



Hospital Transformation Program (HTP) Community Advisory Committee (CAC) Meeting Notes

Aug. 16, 2021 from 3 -4:30 p.m.

Via [Zoom](#)

HTP CAC members in attendance: Mark Levine, Isabel Cruz, and Dede de Percin.
(Allison Neswood couldn't sign in.)

HCPF Staff in attendance: Matt Haynes, Joe Sekiya, Cynthia Miley and Karola Cochran.
Others in attendance: Mattie Brister, Shaunalee Fruit, and Catherine Snider.

1. Call to order and introductions -Neswood - 3 -3:03 p.m.

The meeting was called to order by Mark Levine at approximately 3:10 p.m.
Allison Neswood attempted to sign in and call in but couldn't attend.

2. Approve meeting minutes from June 21, 2021 - 3:11 -3:11 p.m.

The meeting minutes were sent out separately and will be approved through email.

3. HCPF Presentation Department Updates - 3:12pm -3:45 p.m. -Haynes

- a. Hospital Quality Incentive Payment (HQIP) Update

Haynes reviewed the HQIP Measures Development Cycle, then pointed out the timeline for developing the 2023 measures.

The recommendation is to leave the measures as they are, with no new measures for 2023.

Hospitals are dealing with COVID and the new variants, as well as staffing shortages. 5 new measures introduced in 2021 as 4 that were slated for 2020 introduction were delayed due to COVID. Those measures are: 1. Reduction of peripartum racial and ethnic disparities, 2. Sepsis, 3. Antibiotic stewardship, 4. Handoffs and signouts, and 5. Zero suicide. Hospitals are working to get these measures in place.

The focus for 2023 will be on clarifying and streamlining the reporting requirements.

The first touchpoint with this is today with the HTP CAC. There will be subsequent touchpoints for measure specification details and measure details finalization at future meetings.

Cruz asked what are the changes between 2021 and 2022?
Haynes replied that they can be found in the measure details.

b. HTP Application Review Oversight Committee (AROC) Debrief

Haynes reviewed the application process. It is a five-step process from application submission, review and scoring of applications, request for more information from hospitals as applicable, review and scoring of application resubmission, and finally to submission of applications review findings to the Department of Health Care Policy & Financing (the Department).

The purpose of the AROC is to evaluate the process implemented by the Department to ensure fair and equitable scores were issued and applications were complete. Committee Composition was six members (state executive branch, Regional Accountable Entity (RAE), consumer advocate, professional trade group, business community and public health organization) The process: Application cover sheets and final applications made available to members.

Results: no member indicated disagreement with major concerns; some agreed with minor concerns and shared brief comments.

Hopeful comments from the committee:

Reviewers noted that hospital systems often had same, or similar, information across all hospitals. Reviewers noted some instances where community engagement failed to include the whole community versus just other clinical organizations. One member shared being hopeful about hospital approaches to avoid emergency department visits in the first place versus hospital readmission reduction. One member shared the perspective that hospitals working together may positively leverage the experience of their peers and accelerate learning.

Full participation was achieved. All 83 hospitals submitted applications by the April 30 deadline. All 83 applications had passing scores and have been approved by the Department for participation in HTP.

Next steps: Application approval letters will be sent next week. Implementation plan submission period is Sept. 1 through Sept. 30, 2021. The implementation plan says who does what and when.

4. HTP CAC Board Next Steps - 3:45 – 3:50 p.m. -Levine

At this time, without Neswood, we can put this discussion on hold.

We do have a smaller informal group that is meeting concerning hospital

neighborhoods. Please join if you are interested.

Cochran added there are hospital lists that have been shared with the HTP CAC to be used to track community engagement. The group is encouraged to use the lists.

Levine - We are concerned about community engagement for minority groups. We are also concerned with reengineering hospital engagement. Some of the hospitals combined their community engagement meetings and there weren't enough details in the larger meetings.

5. Adjourned by Levine - 3:50 p.m.
6. Next meeting scheduled for Sept. 20, 2021 at 3 p.m..