



May 11th, 2020, 1:30 pm

Location: Webex Meeting

Meeting Minutes:

Member Attendees: Lydia Bartholomew, Kathy Brashear, Yvonne Ketchum-Ward, Dr. Kelly McGrath, Melissa McVaugh, Robbie Roberts, Neva Santos, Norm Varin, Matt Wimmer, Wren Withers, Cynthia York

Staff: Mary Sheridan, Stephanie Sayegh, Matt Walker, Elizabeth Heist

Guests: Scott Banken, Pam Fischer, Jordan Button, Liz Woodruff

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 March 16, 2020 Payer Provider Workgroup as presented.

Matt Wimmer seconded the motion.

Outcome: Passed

Agenda Topics:

Welcome and opening remarks; roll call, anti-trust statement review; minutes review - Norm Varin and Dr. Kelly McGrath, Co-Chairs of the Payer Provider Workgroup

Meeting convened at 01:33 p.m. Norm Varin read the Anti-Trust Statement. Norm Varin asked if the members wanted any modifications of the March minutes; the members approved the previous meeting minutes.

Update on Healthcare Transformation Council of Idaho – Mary Sheridan, Bureau of Rural Health & Primary Care, IDHW

Mary Sheridan reported the HTCI April meeting cancellation, Telehealth Task Force March meeting cancellation, and Rural and Frontier Workgroup April and May cancellations were due to the member's efforts to support their surrounding communities in light of COVID-19. Although meetings were cancelled and work suspended temporarily, projects and the overall effort are on-going and otherwise unaffected by the temporary suspension.

Development of the cost-driver survey – Workgroup discussion led by Co-Chairs

Norm Varin provided an overview of the goal for the cost-driver survey and asked for discussion on what categories of healthcare should be on the survey for ranking, including if COVID-19 and telemedicine should be incorporated.

Norm explained the purpose of the cost-driver survey is to identify the categories that are of most concern workgroup participants with a focus on those that can be impacted through payer and provider collaboration. The goal is to identify at least three cost drivers that can be addressed in a collaborative way.

Dr. Kelly McGrath added that the survey will need to include questions about the ability to impact cost-drivers; capturing that information will inform subsequent decisions.

It was determined that a small committee will participate in continuing to develop the cost driver survey prior to the next Payer Provider Workgroup meeting. The volunteers were Norm Varin, Dr. Kelly McGrath, Wren Withers, and Melissa McVaugh.

Closing:

Norm Varin and Dr. Kelly McGrath, Co-Chairs, adjourned the meeting at 03:00 p.m.

Next meeting: Tuesday, June 30th, 2020, 1:30 p.m. – 3:30 p.m.



Payer Provider Workgroup

Action Items

June 30, 2020 2:30PM

■ Action Item 1 – May PPW Meeting Minutes

PPW members will be asked to adopt the minutes from the May 11, 2020, PPW meeting:

Motion: I, _____ move to accept the minutes of the May 11, 2020, meeting of the Payer Provider Workgroup as presented.

Second: _____

HTCI

HEALTHCARE TRANSFORMATION
COUNCIL OF IDAHO

Purpose of the survey, desired outcomes:

Inform the participants that the results will be published on the HTCI website; identifying information will not be published.

Numeric Allocation Question:

Specify a percentage to illustrate the payer mix (providers) or line of business (payers):

Medicaid	
Medicare	78%
Medicare Advantage	15%
Commercial	
Uninsured	7%
Total	100%

<https://help.worldapp.com/display/FHC/Question+Types>

<https://help.worldapp.com/display/FHC/3D+Matrix>

Degree of Concern
(1 = least, 4 = most)

Comments (optional)

Cost Drivers to be Ranked by Degree of Concern:

	1	2	3	4	
Behavioral Health	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	offered by a partner
Custodial Care	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Diagnostic Imaging/X-Ray	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Durable Medical Equipment	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Emergency Department	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	
Home and Community-Based Services	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Home Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	not applicable to us
Hospice/Palliative Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	
ICF/IID - formerly known as ICF/MR	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Infusion/Dialysis Procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Inpatient Hospital/Facility	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	sphinx of black quartz
Laboratory/Pathology Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	
Long Term Acute Care Hospitals (LTACH)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Outpatient Hospital/Facility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	
Prescription Drugs (Outpatient) - Non-specialty	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Prescription Drugs - Specialty	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Prescription Drugs - Generic	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	judge my vow
Prescription Drugs - Brand	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Professional Other (PT, OT)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	
Professional Primary Care	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Professional Specialty Care	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Site of Service (Infusion Medications)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	
Skilled Nursing Facility	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Transport: Air Ambulance	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	
Transport: Ground Ambulance	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	
Professional Urgent Care	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Ability to Impact
(1 = least, 4 = most)

Check 3 to 5 Cost Drivers that you believe the PPW should focus on for collaboration:

Cost Drivers to be Ranked by Ability to Impact:

	1	2	3	4	
Behavioral Health	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Custodial Care	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Diagnostic Imaging/X-Ray	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Durable Medical Equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>
Emergency Department	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="checkbox"/>

Home and Community-Based Services	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Home Health	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Hospice/Palliative Care	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
ICF/IID - formerly known as ICF/MR	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Infusion/Dialysis Procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Inpatient Hospital/Facility	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Laboratory/Pathology Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="checkbox"/>
Long Term Acute Care Hospitals (LTACH)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Outpatient Hospital/Facility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>
Prescription Drugs (Outpatient) - Non-specialty	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Prescription Drugs - Specialty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="checkbox"/>
Prescription Drugs - Generic	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Prescription Drugs - Brand	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Professional Other (PT, OT)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>
Professional Primary Care	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Professional Specialty Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>
Site of Service (Infusion Medications)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Transport: Air Ambulance	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Transport: Ground Ambulance	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
Professional Urgent Care	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

From your perspective, to what extent do these factors influence on the cost of care?

Degree of influence on the cost of care
(1 = least, 4 = most)

	1	2	3	4
Referrals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Supply Chain (Medical Devices)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Supply Chain (Pharmaceuticals)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Pre-authorizations	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Site of Service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient preference	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Credentialing	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

Free-form question: How do you anticipate cost-drivers being affected by COVID-19?

Yes/No question: Are you interested in participating in further efforts to positively impact health care in Idaho?

Demographic Information

Disclaimer: Results aggregated, no participants will be identified or contacted as a result of this survey.

Dropdown: I work for...

- a critical-access hospital.
- a health system.
- a primary care provider.
- a specialty provider.
- a non-profit carrier.
- a for-profit carrier.
- a government administrator.

Dropdown: Our organization operates primarily in...

- an urban area.
- a rural area.