Delaware Center for Health Innovation Board Meeting

July 8, 2014
Agenda

Topic

Welcome and reflections from June 27th orientation

CMMI Model Test grant application review

Board business

Recap

Public comment
Recap - board best practices

Which board best practices should we adopt?

- Members “take their hats off” and keep an open mind
- Real work happens in the room (not a rubber stamp, avoid pre-meetings, parking lots)
- Everyone participates
- Atmosphere of compromise
- Respect each other’s diversity
- Keep the greater good in mind
- Bring your experience/expertise
- Hold each other accountable
- Stay flexible and embrace course corrections – our plan is not fixed
- Maintain the transparent and open tone that has been set for stakeholder engagement
Recap – our aspirations

<table>
<thead>
<tr>
<th>What to do hope we will have accomplished in 3 months, 1 year, 3 years?</th>
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<tr>
<td>▪ By 3 years, we will:</td>
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<tr>
<td>▪ Have made solid advances in the Plan</td>
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<td>▪ See outcomes start to shift</td>
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<td>▪ See improvements in patient experience/care</td>
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<td>▪ Have Healthy Neighborhoods operating effectively</td>
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<td>▪ This project and the Innovation Center will continue with or</td>
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<td>without the grant and through changes in administration</td>
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<td>▪ Board will have established itself with stakeholders and</td>
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<td>vendors, have strong relationships</td>
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<td>▪ We will have broadly communicated about the Plan, bring</td>
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<td>learnings back, always know the pulse of the community</td>
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<td>▪ We will be focused on planning, prioritization, and</td>
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<td>sustainability</td>
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<td>▪ We will be fully responsible for the “entity” we will have</td>
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<td>built</td>
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## Agenda

### Topic

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<tr>
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</tr>
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Reminder - grant summary

- Total of 12 Model Test grants to be awarded by CMMI, with 20-22\(^1\) estimated applicants
- Up to $700M total award, ranging from $20-100M per state
- Key dates
  - Letter of Intent submitted by June 6 (complete)
  - Application due July 21 – planning to submit July 14 to ensure compliance
  - Oral presentation (with stakeholders) TBD
  - Notification in Fall 2014
  - Performance period Jan 1, 2015 – Dec 31, 2018 of which 1 year is pre-implementation

\(^1\) 19 Design states plus 1-3 additional new states (e.g., New Jersey)
Grant sections

Standard Forms

Project Abstract

Governor’s Letter of Endorsement

Letters of support and participation from major stakeholders

i. Project Narrative (addressing the following subject areas)
   1. Population Health Plan
   2. Health Care Delivery System Transformation Plan
   3. Payment and or Service Delivery Model
   4. Leveraging Regulatory Authority
   5. Health Information Technology
   6. Stakeholder Engagement
   7. Quality Measure Alignment
   8. Monitoring and Evaluation Plan
   9. Alignment with State and Federal Innovation

ii. Budget Narrative

iii. Financial Analysis

iv. Operational Plan (incl. Key Personnel)
Feedback for discussion

There are several points of feedback for which board members and stakeholders have provided different views

- Performance transparency (Project Narrative p.24)
- Stakeholder contributions (Budget Narrative p.1)
- Practice transformation support (Project Narrative p.6, Budget Narrative p.6-7)
- Care coordination support (Project Narrative p.7, Budget Narrative p.6-7, 10)
- Definition of PCP (Project Narrative p. 10)
- Other?
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Board items for discussion

**Bylaws: Highlights**
- Stated Purpose – Section 1.2
- Composition and Qualifications – Section 3.2(c)
- Committees – Sections 4.2 and 4.3 (Standing Committees, Nominating Committee, Special Committees – Technical Advisory Group)
- Officers – Section 5.1
- Annual Meeting – Section 3.5 Text

**Discussion**
- Board Officers – Discuss Positions, Qualifications, Nominating Process
- Committees – Discuss Process for Appointment of Chairs and Committee Members
- Schedule – Discuss Standing Monthly Meeting, Next Meeting, and Annual Meeting
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- Welcome and reflections from June 27th orientation
- CMMI Model Test grant application review
- Board business

**Recap**

- Public comment
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