



## Better Health Together

*This electronic newsletter will be produced weekly to provide high-level updates on the work of the DC Innovation office under the State Innovation Model (SIM) grant as DC develops the State Health Innovation Plan (SHIP). We look forward to your input on our activities and milestones as we work to improve healthcare for DC residents.*

### SIM Work Group Calendar

All Work Group Meetings will be held at 441 4<sup>th</sup> Street NW-Room 1028

*Quality Metrics Work Group*  
April 18, 2016  
3:00pm-4:30pm

*Community Linkages Work Group*  
April 20, 2016  
2:00pm-3:30pm

*Payment Models Work Group*  
April 21, 2016  
3:00pm-4:30pm

*Care Delivery Work Group*  
April 25, 2016  
3:00pm-4:30pm

### Recent News

#### **SIM Update: DHCF Solicits Feedback on Provider Survey**

DHCF is requesting feedback from District health care providers. In addition to the SIM Work Groups, this is a unique opportunity for providers to offer their input on the healthcare system and be part of the District's efforts to improve the health of its population, enhance patient and provider experience, and control health care costs. The information collected will be used to help the District design and implement new health service delivery and payment reforms. To access the survey, click on the following link: <http://dc-sim.surveyanalytics.com>.

**The deadline has been extended. Feedback is requested by Friday, April 22, 2016.** If you have not already, please provide your feedback as soon as possible. You may also forward the survey link to other District providers in your network.

## Announcements

### CMS Launches Comprehensive Primary Care Plus Model

On April 11<sup>th</sup> the Centers for Medicare & Medicaid Services (CMS) announced it's largest-ever initiative to transform and improve how primary care is delivered and paid for in America. The effort, the Comprehensive Primary Care Plus (CPC+) model, will be implemented in up to 20 regions and can accommodate up to 5,000 practices, which would encompass more than 20,000 doctors and clinicians and the 25 million people they serve. The initiative is designed to provide doctors the freedom to care for their patients the way they think will deliver the best outcomes and to pay them for achieving results and improving care. CPC+ will help practices move away from one-size-fits-all, fee-for-service health care to a new system that will give doctors the freedom to deliver the care that best meets the needs of their patients.

CMS will accept payer proposals to partner in CPC+ from **April 15 through June 1, 2016**. CMS will accept practice applications in the determined regions from **July 15 through September 1, 2016**. For more information, [visit cms.gov](http://www.cms.gov).

## Events

**Manatt, Phelps & Phillips, LLP** will host a webinar, **“The Legal Challenges of Multi-Provider APMs: Minimizing the Risks of the Volume-to-Value Transition,”** on **April 19, 2016 at 1:00pm**. During the webinar, participants will find out: How are government and private payers implementing APMs? What are the fraud and abuse, antitrust and other legal implications around value-based contracting arrangements between hospitals and physicians? [Register here](#).

The **Mathematica Center for Studying Disability Policy** is sponsoring a **policy forum and webinar on April 21<sup>st</sup> at 11:45am**. The event is titled “New Frontiers in Coordinating Housing and Medicaid Services for People with Behavioral Health Conditions.” During the event, participants will learn about why housing is an important part of the efforts to treat high-need, high-cost Medicaid beneficiaries, and innovative state efforts to better coordinate health and housing services for people with behavioral health conditions. To register, [click here](#).

The **Institute for Healthcare Improvement** is hosting an intensive three-day seminar, **Transforming the Primary Care Practice, from June 13<sup>th</sup> to June 15<sup>th</sup> in San Diego**. The seminar will provide leading edge insight on how to: implement key changes that lead to effective, high-quality, person-centered care; apply tested tools for forecasting appointment demand and tracking appointment supply as you work to improve access to care; identify opportunities for improving care delivery through partnerships with patients and families within your practice; use a set of key metrics to guide your empanelment, access, and continuity journey; and develop pragmatic ideas for change to achieve your goals and objectives. To register, [click here](#).

## Resources

### Mathmatica Podcast on Changing Role of Public Health

In conjunction with **National Public Health Week**, a new podcast from **Mathematica Policy Research** highlights the changing role of public health programs in an era of health care reform. With more individuals gaining access to health services, public health agencies are in a position to redirect resources to other public health functions. The podcast features Mathematica Senior Vice President and Director of Health Research Christopher Trenholm and Senior Fellow Judy Bigby. [Click here](#) to listen to the full podcast.

### Bailit Health Report on State Medicaid Programs Improving Value

**Bailit Health** released a report titled **“The Role of State Medicaid Programs in Improving the Value of the Health Care**

**System.”** The report documents the key activities that states are engaged in to transform payment at the individual provider level through the use of alternative payment models. It provides the reader with a detailed look at the models in use by state Medicaid programs, and the challenges and opportunities state Medicaid programs face in improving the value produced by the health care system. To read the full report, [click here](#).

### **Bailit Health on Integrating Public Health and Health Care**

In a new issue brief, **Bailit Health** investigates practical approaches that state agencies have employed in order to better integrate public health and health care delivery as a means of improving health and value. The brief, titled “**Integrating Public Health and Health Care: Getting Beyond the Theory,**” is organized according to seven features of integration, and is accompanied by three case studies providing additional detail to some of the examples cited in the brief. Read the full brief [here](#).

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If you have comments or suggestions for future newsletters, please contact [dc\\_sim@dc.gov](mailto:dc_sim@dc.gov).