approved renewal of three Board members
- Approved new member for DCHI Board
- Approved new member for Clinical Committee
- Received updates from DHIN on Common Scorecard and development timeline for the Health Care Claims Database
- Received briefing from UD on the Workforce Curriculum
- Patient and Consumer Committee introduced consensus paper for approval at November Board meeting
- Received update from HCC on SIM grant year 3 operational plan which would provide support through January 2018
- Received ED update including plans to engage professional marketing firm for DCHI communications strategy
- Received update on DCHI budget

DCHI success in 2016

Critical path

- 1 Common Scorecard accessible to PCPs statewide
- 2 50% providers participating in practice transformation
- 3 40% of Delawareans attributed to PCPs in value-based payment models
- 4 3 Healthy Neighborhoods launched

Supporting innovations

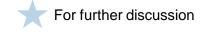
- 1 Behavioral health integration testing program launched
- Workforce curriculum available
- 3 Health literacy materials launched on website
- 4 APCD on path to be operational in 2017

Operational sustainability

- 1 Broad base of financial contributors
- 2 Staff hired for Healthy Neighborhoods, Clinical and Payment Committees
- 3 DCHI program dashboard live

DCHI success in 2016: Critical path

Metrics Status



- Common Scorecard accessible to PCPs statewide
- V2.0 launched Statewide
- Scorecard enrollment live; providers may enroll at any time
- 50% providers participating in practice transformation
- ~35% PCPs enrolled¹
- Planning for year 2 support in progress

- 40% of Delawareans attributed
 3 to PCPs in value-based payment models
- ~30% Delawareans in value-based payment models²
- Payers continuing to enroll practices

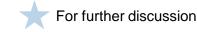
- 3 Healthy Neighborhoods launched
- HN sustainability Committee convened
- Selection of Healthier Sussex Task Group; HN Local Council planning process underway
- Local Council in development for Wilmington

Source: 2016 Medscape PROPRIETARY AND CONFIDENTIAL

¹ August 2016 PT vendor report indicated 98 sites and 363 MDs, NPs, PAs; current Scorecard estimates ~1,000 full time primary care providers in Delaware; does not include TCPI participants 2 Majority in Medicare Shared Savings Plans

DCHI success in 2016: Supporting innovations

Status



Behavioral health

integration testing

program in development

Metrics

- Not launched; accepting expressions of interest from PC and BH practices
- Implementation plan approved at August Board for approval

Workforce curriculum available

- Vendors currently developing curriculum
- First module launching in November

- Health literacy materials launched on website
- No literacy materials are currently available
- ab+c developing choosehealthde.com

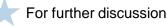
4 HCCD on path to be operational in 2017

- ★ DHIN leading implementation of HCCD, scheduled for Fall 2017
- DHIN working with governor's office to publish draft regulations by Dec 1 (TBC)

DCHI success in 2016: Operational sustainability

,

Status



Broad base of financial contributors

Metrics

Strategic planning process to discuss goals and financial sustainability currently in process

- Staff hired for administration, Healthy Neighborhoods, Clinical Committees
- Executive Assistant, Healthy Neighborhoods project director, and Wilmington HN community coordinator hired
- Recruitment underway for HN Program Manager and Community Coordinators

- 3 DCHI program dashboard live
- Initial dashboard shared at August Board; expect to update quarterly (next update in Dec)

Draft timeline and example activities for DE's Health Care Claims Database

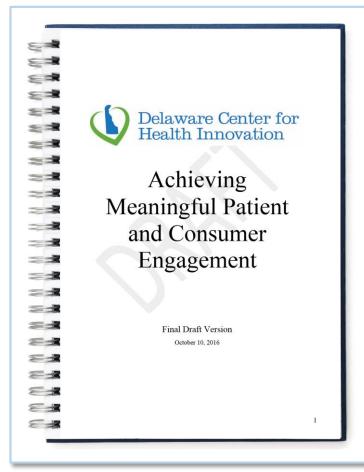
Current milestone timeline

Previous timeline

	Prepare			Expand———			
	2016	2017				2018	
Activity	Q3 C	4 Q1	Q2	Q3	Q4	Q1	Q2
Governance	 Define governance funding strategy Create and promote & regs Align on procurer strategy if needed 	regs ilgate rules I nent		incourage self-funde ospital systems) to p		 Arbiter data use requests Consider excases or self participation 	panding use f-funded
Data collection	 Establish data us agreements Define sources, for timing of data fee Prepare to collect Medicare data 	partion participant partic	are to receive da	ata feeds from	payers • Prepare (e.g., se	data feeds fron to accept other lf-funded plans, procedures as n	data feeds commercial
Data infra- structure	 Agree on vendor architecture if nee 	ded Modi base	ify access and/o ed on data receiv	policies and procedur architectural desig red d ingestion routines	n as needed		
Data analytics	Define use casesDesignate owner requests, distribute	for	t standard report	ts	 Test and desired received 	analytics on I data	Consider expanding analytics based on demand
General reporting	 Determine how in will be shared Draft use cases (Transparency W Group) 			month delay final regs		 Distribute information according to governance policies 	 Consider adding consumer interface

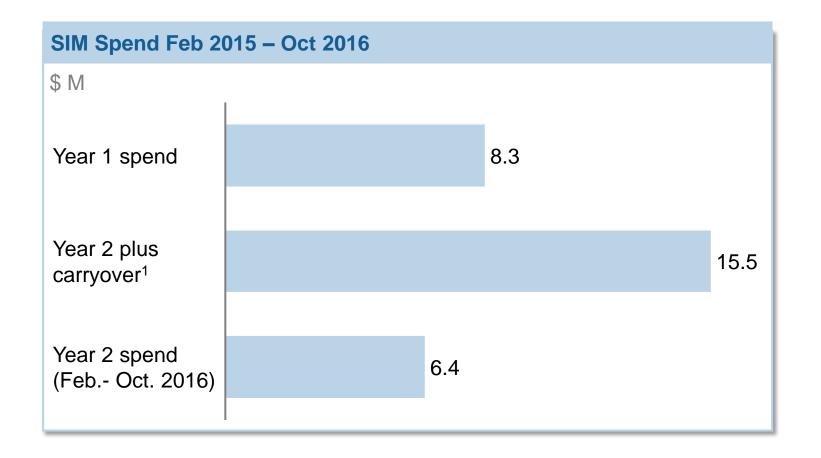
¹ Legislation mandates participation from Medicaid Program, the State Group Health Insurance Program, any qualified health plan in the Delaware Health Insurance Marketplace and any federal healthcare plan

Patient and Consumer: next steps on consensus paper



- Chair of the Patient and Consumer Committee shared this consensus paper at the October Board meeting
- Board to discuss consensus paper today and potentially vote on adoption

HCC budget update – SIM grant spend by year



HCC budget update – SIM grant spend by area (Feb. 2015 – Oct. 2016)

NUMBERS PRELIMINARY AND FOR REFINEMENT

Initiative	Year 1 SIM grant (\$)	Year 2 SIM grant through Oct. (\$)
Care delivery (PT, BHI, Quality)	2,361,029	1,873,375
Value based payment & transparency	1,912,500	1,005,000
Health IT (HIT plan, HCCD, Scorecard)	1,476,500	1,145,360
Workforce	383,675	123,360
Population health (HN)	1,050,000	875,000
Patient and consumer	372,475	379,354
Management/infrastructure	731,886	963,142
Total	8,287,865	6,364,591

HCC budget update – SIM grant spend by vendor (Feb. 2015 – Oct. 2016)

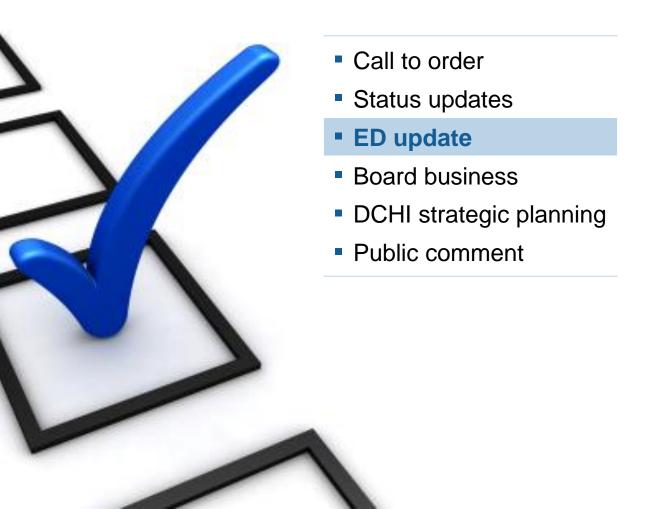
✓ Contracted to perform activity

\													
Description	McKinsey & Company	ab+c Creative Intelligence		Consulting	UD	сснѕ	MedAllies	NJ Academy of Family Physicians	Remedy	Medical Society of Delaware		DHIN	DCHI
Care delivery (PT, BHI, Quality) Practice Transformation and Learning Collaboratives strategy and procurement Funding for PT vendor assistance BH integration strategy Quality and utilization measure alignment Care coordination consensus paper	√	√	√				√	√	√	√			
Value based payment & transparency Transparency strategy Value-based payment model design position paper Support for Medicaid/ MCO interactions on payments Communications strategy and materials	✓												
Health IT (HCCD, Scorecard) Design and launch of Scorecard versions 1.0 and 2.0 Overall State HIT roadmap HCCD design and planning Provider baseline reporting/ goal setting BH EMR Incentives	✓											✓	
Workforce Development of workforce curriculum Licensing and credentialing consensus paper	√		√	√	√	√							
Population health (HN) Healthy neighborhood (HN) program design HN community launch and tools PH scorecard	✓												
Patient and consumer Consumer engagement strategy Community forums	√	√		√									
Management/ infrastructure Cross-committee meetings, integration across committees, mandatory monitoring and evaluation and grant management	✓	√									√		√
Total Y1 spend	\$7,900,000	\$199,379	\$35,875	\$147,600			\$2,125	5 \$1,000	\$1,000				-
Total Y2 contract amount	\$7,600,000	\$623,650	\$8,300	\$541,200	\$222,360	\$389,203	\$301,187	7 \$396,000	\$436,000	\$234,000	\$249,917	\$249,480	\$35,280
		\$474,351											

Reactions to November 1st Cross Committee meeting

- Approximately 70 attendees joined
- Overall: most respondents found the meeting a valuable use of time, opportunity to learn more about DCHI initiatives, and opportunity for input
- Presentations: most respondents felt the ACO and payer presentations were valuable and should be included in future Cross Committees
- Breakouts: respondents felt the breakouts were a valuable opportunity for cross-committee dialogue, and wished that there had been more time for discussion
- Format: respondents liked the new discussion-based format, but agreed that efforts need to be made to keep the agenda on time (lighter agenda and more stringent time keeping)

Agenda



ED update

- Communications update
- 2 Stakeholder engagement update
- 3 Operational update



DCHI DIGITAL MARKETING & TECHNOLOGY PARTNERSHIP

Presented by Joseph DiGiovanni and Kyle Barkins













































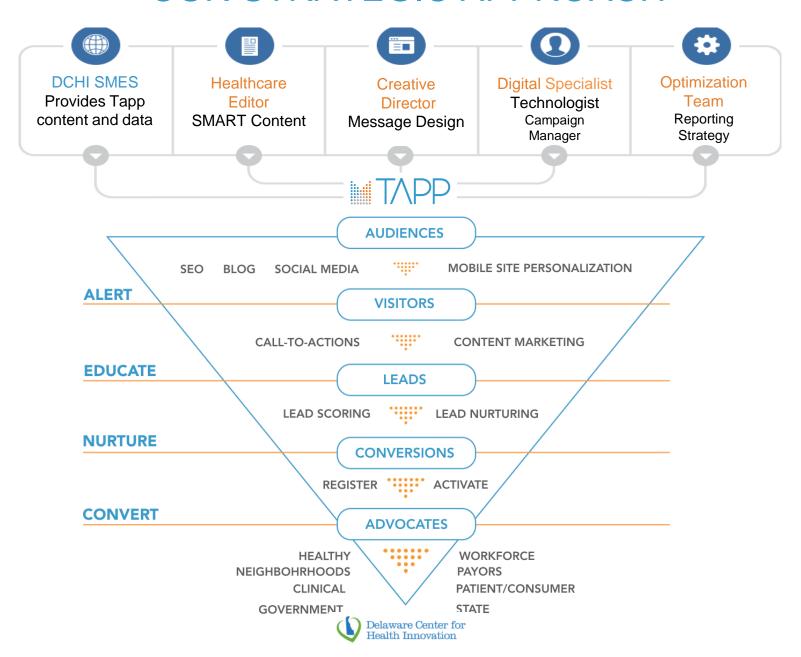
GOALS



- 1. Establish DCHI Brand Authority
- 2. Crystalize Messaging & Metrics
- 3. Implement Content Marketing Hub to Empower Cross-Committee Communications
- 4. Launch Cutting-Edge *Marketing Automation Platform* to Personalize Stakeholder Journey and Accelerate Success
- 5. Launch Full-Funnel Digital Marketing Campaigns to Amplify and Showcase Success Amongst Key Influencers, Committees and Stakeholders
- 6. Position and Promote DCHI As The Regional Leader and National Role Model Of Success to Fuel Sustainable, Innovative Transformation Initiatives



OUR STRATEGIC APPROACH

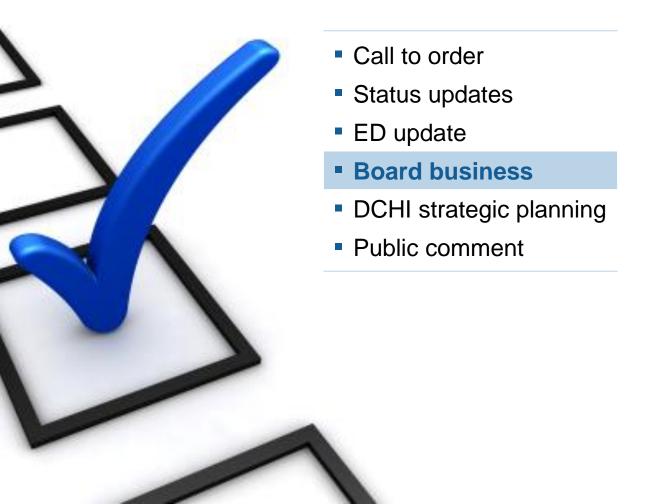


DCHI 90 DAY LAUNCH PLAN

- Discovery
 - Content index, archive
 - Meeting with key committees
 - Data analysis and baseline(s)
 - Define key goals and metrics
- Messaging and Branding
 - Establish and standardize messaging
 - Brand, tagline, logo, elevator pitch, mission
 - Identify key audiences
 - Map the DCHI cross committee stakeholder journey
- Content Mapping
 - DCHI Committee content planning/calendar
 - Aggregation and tagging of current content
 - Create customized content for all stages of stakeholder journey
- Marketing Technology
 - Website / Portal
 - Platform Integrations
 - Migration onto HubSpot COS Platform
 - Identify and establish key data captures, metrics and dashboards
 - Digital Campaigns
 - Deliver DCHI Digital Marketing Game Plan
 - Create and launch digital campaign channels
 - Create DCHI sharable DCHI driven messaging, metrics, and content



Agenda



Board business

- 1 Vote on approval of August and October Board minutes
- 2 Vote for renewal of Committee chairs¹
- 3 Vote on Workforce Committee member

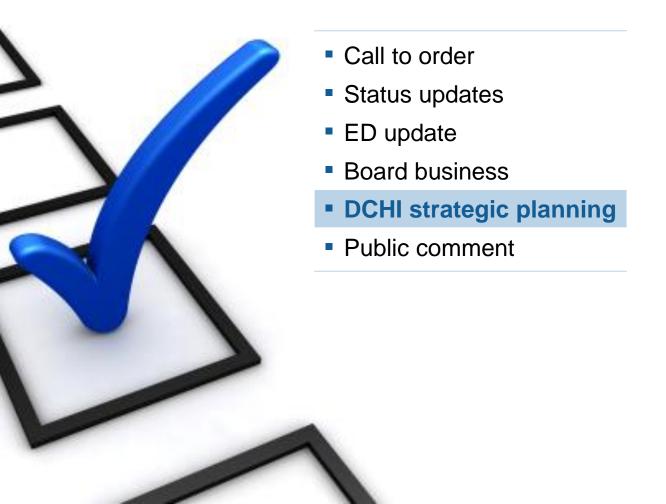
All Committee members will be up for vote at December Board; Chairs should be prepared to submit their rosters before the meeting

Current DCHI committee chairs

Committee	Chair(s)
Clinical	Nancy FanAlan Greenglass
Healthy Neighborhoods	Lolita LopezMatt Swanson
Patient/ Consumer Advisory	■ Rita Landgraf ¹
Payment	Tom Brown
	Traci Bolander
Workforce & Education	 Kathy Janvier²

¹ Not up for renewal today2 Potential Co-Chair not up for vote today

Agenda



DCHI Strategic Planning

Discussion during Oct Board

- Discussed context and current urgency around revisiting the DCHI strategic plan
- Shared high-level findings from strategic planning process
- Shared "what we heard" related to specific DCHI initiatives

Objectives for today

- Share 12 strategic imperatives arising out of strategic planning process
- Discuss additional Board input related to strategic imperatives
- Align on high-level timeline for implementation

Recall: findings from DCHI strategic planning process

DCHI has created an important **forum for multi-stakeholder discussion** and more in-depth analysis of issues than commonly found in public/private venues

DCHI's portfolio largely **addresses the highest priority issues**, although our approach in some cases **needs to evolve** with changes in the market landscape

DCHI needs to more systematically communicate about its work and its connections with stakeholders' strategic, operational, and individual decisions

In most cases, DCHI will need the skills and capacity to shepherd initiatives through implementation/launch but should look to other organizations for ongoing operations

DCHI should more proactively identify where policy solutions are necessary to support innovation and work with policymakers to ensure those solutions are sensible

Twelve strategic priorities emerged in the process (1/3)

- 1 Maintain a broad portfolio of initiatives as necessary to realize the goals on which DCHI was founded, but evolve that portfolio in response to changes in the landscape
- 2 Establish and sustain a strong implementation role for most initiatives that extends well through launch, but generally look to other organizations for ongoing operations
- 3 Identify where policy solutions are necessary to support innovation and work with policymakers as necessary to bring those solutions to fruition
- 4 Ensure that adoption of value-based payment for primary care supports our goals for transformation, while fostering other models to transform the full continuum of care

Twelve strategic priorities emerged in the process (2/3)

- Work with the next administration to leverage the State of Delaware's purchasing authority to foster provider risk sharing as a critical enabler of quality & affordability
- 6 Align DCHI-led delivery system transformation efforts with regulatory changes and investments being made by payers and providers to achieve similar goals
- 7 Evolve our approach toward multi-payer alignment of quality measurement and reporting, to ensure impact and long-term sustainability
- 8 Accelerate the rollout of Healthy Neighborhoods by streamlining the proposed operating model and establishing priorities based on identified community needs

Twelve strategic priorities emerged in the process (3/3)

- 9 Adopt a systematic approach to communicating with stakeholders regarding DCHI's efforts and how they dovetail with the efforts of other organizations and individuals
- 10 Affirm our commitment to be transparent in our decisions and use of resources while creating channels to manage sensitive information and challenging discussions
- 11 Continue to fund DCHI operations through stakeholder contributions, but augment this with grant funding for design and implementation of specific initiatives
- 12 Continue staff hiring plan; rely on contractors for time-limited projects that require surge capacity and/or specialized expertise

Timeline to implementation

Proposed implementation timeline

Next 60 days (January 2017)

- Share strategy broadly
- Begin to engage new administration
- Develop tactical plans for each recommendation
- Update CMMI Operations
 Plan to align with DCHI
 Strategic Plan
- Develop budget to support initiatives through 2017

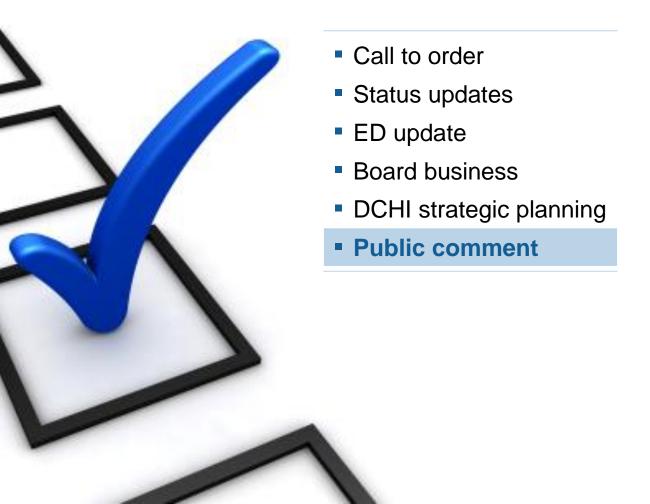
February – December 2017

- Begin implementation of recommendations across each initiative
- Engage with stakeholders
- Hire for roles and/or establish contractor relationships, as appropriate

January 2018 and beyond

- Evaluate DCHI's progress and coursecorrect where necessary
- Continue to evolve DCHI's plan for financial sustainability and permanent staffing, particularly with end of SIM grant

Agenda



Upcoming DCHI Meetings for 2016



Payment monitoring

- Nov 9, 4:30pm
- DHSS Holloway Chapel



Workforce and Education

- Nov 10, 1:00pm
- DelTech Stanton



Clinical

- Nov 15, 5:00pm
- UD Star Campus



Healthy Neighborhoods

- Nov 16, 1:00pm
- DHSS Holloway



Patient and Consumer

- Dec 1, 1:00pm
- Edgehill Shopping Center



Board

- Dec 14, 2:00pm
- DHSS Holloway Chapel

Please check
www.DEhealthinnovation.
org for the latest
information about all
DCHI Board and
Committee meetings