Happy New Year! We are looking forward to an exciting and productive 2010. You are receiving this newsletter because of your valued involvement in the Maine Health Management Coalition (MHMC) or MHMC Foundation. This monthly Member Update is designed to keep you and your colleagues informed about all MHMC initiatives.

Thank you for your continued support of the Coalition.

Sincerely,

Elizabeth Mitchell, CEO

Action Items

View MCMH’s Web Update
The Maine Health Management Coalition hospital pages will be updated January 15, 2010. For the first time, the website will include information on patient falls and infections. New information and ribbon calculations will be provided on our website at www.mhmc.info.

Mark Your Calendar to Attend: Transitions to Reformed Payment Presentation January 28, 2010
Harold D. Miller, Executive Director of the Center for Healthcare Quality and Payment Reform, and highly rated speaker at the Coalition's October 2009 Symposium will present a road map to payment reform on January 28, 2010 at 1pm at the Hilton Garden Inn in Freeport. All are welcome, please email Celine Kuhn at celinebk@gmail.com if you plan to attend. To learn more about Miller’s work go to www.CHOPR.org.

Hear MMC’s Doug Salvador’s Interview with IHI
Tune in to the Institute for Health Care Improvement's (IHI) delayed broadcast of its new free talk show program to hear Maine Medical Center's Doug Salvador, MD talk
about the role of the Patient Safety Officer and the importance of a patient safety culture inside hospital settings. Go to www.ihi.org to listen and learn and while there note the other programs soon to be held.

Pass Along This Job Posting

The Coalition is currently seeking a detail oriented, quality loving individual to work part-time to help keep PTE information up-to-date. See the mehmc.org website for a full job description.

Secure Your 2010 Health and Productivity Forum Discount

If you register today for the 2010 Health and Productivity Forum in San Antonio, Texas you will receive an early bird price break. Registration materials and an agenda may be found at www.ibiweb.org

PTE - Physicians

The PTE Physician Steering Committee and MHMC Foundation Board recently endorsed the continued use of PTE "green ribbons" as an option for primary care physician practices to receive recognition for their quality of office systems and clinical care if they are not eligible or currently able to apply for national (blue ribbon) recognition. Current PTE green ribbons (as displayed on www.mhmc.info) are due to expire on March 31, 2010; with the recent decision by the Steering Committee, the PTE program will re-introduce a system for practices to locally submit clinical data, and re-establish criteria for awarding green ribbon recognition. In determining the criteria for awarding green ribbons for diabetes and cardiovascular disease, the PTE Physician Steering Committee reaffirmed its commitment to raising the quality of care across the state, and strongly endorsed using the same level of clinical achievement for green ribbons that is used in the national (e.g. NCQA Physician Recognition) programs. Physician leaders from groups across the state committed to helping their practices attain PTE recognition, and expressed support for the goal of retaining the current number of practices with blue and green ribbons in 2010 as there were in 2009, even though the program is moving to higher levels of achievement for recognition. The MHMC is in process of hiring a part-time PTE Program Administrator to help market and administer the PTE recognition program.
PTE - Hospitals

The Pathways to Excellence Hospital Steering Committee and its workgroups have been working diligently through 2009 to enhance public reporting for the hospital initiative and they are preparing for an equally busy year in 2010. Click here to read more.

**New Committee to be Formed to Look at Hospital Measurement Weighting**

At its last meeting the Foundation Board discussed their interest in an overall review of the PTE Hospital public reporting process given increased use of the measures and resulting tension among members. At the last Steering Committee meeting, Elizabeth Mitchell shared plans to organize a PTE Hospital retreat in the first half of 2010 to consider in more depth the issues being raised about measure selection, including statistical significance and weighting of measures and most importantly, balancing fairness to providers with fairness to consumers. The Foundation Board supports an overall review but does not want to 'retreat' on any of the progress made to date. As part of that review, MaineHealth presented an RFP proposal to the Foundation Board to hire an independent consultant to advise on measures and offered financial support for that effort. The Foundation Board will work with MaineHealth to ensure that the RFP reflects the Board's priorities.

To facilitate this process of finalizing the RFP and directing the overall PTE Hospital review, the Foundation Board agreed to appoint a PTE Hospital Review Subcommittee which will be an ad hoc group of PTE, Foundation Board and consumer members of the Foundation and will meet for approximately six months. If you are interested in participating on the Subcommittee please contact Elizabeth Mitchell or Sue Butts-Dion as soon as possible.

Draft minutes from the most recent PTE Hospitals meeting can be found in the Resource & Document Library at www.mehmc.org.

Contact: Sue Butts-Dion
Next meeting: February 25, 2010 12:30-3:00pm
Location: Maine Medical Association
User Group members are completing surveys about their wellness and benefit design priorities to inform our work for 2010. No meeting has been held since the last Member Update but members are looking forward to a review of the evidence on what makes successful worksite prevention programs work, complied by Tom Downing and Dean Paterson, of MMC, at their next meeting in Falmouth.

Contact: Nancy Morris
Next meeting: January 21, 2010 8:30-10am
Location: Freeport Community Center (Please note a new location!)

Payment Reform/Health Action Collaborative (HAC)

**State Employee Health Commission Approves Transformational Payment Reform Pilot**
On January 14, the State Employee Health Commission met and entertained a proposal from Maine General Health to enter into a partnership to develop and support a primary care based Accountable Care Organization to improve quality and appropriate use of effective care while reducing costs of care in the community. After considerable deliberation the SEHC approved the following motion:

'the Commission extend MaineGeneral Medical Center's preferred hospital benefit status for a period determined by the commission pending Commission approval of a pilot project between the State Employee Health Commission and MaineGeneral Health to implement an Accountable Care Organization (ACO) and a supporting payment reform initiative. The terms, condition, and specific objectives of the pilot are to be mutually agreed upon by the Commission and MaineGeneral Health. The Commission and MaineGeneral Health agree to partner with the Maine Health Management Coalition and other parties in order to facilitate the development, implementation and evaluation of the pilot project.'

Click here to read more and to view the presentation.

Contact: Celine Kuhn
Next meeting: January 28, 2010 3-5pm
Location: Freeport Hilton Garden Inn

Patient Centered Medical Home (PCMH)

**American Academy of Family Physicians' Adopts Accountable Care Organization (ACO) Principles with Medical Home at its Base.**
Public Policy

**Payment Reform Policy Recommendations to be Presented at MHMC’s Health Action Collaborative Meeting**

As part of their payment reform work, the Maine Health Management Coalition commissioned a review of current policy issues likely to be encountered as payment reform efforts proceed. Early results were presented at the December HAC meeting and further results and recommendations will be shared on January 28.

After a review of national and state level efforts and regulatory environments, authors Barbara Shaw, JD and Kim Fox, MPH have identified the following areas to be considered: antitrust enforcement of new provider networks and potential for state level antitrust immunity; Stark rules and their implications for capitated arrangements; medical malpractice reform strategies and enterprise liability; transparency; and requirements for financial and clinical integration.

The report will also include a summary of projected federal reform’s impact on Maine’s insurance market. For questions, please contact Elizabeth Mitchell at emitchell@mehmc.org.

**Draft Payment Reform Recommendations Released by Advisory Council for Health Systems Development**

Draft recommendations to the State Legislature on payment reform have been released for review and public comment. The ACHSD spent the past 6 months studying payment reform models and options for Maine and the optimal role of State Government in supporting reform. The report states, 'In fulfilling its charge, the Council has found unprecedented agreement among policymakers, payers, purchasers, providers and consumers that fundamental reform is needed to support safe, effective and efficient patient-centered care...Our traditional fee-for-service approach to payment creates financial incentives to provide more costly services but does not provide adequate incentives to improve the efficiency and quality of care and keep people healthy.'

Recommendations include that the Legislature adopt a set of core principles to guide payment reform and that,'The Legislature encourage multiple community-based pilots of payment reform that will enable us to learn, in a controlled environment, about models that work for both patients and providers and which, alone or in combination, move us toward achieving our core principles.' It remains unclear how these recommendations would be reflected in Legislation. To read the full report, please click on the following link:

http://www.mehmc.org/index2.php?option=com_docman&task=doc_view&gid=325&Itemid=24
National Updates

DOL Issues ARRA COBRA Model Notices to Aid Compliance with Subsidy Extension Requirements

On January 11, the Department of Labor (DOL) issued model notices (http://www.dol.gov/ebsa/COBRAmodelnotice.html) to help plans comply with the recent extension of the COBRA premium subsidy assistance program. As we previously reported, the 2010 Department of Defense Appropriations Act (DOD Act), signed by President Obama on December 19, 2009, provided an extension of the COBRA subsidy program originally established under the American Recovery and Reinvestment Act of 2009 (ARRA).

The DOD Act provided a two-month extension of eligibility for COBRA coverage, from December 31, 2009, to February 28, 2010, and a six-month extension of the duration of the premium subsidy period, from 9 months to 15 months. ARRA, as amended by the DOD Act, requires that plans notify certain current and former participants and beneficiaries about the available subsidy and the extension. Each model is designed for a particular group of qualified beneficiaries:

- The Updated General Notice is for all qualified beneficiaries (not just covered employees) who experienced a qualifying event at any time from September 1, 2008, through February 28, 2010, regardless of the type of qualifying event and who have not yet been provided an election notice.
- The Premium Assistance Extension Notice is for certain individuals who have already been provided a COBRA election notice that did not include information regarding the changes made to premium reduction provisions of ARRA by the DOD Act.
- The Updated Alternative Notice is for individuals who became eligible for continuation coverage under a state law.

On January 11, DOL also released various outreach materials related to the COBRA extension program. The materials posted on the DOL Employee Benefits Security Administration's COBRA Web site (http://www.dol.gov/ebsa/COBRA.html) include:

- An updated fact sheet
- A frequently asked questions (FAQ) document for employees (Questions 13-15 address the notices plan administrators must provide under the ARRA amendments)
- A job loss poster
- A program flyer for employees
- A program flyer for employers
- A flyer on applications for review

(Sources: American Benefits Council's Benefits Bytes; Congress Daily Health Beat; Congressional Quarterly; Novartis Health Policy Newsletter; Washington Post)

Federal Healthcare Reform Updates

Quick summaries of important reform legislative provisions and comparisons can be
Recent News & Research

Quality and Efficiency Improvement Tips for Hospital CEO's:  
http://www.healthleadersmedia.com/breakthroughs/

Accountable Care Architect Speaks in Portland
The rising cost of health care, increases in the prevalence of chronic disease, disparities in quality and safety of patient care, and the potential collapse of primary care were all cited as the reasons why sweeping health care reform and system redesign are of paramount importance according to Dr. Elliott Fisher of the Dartmouth Institute for Health Policy and Clinical Practice.  To read more please click here.

MHMC Election Results
Wayne Gregersen of The Jackson Laboratory in Bar Harbor was selected by the Board to fill the open Large Employer slot on the Executive Committee at the Board's December meeting.
Donald Krause, MD of St. Joseph Hospital, Bangor and Chris McCarthy of Bath Iron Works (BIW) were selected to co-chair the PTE Hospital Tri-partite Committee.

2010 Marketing Plan Unveiled at January Executive Committee Meeting
The Coalition's new Marketing and Communication Manager, Nancy Morris reviewed her plan to engage three audiences in the upcoming year: consumers, employers and clinicians and to remind them that they all have a role in health care quality. Morris is being guided by the research commissioned by AHRQ noting how to convey the 'quality varies' message to consumers, as well as evidence of successful approaches utilized by the Go Green movement and others. The plan's goal is to encourage clinicians to deliver evidenced based care in a safe environment, while leading employers to reward that quality care through evidenced based plan design and reimbursement, and patients to follow the evidence based recommendations given to them.

The Executive Committee endorsed the aim of enlisting non-government advocacy groups to help spread the word about the Coalition's transparency efforts and supported the use of three main themes developed by the Aligning Forces for Quality partnership.

Keep your eyes open for print ads that will begin running in the Forecaster this February and notice of a seminar entitled College for Value Based Purchasing to be held June 28 and 29.
For minutes of the full Executive Committee meeting login to mehmc.org and click here.

For full minutes of the January Foundation Board meeting click here.

Free Lean Seminar Invitation for MHMC Members
The Lean Quality Improvement method is credited with helping Toyota develop to the largest, most highly revered automobile manufacturer in the world but did you know that progressive clinical operations have been employing the Lean system to improve their operations too. The not-for-profit Altarum Institute is holding a free half day seminar on Lean in Health Care Settings on February 18, 2010 from 9am-1pm in their Portland office and has invited Coalition clinical members to attend. Space is limited so call early to reserve your seat and a box lunch. Reservations can be secured by contacting Dr. Holly Korda at holly.korda@altarum.org

Core Set of Child Health Care Quality Measures for Medicaid and CHIP Posted
See: http://www.ahrq.gov/chip/corebackgrnd.htm

National Quality Foundation Voting on 70 Performance Related to Electronic Medical Records from Multiple Sources
For more information see: www.qualityforum.org and look for Care Coordination Practices and Measures

Eastern Maine Medical Center Wins National Patient Safety Leadership Award
EMHS was chosen from a nationwide pool of applicants by a panel of judges representing corporations, patient safety and government organizations. Applicants were selected based on a set of criteria designed to measure the ways a health care system’s leadership created safety-centered cultures including: system-level commitment; board and senior leadership involvement; system-wide alignment of patient safety resources and goals; improved patient outcomes; and transparency in public reporting.

Business Week Magazine Says Care Coordination, Worksite Wellness Programs and Primary Care Among Top Ways to Trim Nation's Health Care Tab
Click here to view video story.

Don't forget to visit the Resource & Document Library to read the latest meeting minutes and other pertinent information.

About MHMC
The Maine Health Management Coalition (MHMC) is an employer-led partnership among multiple stakeholders working collaboratively to maximize improvement in the value of
healthcare services delivered to MHMC members' employees and dependents. For more information about MHMC, visit www.mehmc.org.

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