



TABLE Feedback

STAKEHOLDER FORUM WRAP-UP SESSION - ROUNDTABLE DISCUSSION TOPICS

Instructions: With the other participants at your table, review and discuss each recommendation and any pre-populated issues and considerations listed below. These issues and considerations were provided by stakeholders as items for the State to review if the recommendation were to be adopted. Identify any additional issues or considerations by listing them in the spaces provided below. Feel free to reference other helpful information – including similar programs in other states, best practices and pilot projects.

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>Prioritize HIT work & be certain that it continues to move forward.</i> 7. <i>Find ways to encourage providers to stay providing & care</i>
Enhance health literacy and personal stake in care <i>To utilize patient educators who may be non-physicians must incent a</i>	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. <i>Follow-up after patient receives info to see if following.</i> 6. <i>Info must be accessible + understandable - 5th grade + below reading level</i>

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none">1. Set specific quality outcomes to be measured.2. Investigate best practices of integrating physical and behavioral health.3. Review current potential barriers due to separate contracts.4. Align financing around care for the whole person.5. <i>Find way to incent wellness program. Convince legislature to fund up front.</i>6. <i>Maximize</i>
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none">1. Determine current level of activity with EHR.2. Brainstorm with providers about obstacles with using EHR/e-prescribing.3.4.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none">1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium.2. Utilize current benefits counselors more and expand their network so they can provide support.3. <i>Must incentivize employers to employ + then provide assistance to employees to be able to continue working.</i>4. <i></i>5. <i>Tap faith based organizations or retirees to be work coaches.</i>6. <i>Provide child care.</i>



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Theme: Integrated, Whole-Person Care	
Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. Don't send away federal innovation grants! 7. Don't politicize health.
Enhance health literacy and personal stake in care	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. Tell the truth about mental health care. Psych meds help some people but harm others + may be <u>increasing</u> disability. 6.

Brownback →

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. <i>Improve mental health care outcomes by helping people get off psych meds.</i> 6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. <i>use Networks of Care</i> 4. <i>so people don't get on tons of conflicting meds</i>

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. <i>Good idea</i> 2. Utilize current benefits counselors more and expand their network so they can provide support. <i>Good idea</i> 3. <i>Expand ticket to work</i> <i>Move mental health peer support centers</i> 4. <i>Expand the definition of disability so it's only viewed as a barrier to work not a permanent exclusion.</i>



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Theme: Integrated, Whole-Person Care	
Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. <i>Either provider or state takes risk, make sure to transition these processes</i> <i>incentives for process not just health outcome</i> 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>Make certain that there is evaluation built into the budget</i> 7. <i>Preventative care</i> 8. <i>Consider alternative funding sources (ex: the very rich - incentives that help starco's?)</i>
Enhance health literacy and personal stake in care <i>locates</i> <i>Recognize that traditional case management needs to be inclusive of who are not usually part of the definition</i> <ul style="list-style-type: none"> - RN - PAs - Pharmacy - Etc. <i>Have them help with persistence i, compliance</i>	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). <i>- Care coordination should be individualized</i> 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. <i>Fit the individual - different care coordination for different groups. Engage the individual with a group that understands what they are going through and can help them - that is how you get people to get their care</i>
	<ol style="list-style-type: none"> 6. <i>Decrease Emergency Room through the use of intermediary hospital services</i>

7. What about people who refuse care?
 8. Not everyone can work with their care manager over the phone - will need a person who is part of their lives

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. Leverage all resources including federal grants ★ 6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. 4.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. 4.



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Theme: Integrated, Whole-Person Care

Recommendations

Issues and Considerations

Implement patient-centered health homes

1. Create an incentive based funding mechanism to develop a care coordination infrastructure.
2. Build a care coordination infrastructure that ensures communication and information travels across all provider types.
3. Review reimbursement schedule to determine what services are not getting reimbursed.
4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts.
5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require?
6. *Include mental health services in whatever medical home model is created.*
7. *Include dental services.*

Enhance health literacy and personal stake in care

1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans).
2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). *-enhance this!*
3. How do we integrate public health - the local health departments across the State?
4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes.
5. *Explore use of medical savings accounts.*
6. *Need to address the "whole" person. Basic needs such as jobs, food etc. must be met before families can focus on healthcare.*

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. Use case managers to integrate. But we need to incentivize these people i.e. pay, workload. 6. (pay for time on road)
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. - VA Good model 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. Funding! 4. Utilize pharmacists more. They are the educator many times.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. Reevaluate work incentive benefit. 4.



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Theme: Integrated, Whole-Person Care	
Recommendations	Issues and Considerations
Implement patient-centered health homes <i>Conceptual</i>	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>Nothing more to add</i> 7.
Enhance health literacy and personal stake in care <i>Learning Library</i>	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. <i>Utilize DVDs to communicate in lieu of Dr. office visits</i> Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. <i>Rebuild ERS structure as a means to distribute information</i> 6. <i>Call center to flu w/ patient care</i>

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality <i>AIMO model</i>	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. 6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. <i>ISS personal</i> 4. <i>user barriers</i>

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. <i>fear of out of pocket medical</i> 4. <i>offer tax credits for employers</i>



only 1/4 table.

- Agency in place

Agencies Disabled

- chronic disease management
Risk Pooling w/ SEBHP?
- Rationing?

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Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. <i>Care coordination costs \$, need to have a funding mechanism that works. Model isn't the same for all populations.</i> 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. <i>Think about capacity expansion more broadly than FQHCs or Capital.</i> 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>File for federal funds to manage people with multiple chronic conditions. Requires a state plan amendment.</i> 7. <i>Include oral health & vision in care coordination.</i>
Enhance health literacy and personal stake in care	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). <i>Essentially a nurse hotline for consumers to call before accessing care.</i> 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). <i>Prefer to see incentives rather than punishment.</i> 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. <i>low-literacy, non-English speaking patients are important to remember.</i> 5. <i>Health coaches for individuals with severe disabilities.</i> 6.

350,000 ppl - 7k/ participant

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. <i>if you carve in mental health, beware of cost-shifting & unanticipated/pemorse</i> 3. Review current potential barriers due to separate contracts. <i>incentives</i> 4. Align financing around care for the whole person. <i>need to integrate actual care, not just financing. One doesn't lead to the other.</i> 5. <i>It's really complex to set rewards correctly so as to not reward bad behavior.</i> 6. <i>Start with what we know works & progress organically from there.</i>
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. <i>Uncertainty makes it hard to take that leap - moving target.</i> 3. Develop a financing structure to advance EHRs. 4. Leadership from the state.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. <i>In some ways, we have that.</i> 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. Education, transportation, housing, accessibility, language barriers, job opportunities 4.



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Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. 7.
Enhance health literacy and personal stake in care	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. <i>Involvement e school level.</i> 6.

Theme: Integrated, Whole-Person Care

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Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. 6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> ① Determine current level of activity with EHR. ② Brainstorm with providers about obstacles with using EHR/e-prescribing. ③ Reconsider taking back the Federal monies that has been flagged for insurance commission ④ for HMO use.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. ③ Tax breaks to corporations that hire ID, Medicaid recipients. 4.



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Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. <i>(Community Transition Programs run by CPS) served through multi agencies</i> 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>Develop CPS run Community Transition Programs, decreasing hospitalizations, increasing personal responsibility and accountability.</i> 7.
Enhance health literacy and personal stake in care	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. <i>(why not CPS's)</i> Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. <i>Have Medical CPS's that work with doctors to ↑ patient health, decrease long term complications and ↑ patient compliance.</i> 6.

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. <i>CPS R an Community transition programs.</i> 6. <i>Use the EBT food stamp program model to establish a unified medical system to eliminate the "Silio" effect on patient care.</i>
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. 4.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. <i>Eliminate the SSI criteria in Working Healthy to open this program to a broader disabled population. This will increase the "return to work" ratio of working disabled."</i> 4. <i>Provide CPS support to those individuals who are wanting to work but frozen in the "fear" of losing benefits.</i>



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Recommendations	Issues and Considerations
<p>Implement patient-centered health homes</p> <p><i>Wholistic Standards</i></p> <p><i>- recognizing complexity of care</i></p>	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure 2. Build <i>TP</i> a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>TP</i> Technology access to all providers (interoperable) 7. Reimbursement or incentivized <i>TP</i> Incentives for care coord
<p>Enhance health literacy and personal stake in care</p>	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. Education <i>Education of lay people to ↓ expectations</i> 6. <i>Identify steps (incentivize)</i>

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Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. <i>EHR - interface</i> ^{Universal} 6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. <i>incentivization</i> ^{Universal} to <i>interface</i> 4. <i>or</i>

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. 4.



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Recommendations	Issues and Considerations
<p>Implement patient-centered health homes</p> <p><i>Language Incentives</i></p> <p><i>EM Incentives</i></p> <p><i>Care Coordination Incentives</i></p>	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>Remember that 70% of Medicaid cost due to elderly + disabled</i> 7. <i>⇒ target these populations</i>
<p>Enhance health literacy and personal stake in care</p>	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. <i>realistically elderly + disabled probably stuck in homes or long-term nursing ⇒</i> 6. <i>changes here are necessary -</i>

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. <i>North Carolina Community Care - Program -</i> 6. <i>Sounds interesting & apparently saves \$ Physician led</i>
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. 4.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. <i>great idea if employer still offer health benefits</i> 4. <i>many employers are no longer offering health benefits</i>



STAKEHOLDER FORUM WRAP-UP SESSION - ROUNDTABLE DISCUSSION TOPICS

Instructions: With the other participants at your table, review and discuss each recommendation and any pre-populated issues and considerations listed below. These issues and considerations were provided by stakeholders as items for the State to review if the recommendation were to be adopted. Identify any additional issues or considerations by listing them in the spaces provided below. Feel free to reference other helpful information – including similar programs in other states, best practices and pilot projects.

Theme: Integrated, Whole-Person Care	
Recommendations	Issues and Considerations
<p>Implement patient-centered health homes - system of care - <i>7 dif. standards to quality - more coordinated, not fragmented.</i></p>	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a <u>care coordination</u> infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>technology access to providers -</i> 7. <i>incentives for health care coordination</i>
<p>Enhance health literacy and personal stake in care</p>	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. 6.

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none">1. Set specific quality outcomes to be measured.2. Investigate best practices of integrating physical and behavioral health.3. Review current potential barriers due to separate contracts.4. Align financing around care for the whole person.5.6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none">1. Determine current level of activity with EHR.2. Brainstorm with providers about obstacles with using EHR/e-prescribing.3.4.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none">1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium.2. Utilize current benefits counselors more and expand their network so they can provide support.3.4.



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Theme: Integrated, Whole-Person Care	
Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. <i>include education system in care coordination</i> 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. <i>- incentivize regular collaborative mtgs.</i> 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects <i>in KS</i> (e.g., FQHCs) <i>nationally</i> to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? <i>minimal, common-sense requirements would be good; not irrelevant or redundant (like childcare licensing regs are currently.)</i> 6. 7.
Enhance health literacy and personal stake in care	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). <i>ongoing, consider pilot programs in other states</i> 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? <i>or utilize entity like aging & disability resource center to encompass information for FE, MRDP, PD, TA, etc, for</i> 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. <i>individual & family caregivers</i> 5. 6.

Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. - consider how to duplicate results of working healthy program. 5. 6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. - client access to medical chart to empower client to make health choices, * 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. done already, need common, interfaced software 3. e-prescribing could be used to compare prescriptions for a patient to avoid negative reactions of multiple prescriptions. 4. must be available in laymen's terms, not Doc-Talk.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. consider income changes + alter client obligations accordingly. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. 4.



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Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>Transportation Telemedicine Liability Issues</i> 7. <i>Sharing resources After Hrs</i> <i>Mgmt LTC</i> <i>15% Less ER use</i>
Enhance health literacy and personal stake in care	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. 6.

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Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none">1. Set specific quality outcomes to be measured.2. Investigate best practices of integrating physical and behavioral health.3. Review current potential barriers due to separate contracts.4. Align financing around care for the whole person.5.6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none">1. Determine current level of activity with EHR.2. Brainstorm with providers about obstacles with using EHR/e-prescribing.3.4.

Theme: Preserving or Creating a Path to Independence

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Remove barriers to work	<ol style="list-style-type: none">1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium.2. Utilize current benefits counselors more and expand their network so they can provide support.3.4.



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Theme: Integrated, Whole-Person Care

Recommendations	Issues and Considerations
Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. <i>Competency for mental health done locally + not transportation + incarcerated so expensive</i> 7. <i>Transp. seems most fragmented system - medicated people don't have cars + miss appts.</i>
Enhance health literacy and personal stake in care <i>Div. incentives ala BCBS - give \$50. to whoever get yearly eval + lipids done etc</i> <i>60-70% of those w/ sp. of ASD have behavior health needs more so than general population</i> <i>United Way health care grants</i>	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? <i>Use - the schools - great for seeing kids - thru nurses giving immunization + after school programs in health + fitness, etc.</i> 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. <i>Look at highest cost patients + one case manager to look chronically this was done (Star Plus in Houston - this drastically reduced hospital stays.</i> 6. <i>Began ed. in mid school + high school re problem with low birth weight babies + how costly it is + how to prevent.</i>

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Recommendations	Issues and Considerations
<p>Incentivize development of integrated care networks to improve quality</p>	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. <i>managed Long term health care - ABD - 3rd party responsibility for costs. As a private sector initiative to reduce costs + require cost management by 3rd party,</i> 6. <i>everyone operates by same game plan.</i>
<p>Advance provider use of electronic health records (EHR)/ e-prescribing</p>	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. 4.

Theme: Preserving or Creating a Path to Independence

Recommendations	Issues and Considerations
<p>Remove barriers to work</p>	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. <i>Require health care providers to hire disabled + unemployed, even in small % 3-5% - in order to do business in the state.</i> 4. <i>If we move to long term care - eval. the competitive business - in how they do job training & incentives that get them out of work.</i>

5) Continue to work with DD. after K-12 grad. programs. Continuous help keeps them from getting worse & keeps them in the job market.



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Implement patient-centered health homes	<ol style="list-style-type: none"> 1. Create an incentive based funding mechanism to develop a care coordination infrastructure. 2. Build a care coordination infrastructure that ensures communication and information travels across all provider types. 3. Review reimbursement schedule to determine what services are not getting reimbursed. 4. Look at other pilot projects in KS (e.g., FQHCs) to understand lessons learned and financial impacts. 5. Utilize tools that have been developed and certification processes (e.g., NCQA, Joint Commission). What type of certification (if any) will the State require? 6. Use CMHCs as health homes for SPMI population. 7.
Enhance health literacy and personal stake in care	<ol style="list-style-type: none"> 1. Identify best practices to educate population about when and where to access care (e.g., seek out lessons learned from providers and health plans). 2. Implement case management structure to assist/promote coordination of care and services (e.g., facilitate health prevention and screening). 3. How do we integrate public health - the local health departments across the State? 4. The providers' role in fostering health literacy among patients is an important factor to adherence and improved outcomes. 5. Fund broad-based wellness campaigns to encourage exercise & healthier eating. 6. Create incentives for providers to promote wellness. 7. Create incentives for consumers to engage in wellness programs.

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Incentivize development of integrated care networks to improve quality	<ol style="list-style-type: none"> 1. Set specific quality outcomes to be measured. 2. Investigate best practices of integrating physical and behavioral health. 3. Review current potential barriers due to separate contracts. 4. Align financing around care for the whole person. 5. <i>Create incentives to increase Medicaid participating physicians</i> 6.
Advance provider use of electronic health records (EHR)/ e-prescribing	<ol style="list-style-type: none"> 1. Determine current level of activity with EHR. 2. Brainstorm with providers about obstacles with using EHR/e-prescribing. 3. <i>Support Federal proposal to coordinate phys & mental health EHRs</i> 4.

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Recommendations	Issues and Considerations
Remove barriers to work	<ol style="list-style-type: none"> 1. Consider a subsidized premium payment program, where beneficiaries continue with some portion of benefits and pay for a portion of the premium. 2. Utilize current benefits counselors more and expand their network so they can provide support. 3. <i>fund more work training for Medicaid recipients</i> 4. <i>fund more incentives for employers to hire ppl w/ dis.</i> 5. <i>more education for employers to demonstrate value</i>

outreach of work provided by ppl w/ dis.

6. Fund more supportive employment.