PRIMARY CARE REFORM COLLABORATIVE (PCRC) Meeting

Monday, March 14th, 2022
4:00pm-6:00pm
Virtual WebEX Meeting

Meeting Attendance and Minutes

Collaborative Members:
Present
Dr. Nancy Fan, Co-Chair
Representative David Bentz, Co-Chair
Dr. James Gill
Dr. Rita Meadows
Dr. Rose Kakoza
Kevin O’Hara
Steven Costantino (Proxy for Secretary M. Magarik)
Mary Jo Condon (Proxy for Commissioner Navarro)
Steve Groff
Faith Rentz
Maggie Norris-Bent

Organization
Delaware Health Care Commission (DHCC)
House Health & Human Development Committee
Medical Society of Delaware
Delaware Nurses Association
Delaware Healthcare Association
Highmark
Department of Health & Social Services (DHSS)
Department of Insurance (DOI)
Division of Medicaid & Medical Assistance
State Benefits Office/DHR
Westside Family Healthcare

Meeting Facilitator: Dr. Nancy Fan (Co-Chair)

Commission Members Absent: Senator Bryan Townsend, Co-Chair, Deborah Bednar, Aetna

Health Care Commission Staff: Elisabeth Massa (Executive Director), Stephanie Hartos (Public Health Administrator 1), Eschalla Clarke (Senior Social Service Administrator)

CALL TO ORDER

Dr. Fan called the meeting to order at approximately 4:02 p.m. via WebEx. It was determined a quorum was present. Dr. Fan asked public attendees to virtually sign-in by placing their name and affiliation in the chat box; public attendees were also informed that they can email this information to stephanie.hartos@delaware.gov.

ACTION ITEM: JANUARY MEETING MINUTES
Dr. Fan asked if there were any edits or comments for the January 2022 meeting minutes. Hearing none, a motion to accept was requested. Steven Costantino made a motion to accept the minutes, with Dr. Rose Kakoza seconding this motion. The January 2022 meeting minutes were accepted.

**OFFICE OF VALUE BASED HEALTH CARE DELIVERY UPDATE**

Mary Jo Condon provided an update for the Office of Value Based Health Care Delivery (OVBHCD) on their regulations regarding SS1 for SB120. Public comments were received and responded to by revising the regulations. The revisions are available at the registrar’s office and a link was provided in the chat: [Delaware Register of Regulations, Volume 25, Issue 9, March 1, 2022](#). Public comment will be open on these revisions through March 31, 2022.

Dr. Fan requested a timeline update for these regulations. Mary Jo responded that there is a month and 11-day period after the regulations are then finalized, which would bring us to May 11, 2022 (this is a correction from an earlier comment). After the finalization, a bulletin would be released which would include the latest template provided to the carriers, which will be refined to be in compliance with SS1 for SB120 as well as the requirements of the regulation. This will go out to carriers and be provided alongside their rate filings to evaluate compliance with the rate filing process.

Dr. Fan asked when the OVBHCD would like the PCRC’s recommendations for Payment and Attribution, Care Coordination, etc. so that the health plans can incorporate those ideas for 2023 to help increase primary care spend and participation in value-based programs. Mary Jo responded that the carriers file in June or July, so in order to incorporate those into this year’s bulletin, the PCRC should aim to have those completed by May 15**th**. The deadline for carriers filing is usually the end of July, though as this is a bigger ask than usual, the OVBHCD would like to give them as much information as possible prior to the deadline to support them in starting to pull together necessary document and ensure there is enough time to verify they can meet the requirements of the regulation and of the statute. No additional questions from the PCRC for the OVBHCD/Department of Insurance (DOI).

**PCRC UPDATE - WORKGROUPS**

Dr. Fan presented an update on the three PCRC workgroups: Payment and Attribution, Quality Measures and Benchmarks, and Care Coordination, which were created to provide content for the PC Delivery Model. Dr. Fan thanked the PCRC members and public stakeholders for providing nominations for the three PCRC workgroups. The Payment and Attribution workgroup received the majority of the nominations, and due to current issues with staffing and infrastructure support, it was decided to move forward with the Payment and Attribution workgroup at this time. The other two workgroups are significantly important, though there is currently not enough staff to adequately support all three groups.
The following six individuals were selected from a pool of nominees to be members of the Payment and Attribution workgroup. Their first meeting will take place on **Wednesday, March 23rd from 9:30-11:30am via WebEx**.

### PAYMENT AND ATTRIBUTION WORKGROUP MEMBERS

- **Lori Ann Rhoads** - Director of Health System Innovation, Medical Society of Delaware
- **Tyler Blanchard** - Executive Director, Aledade ACO
- **Dr. Rose M. Kakoza** - Senior Clinical Network Director, Population Health Medical Director, Delaware Medicaid Partners, Christiana Care Health System
- **Brendan McDonald** - Highmark Director of Reimbursement Design and Market Evaluation
- **Dr. Michael J. Bradley** - Family Medicine Physician / Primary Care Practice owner
- **Randy Fornwalt** - Aetna, Manager of Value Based Contracting

The other two workgroups are currently on hold. For Quality Measures and Benchmarks, some carriers have already begun doing similar work, along with Care Coordination. We are not trying to “reinvent the wheel”, just be able to see what can be incorporated into the PC Delivery Model so that practices have alternative options to use for value-based care. This work will likely not be completed by the end of the second quarter, though we may be able to get the work started and be finished by the third/fourth quarter to be available for 2024 health plans.

Dr. Fan stated that the PCRC could discuss Care Coordination and Quality Measures and Benchmarks at the next meeting to “put some meat on the bones” of the PC Model. Feedback would need to be received to decide on what direction we would like the PC Model to go. The PCRC could look at some of the work that was done under the SIM Grant, as well as Delaware’s current Benchmark process and have it prepared for the next meeting. Dr. Fan proposed the option that the PCRC take up the work for the two proposed workgroups, or have the workgroups remain in place, but be on a very delayed and limited basis.

Dr. Gill responded to this by saying the PCRC will likely not get significant, detailed work done on these topics at the monthly meetings. We would need separate groups to do this work, though it still could be members of the collaborative. Dr. Fan stated that we have selected the members for Quality Measures and Benchmarks and Care Coordination workgroups, though the workgroups are not operational at this time. Dr. Gill stated we do need separate time to get this work done that is outside of the standard PCRC meetings; maybe the members would need to complete a little more work if there is not enough staff, but that a separate group is needed.

Dr. Gill also requested to see the list of the members selected for those two workgroups. Those individuals have yet to be notified but will be informed in the upcoming weeks and a finalized list will be
sent to all PCRC members. All groups contain between 5-6 members and were selected to include diversity among professions.

Dr. Fan recommended that if we continue with the workgroups, we start with Care Coordination; Dr. Gill agreed. Dr. Gill did express concern on how the groups would interact as the Payment and Attribution workgroup may decide that payment may depend on value-based/quality measures, but if no other group has decided what these measures should be, we could run into problems. If that is expected, then the Quality group should take higher priority, though that will hopefully not be the case. Dr. Fan agrees that it will depend on where exactly the work is going.

Mary Jo Condon asked which workgroup would be responsible for deciding what capabilities need to exist for Delaware’s version of primary care. For example, what a care team would need to include, or what use of population health technology is needed to make transformation happen. Dr. Fan replied that this and the practice transformation component would likely be under the Care Coordination workgroup. Dr. Gill agreed.

Mary Jo responded that the Care Coordination group would likely want to meet first. Based on work in other states, you would want to define what the vision is first, then determine how much it will cost to executive this vision, and finally what is the best mode of payment to support these costs. It is important to understand what exactly the vision is.

Dr. Fan agreed and stated that the workgroup will be filling in what Mercer has compiled for the PC model framework over the past year. Payment and Attribution is making sure they are “talking the same language” and can agree on what each term/patient definition would look like. Dr. Fan stated that it seems agreed that Care Coordination work should go as parallel to the Payment and Attribution work as possible so the PCRC has something they can provide to the health plans. Lori Ann Rhoads agreed in the chat box. The PCRC had no other comments on the three workgroups.

CONCLUSION

The next PCRC meeting is scheduled for Monday, April 4th from 4:00-6:00pm via WebEx. The first Payment and Attribution meeting will take place on Wednesday, March 23rd from 9:30-11:30am via WebEx. These are both public meetings and are shown in the Public Meeting Calendar at https://publicmeetings.delaware.gov/#/.

For the April 4th agenda, there will likely be an update from the Payment and Attribution workgroup and a tentative update on the status of the Care Coordination workgroup.

PUBLIC COMMENT
Mary Jo Condon stated that the OVBHCD is meeting with insurance carriers roughly every two weeks at this point to support implementation, so any recommendations or ideas the PCRC has should be sent over as quickly as possible.

No additional public comments. The meeting was adjourned at 4:27pm.

**Public Meeting Attendees**

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<tr>
<th>Name</th>
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<tr>
<td>Lori Ann Rhoads</td>
<td>Medical Society of Delaware</td>
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<td>Pam Price</td>
<td>Highmark BCBS</td>
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<td>Nicole Freedman</td>
<td>Morris James</td>
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<td>Megan Richards</td>
<td>Aetna</td>
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<td>Mike Pellin</td>
<td>Aetna</td>
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<td>Fred Gibison Jr.</td>
<td>Mercer</td>
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<td>Meredith Stewart Tweedie</td>
<td>Christiana Care</td>
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<td>Lizzie Lewis</td>
<td>302 Strategies</td>
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<td>Katherine Impellizzeri</td>
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<td>Scott Banken</td>
<td>Mercer</td>
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<td>Esther Mays</td>
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<td>Joseph Fitzgerald</td>
<td>Fitzgerald Consulting, Inc.</td>
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<td>Megan Richards</td>
<td>Aetna</td>
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<td>Wei-Ann Bay</td>
<td>Blue Cross Blue Shield</td>
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<td>Bryan Gordon</td>
<td>Christiana Care</td>
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<td>Christina Haas</td>
<td>Delaware Department of Insurance</td>
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<td>Wendy Beck</td>
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<td>John Van Gorp</td>
<td>Bayhealth</td>
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<td>Christina Crooks Bryan</td>
<td>Delaware Healthcare Association</td>
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<td>Kim Gomes</td>
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