

Wednesday, October 18, 2017

PCAG Member Attendees	Mark Peluso, Tim Tanner, Fay Homan, Robert Penney, Deborah Wachtel, Christina Harlowe, Michelle Wade, <i>Paul Reiss, Valerie Rooney</i>
GMCB Attendees	Pat Jones, Michele Lawrence
Other Attendees	Julia Shaw, Office of the Health Care Advocate; Susan Gretkowski, MVP; Representative Charles Conquest
<i>*italics denote phone participation</i>	

1. GMCB updates/PCAG Updates
 - a. November meeting date scheduled for 11/15/17; let group know that the GMCB Advisory Committee meeting occurred on 10/18/17; announced traveling Board meetings on 10/30/17 (Bennington) and 10/31/17 (Brattleboro).
 - b. **Action Items:** GMCB will inform group of next advisory committee meeting dates.

2. Identifying circumstances in which existing reporting requirements for primary care professionals may be replaced with more meaningful measures that may require minimal data entry
 - a. Pat Jones discussed the measures crosswalk with the group. It was noted that there is significant alignment among All-Payer Model (APM) measures, the group was reminded that under the APM Agreement between the State and CMS, these measures are to be collected and reported at the statewide level, and in some instances the ACO level, but not the practice level. ACOs will assist with data collection for those measures that need medical record review. PCAG members had questions and concerns about several measures, which led to more detailed discussion.

Julia Shaw described the perspective of the Office of Health Care Advocate (HCA) regarding quality measurement, and presented additional measures proposed by the HCA. The HCA recommends a variety of measures that encompass various populations, as well as prevention, process and outcome measures. The HCA has proposed patient experience surveys at the point of care. PCAG members expressed concern about the potential administrative burden on practices of collecting such data. Julia suggested that data could be collected electronically soon after the office visit (e.g., via email or text message), and suggested that perhaps the cost could be covered by investments by the ACO(s) or the State.

PCAG members noted that on there are additional measures required of FQHCs. The need for staff and financial resources makes measurement requirements seem like “unfunded mandates.” Some members commented that it appears that primary care practices might be losing patients to urgent care centers; urgent care centers do not have all of the measurement requirements that primary care practices have. Some members also commented that it appears

that measurement burden falls disproportionately on primary care, as opposed to hospitals or specialists.

- b. **Action Items:** GMCB will indicate which measures on the crosswalk require medical record review.

GMCB will share measure selection criteria from the ACO Shared Savings Program measure development process. GMCB will share MSSP measure specifications for measures of interest.

3. Workforce Discussion (per Board Meeting on 9/20)

- a. Dr. Fay Homan is drafting a bulleted list of ideas to alleviate workforce pressures, to send to GMCB Chairman Mullin. Some of the suggestions include: re-starting psychiatric nurse practitioner (NP) training in Vermont, collaborative practice agreement with a physician (needed in VT for APRNs to diagnose, treat and prescribe¹), Vermont Board of Nursing Compact agreement (allows recognition of a nursing license between member states²), lack of reasonable payment for pediatric call, tax benefits for practices that serve as preceptors for primary care and NP students, and acute emergency relief.

Action Items: Deb Wachtel will send bullet points outlining the psychiatric NP program to Fay. Group to research statutory language from other states that provide tax benefits to practices that precept primary care and NP students.

4. Legislative Agenda/Planning

- a. Michele reminded members that the legislative session is fast approaching, Senate introduction deadline is 12/8/17; House deadline is in January. Members agreed that the next meeting should be focused on legislative proposals.
- b. **Action Items:** Michele to send existing bills (H. 342 & H.346) to members for review/edits. Group members to prepare new legislation for review and feedback at 11/15/17 meeting.

5. Adjourn

The meeting adjourned at 7:10 P.M.

¹ <https://www.rwjf.org/en/library/articles-and-news/2010/04/nurse-practitioner-physician-collaboration-requirements-by-state.html>

² <https://www.ncsbn.org/nurse-licensure-compact.htm>