



November 18th, 2019 1:30 pm

Location: 450 W. State St.,
7th Floor, Conference Room 7A

Meeting Minutes:

Member Attendees: Kathy Brashear (phone), Teresa Cirelli, Dr. Kelly McGrath (phone), Neva Santos (phone), Larry Tisdale (phone), Norm Varin, Matt Wimmer (phone), Wren Withers (phone), and Cynthia York

Guests: Mary Sheridan, Elke Shaw-Tulloch, Stephanie Sayegh, Ann Watkins, Shelby-Lyn Besler, Jenni Gudapati, and Krista Stadler

Anti-Trust Statement: It is the policy of the Healthcare Transformation Council of Idaho (HTCI), to conduct all its activities, and the workgroups associated with HTCI's activities, in compliance with federal and state antitrust laws. During these meetings and other activities, including all informal or social discussions, each member shall refrain from discussing or exchanging competitively sensitive information with any other member.

Summary of Motions/Decisions:

Motion:

Cynthia York moved to accept the minutes of the October 16th, 2019 Payor Provider Workgroup meeting as presented.
Teresa Cirelli seconded the Motion.

Outcome:

Passed

Agenda Topics:

Welcome and Opening Remarks; Roll Call; Introductions; and Agenda Review- *Norm Varin and Dr. Kelly McGrath Co-Chairs of the Payer Provider Workgroup*

- ◆ Started at 1:35 pm

Improving Sepsis Care Presentation- *Helen Holmes, RN, MBA, and Ann Ealy, RN Kootenai Health*

- ◆ Septic shock was 30% in 2017

- ◆ Kootenai Health participates in the Mayo Clinic Care network and requested that they provide technical assistance to assist with this project. The Mayo Clinic staff reviewed data, ran reports and made recommendations for improvement as follows:
 - Earlier Resuscitation – establishing earlier Rapid Response team (RRT)
 - Point of Care lactate protocol – compress the time in administering medication
 - RRT training – having the teams made up of physicians, nurses, and EMS crews
- ◆ Goal is to decrease the sepsis shock mortality to 20% in 2018, saving an estimated additional 21 lives.
- ◆ After implementing a new “ED redesign” process results were reduced to 24.2% in 9 months, representing 12 lives saved with this “ED redesign”
- ◆ ICU hours also decreased due to the new process
- ◆ Outreach has become a little more complex when it comes to transferring patients both internally and externally.
- ◆ EMS now administers the IV treatment (antibiotic medication) while in transport

Telehealth Taskforce (TTF) Update- *Jenni Gudapati, Boise State University, Krista Stadler, St. Luke’s Virtual Care Center and Ann Watkins, Office of Healthcare Policy Initiatives, Bureau of Rural Health & Primary Care*

- ◆ The three TTF Co-Chairs have met 6 times over the last 3 months and devoted a lot of time on pre-implementation planning
- ◆ The TTF will meet from January to June 2020 and will prepare a final report with their recommendations to HTCI and HQPC in August 2020
- ◆ A pre-work packet which capture barriers and current telehealth landscape details will be provided to TTF members prior to the January TTF meeting.
- ◆ The TTF will be comprised of 12 members 4 from the healthcare sector and 8 members from various economic sectors throughout Idaho. If members of PPW have suggestions for members, please reach out to Jenni Gudapati or Ann Watkins.
- ◆ Subject Matter Experts will be invited to present solution-based recommendations on how to further telehealth adoption and expansion in Idaho. Pre and post surveys will be provided to TTF members to help aggregate key points of consensus.
- ◆ The TTF meetings also present an opportunity to educate a new group about telehealth and incorporating businesses that are self-funded and community leaders
- ◆ Some of the businesses identified to participate in the TTF already have been providing telehealth services and incorporating them in the task force also presents opportunities to strengthen linkages with primary care

New HTCI Workgroup overview- *Mary Sheridan, Bureau of Rural Health & Primary Care*

- ◆ Critical Access Hospital (CAH) Workgroup established and will start with a co-chair meeting on December 5th and the first full task force meeting will be held on or around January 23, 2020. The purpose of the CAH workgroup will be to explore funding models like the Pennsylvania global budget model for applicability in Idaho. If possible, a funding application will be submitted to the Center for Medicare and Medicaid Innovation (CMMI) Rural Health Initiative.
- ◆ Larry Tisdale and Patt Richesin are co-chairs and 7 CAH representatives have expressed interest in participating in the CAH workgroup.
- ◆ Materials are being collected from other funding demonstration models such as Pennsylvania, Maryland and others who have successfully implemented value-based payment models.

Closing- *Norm Varin, Dr. Kelly McGrath Co-Chairs of the Payer Provider Workgroup*

- ◆ Dr. David Pate is retiring from St. Luke's and the co-chair position he currently holds for HTCI will need to be filled.
- ◆ PPW is still soliciting ideas on payer and provider collaborative projects
- ◆ Send an email to Norm Varin, Dr. Kelly McGrath, or Mary Sheridan on any upcoming meeting discussion topics

- ◆ Future Meetings: Monday January 27th, 2020 1:30pm – 3:30pm (MST)
Monday February 24th, 2020 1:30pm – 3:30pm (MST)

Meeting Adjourned: 03:00 pm