State of Oklahoma

Oklahoma State Innovation Model (OSIM) Model Design

Stakeholder Engagement Plan
May 15, 2015

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NOTE:

The Oklahoma State Innovation Model (OSIM) team submitted the OSIM Stakeholder Engagement Plan on Monday, March 30, 2015 per the deadline set by the Centers for Medicare and Medicaid Services.

Section 1 of this document is the originally submitted Stakeholder Engagement Plan. This section also incorporates the OSIM team's responses to feedback provided by Deloitte Consulting (Deloitte), from the discussion between the two parties on April 13, 2015.

Section 2 of this document is an addendum to the Stakeholder Engagement Plan prepared by Deloitte. The addendum incorporates an updated strategy and stakeholder list that the OSIM team has discussed with Deloitte. This section also includes an updated calendar of stakeholder meetings.

Section 1

Stakeholder Engagement Plan

As indicated in the Oklahoma State Innovative Model (OSIM) application, health system transformation in Oklahoma is an important goal. Buy-in from stakeholders is critical to the adoption of payment and delivery model reforms. To achieve health system transformation, stakeholders must be assured of the value of reforms and given opportunities to shape their design. Stakeholder participation provides a critical lever to the implementation of broader system change. Together, OSIM staff, contractors, and stakeholders will work to draft the State Health System Innovation Plan (SHSIP). These stakeholders will include: payers, providers, business communities, state government agencies, tribal sovereign nations, tribal serving entities, consumers and a comprehensive range of other stakeholders. To ensure Oklahoma's model design is viable, sustainable, and representative of all Oklahomans, the OSIM Stakeholder Engagement strategy will take a multi-pronged approach to connect a diverse set of stakeholders to the OSIM project.

Strategies:

1. Leverage the Oklahoma Health Improvement Plan (OHIP) governance structure and Workgroups to ensure representatives with the appropriate subject matter expertise and practical experience facilitate, monitor, and evaluate the various activities and deliverables of the OSIM project.
2. Utilize the Tribal Public Health Advisory Committee to seek feedback and recommendations for the model design from Oklahoma's Tribal nations and partners.
3. Deploy OSIM staff and a Stakeholder Engagement Facilitator (SEF) to work together in the field to engage new communities and stakeholders throughout Oklahoma to solicit more interest, support, and subject matter expertise for OSIM.

Project Management of Stakeholder Engagement

Stakeholder facilitation requires a myriad of experience, logistics, and planning. As indicated in the OSIM Operational Plan, the OSIM project will use the OHIP governance (see Appendix A) to provide structure and accountability to the engagement process. OSIM Leadership (Leadership) comprises Ms. Julie Cox-Kain, Deputy Secretary of Health and Human Services and Senior Deputy Commission of the Oklahoma State Department of Health (OSDH), the four Vice-Chairpersons of the OHIP/OSIM Workgroups, and Mr. Mitchell Thornbrugh, Chief Operating Officer of the Cherokee Nation W.W. Hastings Hospital Leadership will oversee and direct the various engagement activities throughout the state to ensure broad stakeholder support. To achieve this support, outreach efforts will have several modes of engagement that will target stakeholders across the health care spectrum. Leadership will work with technical assistance (TA) consultants and the OSDH staff in the facilitation of the OHIP/OSIM Workgroups. Convening at least monthly to discuss strategies, Leadership will incorporate input from the Workgroups and monitor progress toward OSIM goals and objectives. As meetings and engagement opportunities arise, Leadership will be apprised of these activities and attend stakeholder meetings.

While Leadership will oversee all aspects of stakeholder engagement, OSIM and OSDH staff will be primarily responsible for coordinating and facilitating stakeholder meetings. A Project Director and Project Coordinator were hired in direct support of OSIM; existing OSDH staff will play a supporting role to Leadership, providing additional depth and experience to the model design. Both OSIM and OSDH staff have been collaborating to coordinate efforts to develop an engagement strategy that notifies stakeholders of OSIM meetings, enlists their participation, and solicits their feedback and comments for inclusion in the SHSIP. To prepare for those meetings, multiple timelines and scopes of work were developed to align stakeholder meetings with the overall deliverables of the OSIM project, including the

drafting of the SHSIP. Each SHSIP component has its own timeline and set of OHIP/OSIM Workgroup meetings to support and guide its development. As the OSIM project progresses, each timeline will be populated with specific, public stakeholder meetings; those meetings will be attended by the subject matter experts (SMEs) of the Workgroups and the general public who will provide their input into each deliverable for inclusion in the SHSIP. Meeting times and locations will be sent via email to the Workgroup stakeholders and also published online on OSDH's public website to notify the public.

To convene and host an array of collaborations and meetings within the ambitious time frame, OSIM requires an existing outreach network of community coalitions, educators, and specialists embedded throughout Oklahoma. OSDH's commitment to public health and community-based initiatives has created the requisite framework necessary to put strategic boots-on-the-ground. These workers will help OSIM staff disseminate information about project goals and objectives, assemble stakeholders, and provide regional and community logistics and support to host OSIM meetings. Community health workers and existing public health programs, such as OSDH's Turning Point program and the Partnerships for Health Improvement program, have provided OSIM and OSDH staff with strategic points of contacts and many community-based health initiatives that can be incorporated within the engagement strategy for OSIM. Leveraging these relationships and partnerships will enable OSIM staff to spend more time engaging stakeholders with demonstrated interest and influence in their local health care system.

Throughout the grant year, the OSIM project is incorporating stakeholder and public comment within the various components of the SHSIP. In addition to the various Workgroup and engagement activities described above, the engagement strategy has set aside a virtual and in-person Public Comment period from November 2015 through December 2015 to provide a forum for the public to give feedback and comment on the SHSIP. Leadership will solicit public and stakeholder input, allowing participants to submit comments and suggestions either in person or in writing. Where possible, OSIM Staff and TA consultants will incorporate that feedback into the SHSIP to create an Oklahoma-specific model design.

OHIP/OSIM Alignment

Oklahoma recently completed the Healthy Oklahoma 2020: Oklahoma Health Improvement Plan (OHIP). This bi-decadal plan builds a strategic vision to help Oklahoma achieve dramatic and demonstrable improvement in its overall population health. As an integral part of the overall plan, health care delivery transformation will provide a systemic conduit through which Oklahoma can guide its health care system into a model that improves health, provides better care, and reduces health expenditures for more than 1.2 million Oklahomans. The OSIM planning efforts will utilize and build on prior successful OHIP stakeholder collaborations and will leverage partnerships established over the last five-year planning period to further integrate and subsume the OSIM project into the OHIP structure. These partnerships are formalized through four Workgroups: Health Information Technology; Health Workforce; Health Efficiency and Effectiveness; and Health Finance. Experienced individuals from the public, private, and/or academic sectors had already been selected by the OSDH leadership to serve as Vice-Chairs for the OHIP workgroups. Workgroup leaders continued this role into the SIM grant performance period for the OSIM project.

The OHIP/OSIM Workgroups have already established a network of subject matter experts (SMEs) that have been working together towards improving population health. This shared understanding and vision of payment and health care system delivery is essential to Oklahoma's model design. Each Workgroup has a specific area of focus that is crucial to the transformation process. The Workgroups are composed of

multiple types of stakeholders, and they are dispersed throughout the four groups as their expertise and interest warrants.

From the outset of the OHIP/OSIM Workgroups, Project Managers were assigned from OSDH; OSIM will continue to use their expertise and experience with the workgroups to further facilitate stakeholder involvement. In addition to setting up meetings, creating agendas, and documenting minutes, Project Managers will present OSIM deliverables to the Workgroups to solicit their content analysis and recommendations. This will assure deliverables are refined and broadly incorporate stakeholder feedback into each component of the SHSIP. The OHIP/OSIM Workgroups will continue outreach to physician and hospital groups, mental health centers, private and nonprofit health providers, community health centers, rural health clinics, local public health providers and health professional associations to assure further stakeholder participation in the Workgroups and involvement in OSIM.

OHIP/OSIM Workgroups

Below is an explanation and purpose of the four Workgroups; their designated vice-chairs; goals and objectives; stakeholder composition; subject matter expertise; and proposed OSIM deliverables.

Health Efficiency and Effectiveness (HEE)

I. Purpose
To create a system of outcome-driven healthcare that supports patients and health care providers in making decisions that promote health by emphasizing preventive and primary care and the appropriate use of acute care facilities.

II. Goals and Objectives
To provide guidance in the design of an evaluation plan that identifies specific quality metrics in coordination with healthcare delivery models identified for Oklahoma with a focus on three key outcomes: (1) strengthening population health; (2) transforming the health care delivery system; and (3) decreasing per capita health care spending.

III. Leadership
Rebecca Pasternik-Ikard, JD, RN, MS, Deputy State Medicaid Director, is the vice-chair of the Health Efficiency and Effectiveness Workgroup and contributes her extensive expertise related to Medicaid administration and healthcare policy implementation. Ms. Pasternik-Ikard is able to provide insightful knowledge and context to current and previous Medicaid-related initiatives and programs in the state.

The Project Manager of the HEE Workgroup is Valorie Owens. Ms. Owens is the Manager of Statewide Access to Care Planning within the Office of Primary Care at the Center for Health Innovation and Effectiveness (CHIE) at OSDH. She supervises a team of health planners and research analysts dedicated to long-range strategic planning and data development focused on access to care initiatives. Prior to her work at OSDH, she worked for six years at the Oklahoma House of Representatives analyzing state legislation, executive orders, and administrative rules. Ms. Owens received both her undergraduate and graduate degree from the University of Oklahoma.

IV. Composition of Stakeholders

HEE Workgroup			
Public Oklahoma Department of Human Services Oklahoma Department of Mental Health & Substance Abuse Services (ODMHSAS) OSDH Tulsa City-County Health Department	**Hospital System** INTEGRIS Health **Provider** OU Physicians Variety Care, Inc. **Payer** Oklahoma Health Care Authority **Tribal Nation** Cherokee Nation Absentee Shawnee Tribe of Oklahoma	**Consumer Advocacy** Oklahoma Family Network Homeless Alliance **Academic Medical Center** University of Oklahoma Health Sciences Center Oklahoma LEND (Leadership Education for Health Care Professionals Caring for Children with Neurodevelopmental and Related Disabilities)	**Associations** Mental Health Association Oklahoma Oklahoma Hospital Association (OHA) LeadingAge Oklahoma Oklahoma Academy of Family Physicians

V. Expertise

The University of Oklahoma Health Sciences Center (OUHSC) is a leader in education, research, and patient care. The OUHSC is one of only four comprehensive academic health centers in the nation with seven professional colleges: Allied Health; Dentistry; Medicine; Nursing; Pharmacy; Public Health; and Graduate Studies. Students and residents receive clinical training at on-site institutions, including the OU Medical Center, The Children's Hospital and Veterans Affairs Medical Center. In addition, affiliate training programs are maintained at hospitals and clinics throughout the state.

The Cherokee Nation is the federally-recognized government of the Cherokee people and has sovereign status recognized by treaty and law. With more than 317,000 citizens, over 8,000 employees and a variety of tribal enterprises ranging from aerospace and defense contracts to entertainment venues, Cherokee Nation's economic impact in Oklahoma and surrounding areas is more than $1.5 billion annually. The Cherokee Nation is one of the largest employers in northeastern Oklahoma and is the largest tribal nation in the United States.

Variety Care is a Community Health Center (CHC). CHCs are a vital link to health care for insured and uninsured individuals who have problems getting access to health care services. CHCs provide a broad range of primary and preventative health care services at affordable rates. Their mission is to improve the health of communities that do not have ready access to health care. Officially known as a Federally Qualified Health Center, Variety Care provides access to affordable healthcare services for all family members, regardless of age, medical history, immigration status, or insurance coverage.

LeadingAge Oklahoma represents the full continuum of aging services, from independent housing to nursing facilities. The work of LeadingAge is focused on advocacy, leadership development, and applied research and promotion of effective services, home health, hospice, community services, senior housing, assisted living residences, continuing care communities, and nursing homes. They also provide technology as solutions to seniors, children, and others with special needs.

VI. Deliverables:
Led by the Vice-Chairperson and Project Manager, the HEE Workgroup will be responsible for appraising the State Evaluation Plan prepared by the OSIM Program Evaluation Contractor. The Workgroup will ensure that the Plan incorporates quality measurements, specific health metrics monitors, and evaluation methodologies and strategies. Following a thorough review, the Workgroup will endorse consensus-driven recommendations and analyze the viability of the proposed value-based model(s) that are selected for testing by OSIM Leadership and stakeholders.

Additionally, an Evaluation and Performance Reporting Subcommittee was created within the HEE workgroup. The subcommittee is composed of content experts, such as epidemiologists and informaticians, with the relevant clinical and evaluative public health knowledge. They will assist the in-state evaluation process, interpreting data and providing context and limitations of the data. By contributing their public health database awareness and expertise, the subcommittee will advise and provide guidance on the Population Health Needs Assessment and the In-State Evaluation Plan to assure the best data sources, practices, and resources are identified.

The specific deliverables the HEE Workgroup will be reviewing are:

Population Needs Assessment: Assess the identification and description of statewide health problems, gaps and strengths in services, and interventions to improve the health of Oklahoma.
In-State Evaluation with Quality Metrics: Review the evaluation plan that incorporates quality measurements, addresses health disparities, and provides a means by which to evaluate them to align them with a value-based health care delivery system.

Health Finance

I. Purpose
Transform health care payment models utilizing a multi-payer approach to create a value-based and sustainable health care system available for all Oklahomans.

II. Goals and Objectives
To work with the actuarial contractor to integrate a new value based payment model based on pay-for-success and perform actuarial analysis of OSIM interventions and evaluations.

III. Leadership
Joseph Cunningham, MD, Chief Medical Officer and Vice-President of Blue Cross Blue Shield of Oklahoma**,** will serve as Vice-Chair of Health Care Financing Workgroup. Dr. Cunningham will offer his considerable expertise related to value-based purchasing. He also currently provides his expertise and advice to the operations of the state's Comprehensive Primary Care Initiative (CPCI).

The Project Manager for the Health Finance Workgroup is Brigido Ramirez Espinosa. Mr. Espinosa is the Health Planning Manager for the Health Planning Unit at CHIE and has five years of experience in public health. During his time at the Oklahoma Health Care Authority, Mr. Espinosa worked on multiple Medicaid Management Information System (MMIS) projects, including work on the implementation of one of the nation's first real-time Medicaid eligibility and enrollment system. He received a Master of Public Administration (MPA) from the University of Oklahoma.

IV. Composition of Stakeholders

Health Finance			
Public ODMHSAS OSDH Oklahoma City-County Health Department	**Hospital System** INTEGRIS Health **Provider** Variety Care, Inc. **Payer** Oklahoma Health Care Authority Blue Cross Blue Shield of Oklahoma Community Care HMO State Employees Group Insurance Division (EGID)	**Consumer Advocacy** Oklahoma Family Network Alliance for the Uninsured **Academic Medical Center** University of Oklahoma Health Sciences Center Oklahoma State University School of Health Care Administration **Tribal Nation** Chickasaw Nation Oklahoma City Area Inter-Tribal Health Board	**Associations** Oklahoma Association of Health Plans Oklahoma State Medical Association OHA Oklahoma Chapter of American Academy of Pediatrics Oklahoma Primary care Association (OKPCA)

V. Expertise

Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) is responsible for providing services to Oklahomans who are affected by mental illness and substance abuse. In FY13, ODMHSAS provided services to approximately 187,000 individuals. The ODMHSAS is statutorily mandated to regulate all substance abuse treatment programs and related services in the state. The Department regulates those residential care facilities and community mental health center treatment programs with which the Department contracts.

Oklahoma Hospital Association (OHA) was established in 1919 and represents more than 130 hospitals and health care entities across the state of Oklahoma. The mission of OHA is to promote the welfare of the public by representing its members and advocating on their behalf, providing services to assist its members in meeting the health care needs of their communities, educating the public and providers on health policy and issues, and promoting quality health care for Oklahomans. OHA fulfills its mission through three primary activities: 1) assisting member hospitals in responding and adapting to challenges they face by providing appropriate representation, advice, and services; 2) informing and educating members by serving as a forum for the consideration and discussion of timely issues; and 3) serving as a strong advocate and voice for its members in the health policy formation process.

INTEGRIS Health is Oklahoma's largest health system with hospitals, rehabilitation centers, physician clinics, mental health facilities, independent living centers and home health agencies located throughout much of the state. INTEGRIS Health also maintains three regional hospitals across the state and is in a joint venture with five others. The organization has affiliated mental health providers in 50 Oklahoma

towns and cities and offers hospice services through Hospice of Oklahoma County. Approximately 6 out of every 10 Oklahomans live within 30 miles of a facility or physician included in the INTEGRIS Health organization. Collectively, the entities within INTEGRIS Health maintain 1,515 licensed beds and have medical staffs that number approximately 1,400 physicians.

VI. Deliverables
Led by the Vice-Chairperson and Project Manager, the Finance Workgroup will work with the actuarial contractor to review value based payment models that are based on pay-for-success and evaluate the content of the actuarial analysis to ensure viability and cost savings. The Workgroup will review each component of the actuarial analysis, validating the findings and providing feedback and comment that will be included into the Analysis's draft.

The specific components of the Actuarial Analysis the Workgroups will be vetting are:

Analysis of Care Delivery Models in Oklahoma: Analyze existing delivery models in Oklahoma and new delivery models adopted in other states.
Market Effects on Health Care Transformation: Assess market effects on health care transformation for the Federal Exchanges, Medicaid, EGID, Medicare, and private insurance groups.
High-cost Delivery Services: Compare the cost of high-cost services across all payers and define optimization of benchmarks for inpatient/outpatient services
Financial Forecast of New Delivery Models: Evaluate the contractor's forecast costs for various payment models, high-cost services, and discuss implications and challenges of different economies of scale across Oklahoma.

Health Information Technology (HIT)

I. Purpose
To improve the quality, safety, effectiveness and efficiency of health services through the use of interoperable health information technology.

II. Goals and Objectives
To increase adoption of Electronic Health Records (EHR) and attainment of meaningful use (MU), incentivize adoption among non-EHR providers and connect providers to existing Health Information Exchanges (HIEs); foster interoperable health systems and plan the development of a value-based analytics (VBA) tool.

III. Leadership
The HIT workgroup is led by Vice-Chairperson David Kendrick, MD, MPH, and Chair of Medical Informatics at the OU College of Medicine. Dr. Kendrick contributes his substantial clinical medical knowledge and training, particularly in the area of Health IT. As the CEO of the MyHealth Access Network, Dr. Kendrick has hands-on experience and a unique understanding of value-based programs as both a clinician and practice facilitator. Dr. Kendrick also serves on the National Committee for Quality Assurance Board.

Brigido Espinosa is also the Project Manager of the HIT Workgroup.

IV. Composition of Stakeholders

<table>
<tr><th colspan="4">HIT Workgroup</th></tr>
<tr>
<td>Public
OSDH

Office of Management and Enterprise Services (OMES)- Health Information

ODMHSAS</td>
<td>Commercial Vendor
Yeaman and Associates

MyHealth Access Network

Payer
Oklahoma Health Care Authority

Tribal Nation
Choctaw Nation

Chickasaw Nation</td>
<td>Non-Profit
Oklahoma Foundation for Medical Quality (OFMQ)

Academic Medical Center
University of Oklahoma (OU)- College of Medicine

OU-Health Science Center Telemedicine/ Heartland Telehealth Resource Center</td>
<td>Associations

OKPCA</td>
</tr>
</table>

V. Workgroup Expertise

Yeaman and Associates was formed to provide continued improvement in health outcomes through practical application of technology and medicine. They connect communities and health care providers by creating access to the latest health care technology. Yeaman and Associates specializes in building solutions for hospitals, practices, and clinics to make information easily accessible and streamline workflows between patient care and practice management.

Oklahoma Health Care Authority, as the state Medicaid agency, is the primary entity in the state of Oklahoma charged with controlling costs of state-purchased health care. Their mission is to responsibly purchase state and federally-funded health care in the most efficient and comprehensive manner possible; to analyze and recommend strategies for optimizing the accessibility and quality of health care; and to cultivate relationships to improve the health outcomes of Oklahomans.

MyHealth Access Network is a non-profit coalition of more than 200 organizations in northeastern Oklahoma and whose goal is to improve health care quality and the health of area residents while controlling costs. Their organization was chartered to facilitate communications and connections among participants in the healthcare systems. MyHealth provides health care providers with technology, information, communications, and analytics to support improved care quality and reduced costs. Their foci are on health information exchange, community-wide care coordination, community-wide clinical decision support, patient engagement and shared decision making, and quality improvement through interventions, such as health information exchange (HIE), patient portal, electronic referrals and online consultation, community health care analytics, gap analysis, and individualized risk assessment and guidelines.

VI. OSIM Project Deliverables and Description

Led by the Vice-Chairperson and Project Manager, the HIT Workgroup will work with two separate contractors to identify the necessary IT framework that supports health care transformation. The Workgroup will review three distinct deliverables proposed by the contractors and provide comments and validate the findings.

The specific deliverables the HIT Workgroup will be responsible for vetting are:

EHR Survey: Assess a statewide EHR adoption survey that describes how Oklahoma health care providers use EHR to deliver better care, improve health outcomes, and reduce cost.

HIE Environmental Scan: Review the statewide environmental scan of existing HIEs and help develop a proposal to leverage and implement a statewide interoperable health information network.
VBA Roadmap: Assess the roadmap for Oklahoma to develop a VBA tool that supports health care and payment reform initiatives, addresses the need for transparency in health care costs, and supports health care consumers and purchasers by highlighting key considerations and potential solutions based on previous experience in early-adopting VBA states.

Health Workforce

I. Purpose
Assess and recommend strategies, policies, and programs that support and ensure the development of a well-trained, flexible, and appropriately distributed health care workforce that meets the needs of an efficient and effective health care system in Oklahoma.

II. Leadership
Deidre Myers, MA, Deputy Secretary of Commerce for Workforce Development, Oklahoma Department of Commerce, serves as the Vice-Chair of the Health Workforce Committee. Ms. Myers's expertise and sphere of influence will assure that health workforce development is aligned and incorporated into Oklahoma's high priority economic and workforce development initiatives.

Jana Castleberry is the Project Manager of the Health Workforce. Ms. Castleberry is a Health Planning Coordinator in the Statewide Access to Care Planning within the Office of Primary Care at CHIE. Ms. Castleberry has over fifteen years' experience working with state and federal health policy. She graduated from the University of Oklahoma with a degree in Communications.

III. Workgroup Goals and Objectives
To coordinate statewide health workforce efforts, identify and quantify labor demand and program supply for health care professionals, reduce supply gaps for critical health professions, and recommend implementation of policies and programs that support and retain an optimized health workforce.

IV. Composition of Stakeholders

<table>
<tr><th colspan="4">Health Workforce</th></tr>
<tr>
<td>Public
ODMHSAS
OSDH
Oklahoma Employment Security Commission</td>
<td>Licensing Boards
Board of Medical Licensure
Board of Nursing

Payer
Oklahoma Health Care Authority</td>
<td>Associations
Telehealth Alliance of Oklahoma
Oklahoma Primary Care Association
OFMQ

Academic Medical Center
Oklahoma Department of Regents</td>
<td>Associations
Oklahoma Medical Association
Oklahoma Osteopathic Association
Oklahoma Association of Nurses</td>
</tr>
</table>

Oklahoma Department of Commerce Physician Manpower Training Commission	**Tribal Nation** Little Axe Health Center Absentee Shawnee Tribe of Oklahoma Northeastern Tribal Health Center	Oklahoma State University Health Science Center OU College of Medicine OU Heartland Center for Telehealth Career Tech Education	Board of Nursing Board of Medical Licensure Rural Health Association

V. Expertise

Oklahoma Department of Commerce (Commerce) is the lead agency for economic development in Oklahoma. Their mission is to create and deliver high-impact solutions that lead to prosperous lives and communities for all Oklahomans. Commerce will provide a critical link between Health Workforce Workgroups and the state's other economic and workforce development initiatives. Commerce's leadership and expertise in workforce development will assure that workgroup goals and strategies are aligned with Oklahoma's highest priority and that the deliverables of OSIM will be developed to ensure private and public support.

Oklahoma Board of Nursing was established to safeguard the public health and welfare of Oklahomans by ensuring that any person who practices or offers to practice registered nursing, practical nursing, or advanced practice nursing in the state is competent to do so. The Board of Nursing has been an active participant on the workgroup and the health workforce data subcommittee for over four years. The Board of Nursing will work in partnership with the Oklahoma Nursing Association, providing leadership and insight into the evolving roles of nurses and the transition to team-based delivery of care.

Oklahoma State Regents for Higher Education comprises 25 colleges and universities in Oklahoma. The State Regents prescribe academic standards of higher education, determine functions and courses of study at state colleges and universities, grant decrees, and approve each public college's and university's allocations. The State Regents will provide the expertise needed to address critical health workforce pipeline issues and identify strategies that create abundant opportunities for education and training necessary to produce a redesigned health workforce.

VI. OSIM Deliverables

Led by the Vice-Chairperson and Project Manager, the Workgroup and other stakeholders will be convened to provide expert guidance and review the Health Workforce Assessment as it is produced. Additional leadership and guidance for the workgroup is provided by the National Governor's Association Health Workforce Policy Academy. To complement and guide the assessment, the Academy will create a Health Workforce Action Plan. The plan will be presented to the Office of the Governor in October 2015 and will include strategies to address policy barriers identified in the OSIM planning phases. The core leadership team for the policy academy will be able to provide expert leadership and direction for the OHIP/OSIM Workforce Workgroup as the OSIM project deliverables are being developed.

The deliverable the Health Workforce Workgroups will be vetting is the:

Health Workforce Assessment: Evaluate the statewide assessment of the health workforce in Oklahoma. The analysis will include an assessment of the state's internal workforce capacity, a gap analysis that identifies underserved areas and workforce deficits, and strategies for assuring a flexible, well-trained, and appropriately distributed health workforce capable of meeting the needs of a value-based health care delivery system.

The Health Workforce Assessment will have several components that identify: existing workforce data sets and elements; the baseline health workforce landscape; workforce and workforce data set gaps; environmental scan of workforce influences and policy levers; emerging health workforce trends and technologies; and a policy prospectus that identifies workforce strategies to align workforce capacity with a health care transformation.

Tribal Engagement

Oklahoma is home to 39 tribal nations, and it has one of the largest American Indian/Alaska Native populations in the United States. The OSDH acknowledges that each tribal nation has inalienable self-governance power over their citizens and territories and possesses unique culture, beliefs, value systems, and history as a sovereign nation. OSDH and Leadership recognize tribal consultation will provide invaluable expertise and distinct perspective critical to the planning and implementation of the health system transformation design process. To emphasize and solidify this commitment to Tribal consultation, Leadership established a permanent Tribal Public Health Advisory Committee (TPHAC) to serve both OSIM efforts and other OHIP public health initiatives.

The TPHAC's primary purpose is to seek consensus, exchange views, share information, provide advice and/or recommendations; or facilitate any other collaborative interaction related to public health responsibilities or implementation of programs. Committee members are nominated by the various Oklahoma Tribal leaders, inter-tribal health boards, and urban clinics for a TPHAC delegate and an alternate. A charter and the committee delegates are being finalized. TPHAC consultation will be facilitated by the Office of Tribal Liaison at OSDH; the Tribal Liaison will establish and coordinate meetings between the TPHAC, OHIP/OSIM Workgroups and staff, and Leadership to apprise them of the project's status and seek their input into the project's deliverables and the SHSIP.

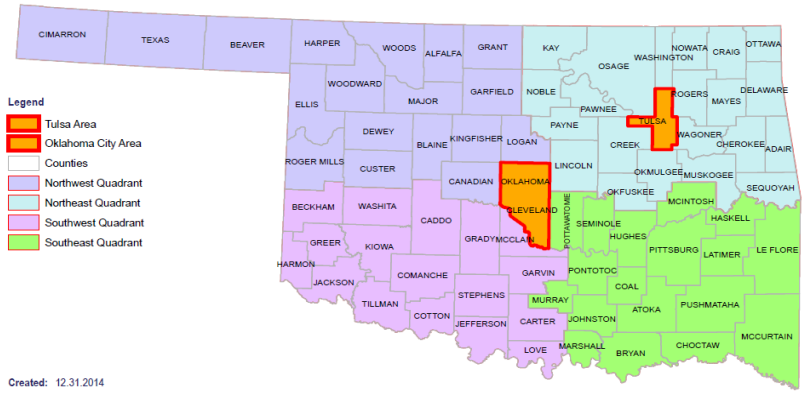
In addition to the TPHAC, the OSIM project has a Tribal delegate serving in Leadership. Mitchell Thornbrugh, Chief Operating Officer of the Cherokee Nation W.W. Hastings Hospital, is a member of the Cherokee Nation and serves on the Cherokee County Health Services Council. He will contribute his considerable knowledge of tribal health services and integration efforts of an electronic health records system and provide feedback throughout the Workgroups. OSIM Staff will work together with Mr. Thornbrugh to incorporate his input and comments into the various components and draft of the SHSIP.

Finally, OSIM has secured the commitment of four of the largest tribal nations in the state. As the Composition of Stakeholders tables illustrate, Tribal entities are dispersed throughout the Workgroups to provide subject matter expertise on every component of the SHSIP. Efforts will be ongoing throughout the OSIM project to increase tribal participation in all aspects of project work.

Stakeholder Engagement Facilitator

Although OSIM has already gained much stakeholder support and have the requisite SMEs participating in the project, the Stakeholder Engagement strategy recognizes that further stakeholder engagement and

buy-in is necessary. As a complementary activity to the other engagement strategies, OSIM staff and the SEF will work together to reach out to businesses, advocacy groups, and communities that are not participating in, or are aware of, the OSIM project. This approach is necessary because there are many individuals and groups within Oklahoma who are concerned with the rising cost of health care and improving the state's population health. The objective of this strategy is to create a medium through which they be educated about health care transformation, provide feedback, and, optimally, give support to the OSIM project to advance health care transformation in Oklahoma.



Engaging a diverse set of stakeholders is a guiding principle of the OSIM project. To address that the OSIM project is inclusive and representative of all Oklahoma, this outreach strategy will ensure proportional geographical representation of the state. As a tactic, Leadership divided Oklahoma into four quadrants (Northwest, Northeast, Southwest, and Southeast) and two metropolitan areas (Oklahoma City and Tulsa). OSIM staff and the SEF will target stakeholders in each area and work together in the field engaging those local communities.

To manage and harmonize the activities of the SEF with the other OSIM activities of OSIM, a scope of work, set of deliverables, and timeline were developed by OSIM staff. A copy of that timeline is included in Appendix A.

While the SEF will work in the field with OSIM staff, they will also ultimately be responsible for drafting the Stakeholder Engagement and Design Process Deliberations Report for the SHSIP. Their scope of work includes creating an educational strategy to facilitate meetings, round table discussions, and regional focus groups across Oklahoma. The SEF will prepare meeting agendas, minutes, and scalable educational materials and supporting documentation to inform the stakeholder of the OSIM's purpose, status, and its relevance to the stakeholder. Three separate quarters of stakeholder engagement activities have been delineated as a core part of the scope of work; a meeting summary, evaluation survey, and quarterly report are due at the end of each quarter. These Stakeholder Engagement Quarterly Reports will coincide with CMMI's quarterly reports so that OSIM staff can more effectively apprise CMS of the various activities and commitments OSIM has engaged in throughout the grant year. Guided by Leadership and OSIM Staff, the SEF will work to include all of the engagement activities, including the work of the TPHAC and OHIP/OSIM Workgroups, within the SHSIP's Stakeholder report. Once the SHSIP is completed, the SEF will go back out into the field and present the final analysis of the plan and illustrate the necessary input of the stakeholders within its composition.

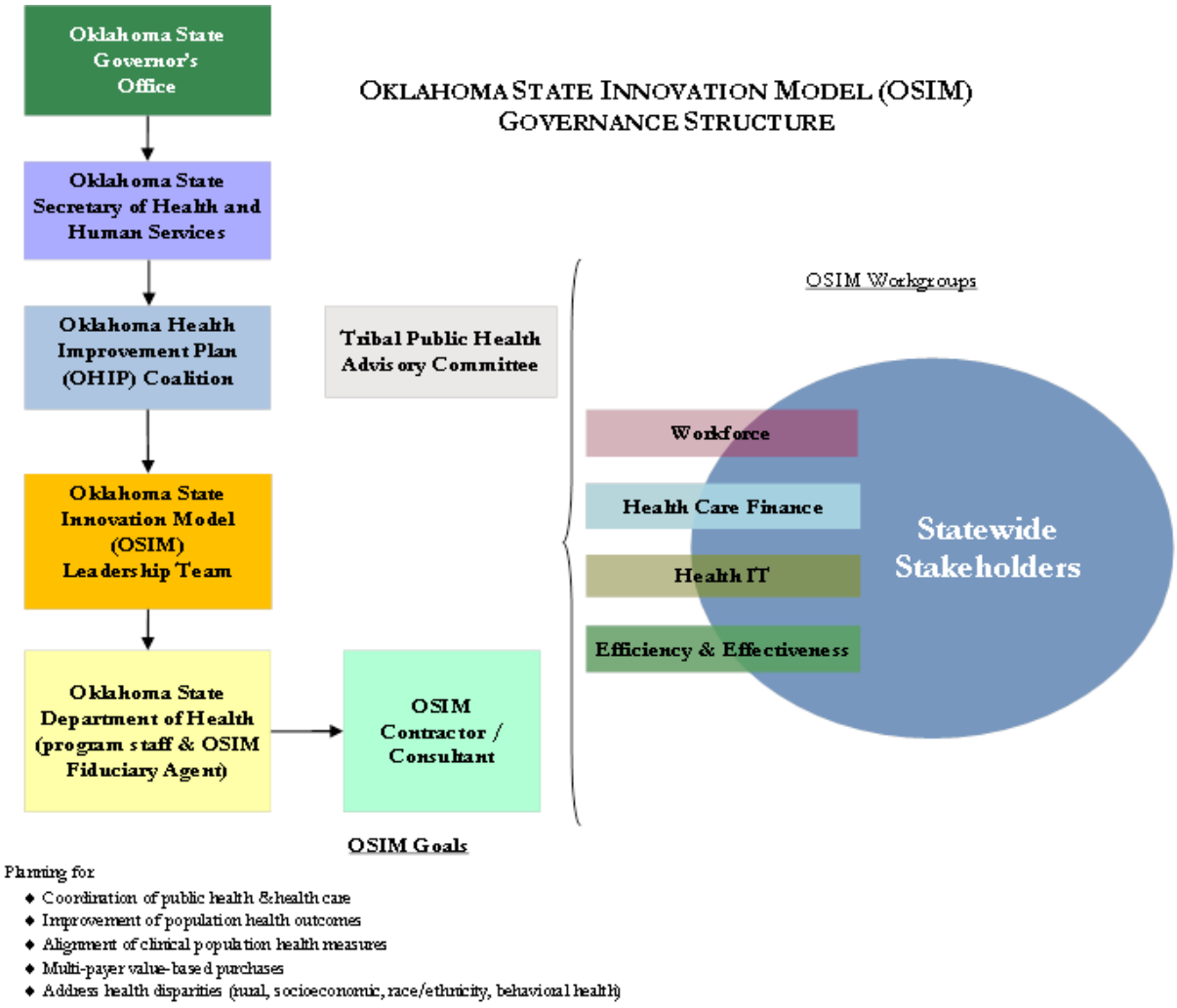
Advancing OSIM

As shown throughout the engagement plan, OSIM's efforts to engage stakeholders will help the design process obtain sufficient diversity, inclusiveness, and the requisite subject matter expertise to draft the SHSIP. Health care innovation within Oklahoma is reliant upon the support and participation of statewide stakeholders. With the stated importance of stakeholder engagement, the OSIM team has already begun to reach out to its partners and stakeholders. The four OHIP/OSIM workgroups were brought together for a

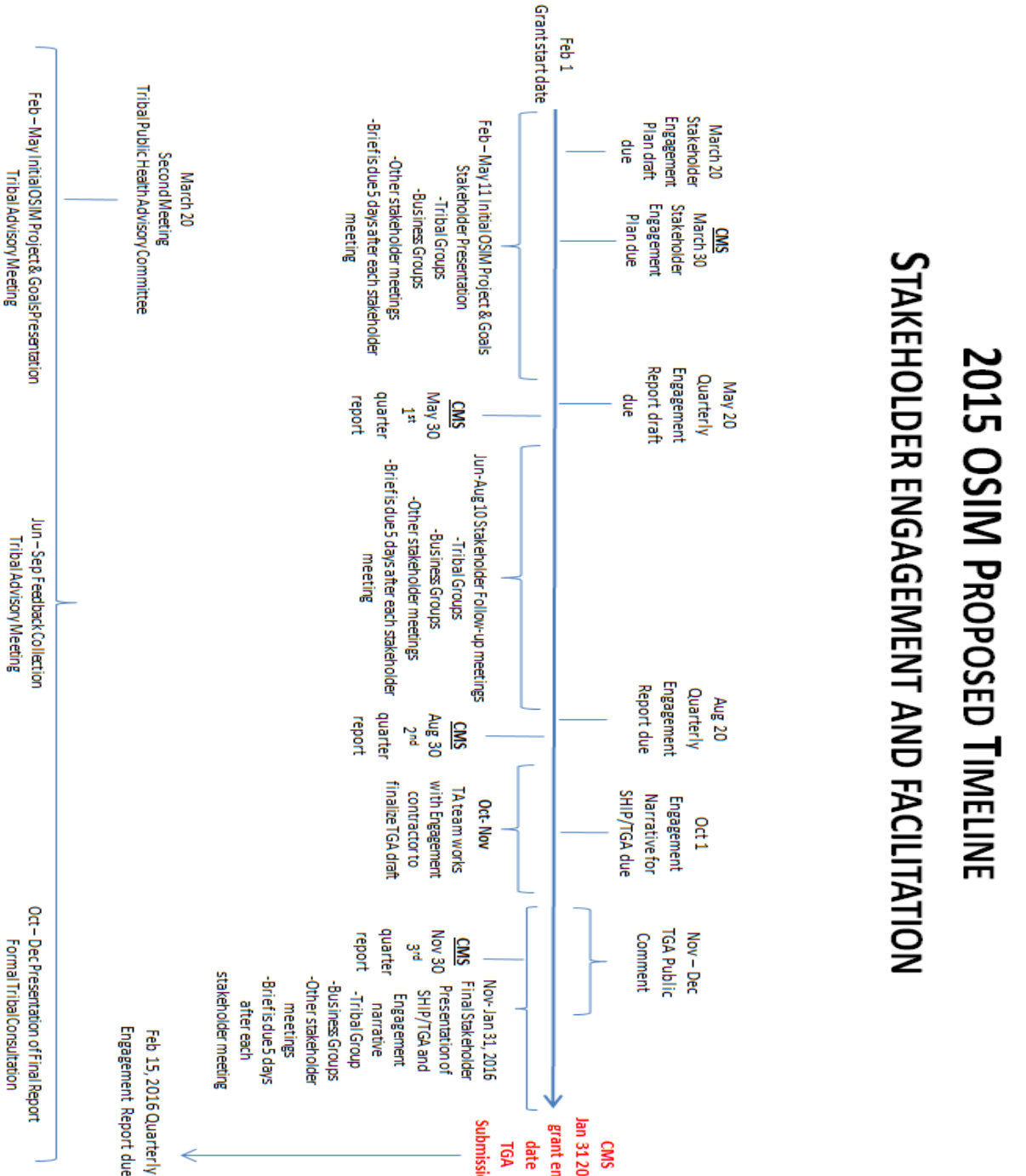
statewide OSIM Kickoff webinar on March 18, 2015. The presentation provided an overview of the OSIM project goals and objectives, alignment with the Oklahoma Health Improvement Plan (OHIP), the alignment of OHIP Workgroups within the OSIM grant, strategies for stakeholder engagement, and an operations update on the OSIM project. There were over 90 participants in the webinar, and feedback from attendees has been positive. The presentation has been made available on the OSIM website for further distribution. As addressed in the OSIM Operational Plan, the OSIM website is now operational, and it is the intent to keep all stakeholders apprised of meetings and the status of grant activities through the website.

The OSIM team has also begun outreach with community initiatives that already have a statewide presence. These initiatives have staff embedded within communities across the state and will be instrumental in OSIM gaining quick access to new stakeholders. OSIM's early engagement with these groups, Turning Point Program and the Partnership for Health Improvement, has made possible speaking arrangements with both initiatives staff to inform them of OSIM and their role. OSIM staff has been asked to speak at several statewide events in the coming months such as the Rural Health Conference and Oklahoma Health Care Authority's Medical Advisory Committee. These speaking engagements will continue throughout the SIM performance period. Through these engagement strategies, the OSIM grant will work tirelessly to engage and involve as many public and private organizations and people in the innovative health care transformation design for Oklahoma.

Appendix A: OSIM Governance Structure



Appendix B: Proposed Stakeholder Engagement Timeline



Section 2

Addendum to Stakeholder Engagement Plan

Since the March 30 submission of the Stakeholder Engagement Plan, the Oklahoma State Innovation Model (OSIM) team has expanded the focus of stakeholder engagement to incorporate a more comprehensive view of the landscape that impacts health care delivery and payment in Oklahoma.

Stakeholder Strategy

The OSIM team is using a multi-pronged approach to ensure broad stakeholder engagement:

1. OHIP/OSIM Workgroups
2. One-on-One Stakeholder Meetings
3. Statewide Stakeholder Meetings
4. Conference Presentations
5. OSIM Website Public Comment Section

OHIP/OSIM Workgroups

Under the Oklahoma Health Improvement Planning (OHIP) Coalition, the leadership of the Oklahoma State Department of Health (OSDH) created four workgroups and selected vice-chairs, project managers, and subject matter experts to run each workgroup. The preexisting governance and workgroup structure of the OHIP team are being used for the OSIM project. Under the OSIM project, the OHIP workgroups are now referred to as the "OHIP/OSIM Workgroups". The workgroups have refocused their agendas to accomplish the goals of the OSIM project during the grant performance period (through January 2016).

Each workgroup has a core team that consists of the contractor(s) responsible for producing workgroup deliverables and the vice-chairs and project managers responsible for vetting deliverables. Workgroups have scheduled their meetings around the development and submission of deliverables.

Each workgroup has an established coalition of stakeholders from OHIP (see Section 1). Through the stakeholder engagement process for the OSIM project, the OSIM team is encouraging external stakeholders to join and actively participate in one or more workgroups to provide public comment on workgroup deliverables. At each meeting, workgroup vice-chairs and project managers are reserving the initial part of the meeting for deliverable development and the latter part for public comment.

Additional Workgroup Focus Area

The OHIP/OSIM Workgroups are currently divided into four topic areas: health efficiency and effectiveness, workforce, finance, and information technology. The OSIM team will complement this existing workgroup structure by adding a fifth topic area for payers. This fifth topic area will not formally constitute a workgroup that is responsible for oversight of deliverables but will be a focused strategy to engage and convene public and private payers. Though some individual payers are currently present throughout the workgroups from the preexisting OHIP workgroup structure, the OSIM team has realized that it is critical to convene payers in one setting to achieve consensus on adopting a value-based purchasing model for health care. The OSIM team has already begun to involve the state payer group, the Oklahoma Health Care Authority (OHCA), on a partnership basis by having an OHCA representative present at stakeholder meetings focused on the Medicaid population and safety net organizations.

One-On-One Stakeholder Meetings

An ongoing vehicle of stakeholder engagement is one-on-one meetings with individual stakeholder organizations. These meetings enable the OSIM team to gain an intimate understanding of each stakeholder's priorities and needs in relation to OSIM, build rapport with key personnel in stakeholder organizations, and receive direct feedback individual stakeholders on the OSIM plan.

For these one-on-one meetings, the OSIM team is focused on meeting with stakeholder organizations that represent a large membership base, such as health systems, associations, and large employers; as well as individual subject matter experts.

The ultimate objective of each one-on-one meeting is to recruit stakeholders to become active participants in the OSIM project efforts to ensure that a diversity of perspectives is represented to the final Innovation Plan. As such, at the end of each meeting, the OSIM team makes three requests to stakeholders:

1. Attend the upcoming statewide stakeholder webinar;
2. Join and become an active participant in an OHIP/OSIM workgroup; and
3. Suggest other potential stakeholders.

Statewide Stakeholder Meetings

The OSIM project will have statewide stakeholder meetings throughout the grant performance period to inform stakeholders of the status of the OSIM project and receive feedback on components of the Innovation Plan. All stakeholders that the OSIM team is meeting with are encouraged to attend the stakeholder meetings. The stakeholder meetings will be held in person at the Oklahoma State Department of Health (OSDH), broadcast as a webinar to engage stakeholders outside of Oklahoma City, or will be webinar-only. Following the statewide stakeholder meetings, webinar recordings will be posted on the OSIM website for public viewing. Stakeholder attendees will have the opportunity to submit follow-up questions, comments, and suggestions to a designated email address provided by the OSIM team.

The first statewide stakeholder meeting will be held on Thursday, June 11, 2015, in-person at the Oklahoma State Health Department (OSDH). Stakeholders may also join by webinar or phone. The webinar will be followed by an executive session with the OSDH/OSIM leadership to discuss high-level objectives, needs, and decision-making priorities for the OSIM project.

The objective of the first meeting is to provide a detailed overview of the OSIM project, review the OSIM roadmap, and review the driver diagrams that will help guide the OSIM strategy. Throughout the meeting, the OSIM team will ask polling questions to gain a baseline of stakeholders' understanding of the OSIM goals and to gather opinions on various aspects of the OSIM plan. The OSIM team will also reserve time for open dialogue to discuss questions and comments regarding the OSIM goals and stakeholder engagement. The webinar will be recorded and posted on the OSIM website for public viewing.

Below is a schedule of the statewide stakeholder meetings, along with the meeting objective.

Table 1: OSIM Statewide Stakeholder Meetings

Meeting No.	Date	Objective
1	June 11, 2015	Review OSIM goals, roadmap, and driver diagrams
2	Week of August 10	Discuss July and August deliverables

3	Week of September 21	Discuss late-August and September deliverables
4	Week of October 12	Discuss late-September and October deliverables
5	Week of November 16	Discuss late-October and November deliverables
6	Week of December 14	Review draft Innovation Plan
7	Week of January 11	Review final Innovation Plan

Conference Presentations

As part of the OSIM outreach strategy, the OSIM team has begun to speak at statewide events to inform stakeholders of the OSIM objectives on a broader scale. Through previous relationships with stakeholder groups, the OSIM team has also been invited for speaking engagements to inform the membership of stakeholder organizations of the OSIM objectives and their role in the project. The OSIM team will continue these speaking engagements throughout the OSIM grant performance period.

Rural Outreach

The OSIM team is creating a targeted strategy to engage rural hospitals so that the final Innovation Plan ensures that rural hospitals can still be sustainable in Oklahoma's transformed health care environment.

The OSIM team is working with county public health coalitions across the State, including in Oklahoma and Tulsa Counties, to perform outreach to rural hospitals and other rural health care entities. These coalitions have preexisting community health improvement plans through which OSIM can address goals related to population health and health care delivery and payment models for the rural population. In addition, the team will explore the possibility of forming regional, rural health forums. As a first step, the team plans to work with the Oklahoma Hospital Association to convene rural hospitals to discuss the OSIM goals and rural hospital needs.

Tribal Nations

For stakeholder engagement to the 38 tribal sovereign nations in Oklahoma, the OSIM team has enlisted an OSDH Tribal Liaison to perform outreach to and meet with individual nations. The Tribal Liaison will inform the OSIM team when multiple nations are convening so that the team can deliver presentations at these larger stakeholder meetings. The Tribal Liaison will also advise on messaging for stakeholder engagement materials for these meetings, help to set meeting agendas, and help to facilitate meetings.

OSIM Website Public Comment Section

The OSIM team understands that it may not have the opportunity to meet with or perform direct outreach to all current or potential stakeholders across the state. To solicit input from all regions in the State, the team will create a public comment section on the OSIM website wherein it will post presentations and recordings from statewide stakeholder meetings as well as components of the Innovation Plan as they are finalized. Stakeholders will be encouraged to review these materials and submit public comments online.

The OSIM website public comment section will be particularly important for stakeholders outside of the Greater Oklahoma City Area and surrounding areas, such as rural hospitals.

There will be an official public comment period on the Innovation Plan in December. The OSIM team will post the Innovation Plan Draft and select specific feedback from stakeholders. The OSIM team will also designate the statewide stakeholder meeting in November or December to a review of the Innovation

Plan Draft. The meeting will be in-person and include breakout sessions aligned to the sections of the Innovation Plan. This feedback will be incorporated into the final Innovation Plan due in January 2016.

Stakeholder List

At a high-level, the OSIM target stakeholders fall into the following group categories:

A. Payers
B. Providers
C. Public Health Community
D. Business Community
E. Consumer Advocates
F. Tribal Nations
G. State and Local Agencies
H. Academic Institutions
I. Advisory Groups
J. Non-Profit Organizations
K. Commercial Vendors

Below is a breakdown of more specific stakeholder organizations within each stakeholder group. The OSIM team is targeting these stakeholders for both one-on-one and state-wide stakeholder meetings.

Table 2: OSIM Stakeholder Groups

Stakeholder Groups	Stakeholder Entities
Payers	**Public** • Oklahoma State Health Care Authority **Private** • Blue Cross Blue Shield of Oklahoma • Community Care HMO • State Employees Group Insurance Division
Providers	• Primary Care Providers • Specialty Providers • Hospitals • Health Systems • Accountable Care Organizations • Post-Acute Facilities • Ancillary Care Facilities • Palliative Care Facilities • Nursing Homes • Federally-Qualified Health Centers • Rural Health Clinics • Community Mental Health Centers • Long-Term Service Providers • Health Access Networks • Professional Associations
Public Health Entities	• Public Health Educators • Public Health Community Coalitions • Public Health Advocacy Non-Profits • Public Health Professional Associations
Business Community	• Large Employers • Trade Associations • Chambers of Commerce • Agents and Brokers

	• Underwriter Associations
Consumer Advocates	• Community-Based Organizations • Employees, Dependents, and Retirees
Tribal Nations	• Tribal Sovereign Nations • Tribal Serving Entities • Tribal Public Health Association • Tribal "Insure Oklahoma" Payer Group
State and Local Agencies	• State Health Agencies • Local Health Agencies
Academic Institutions	• Academic Medical Centers • Academic Research Institutes
Advisory Groups	• Medical Assistance Advisory Committee • Food Service Advisory Council
Non-Profit Organizations	• Think Tanks • Licensing Boards
Commercial Vendors	• Health Information Exchanges

OHIP/OSIM Workgroups

Each OHIP/OSIM workgroup is continuing to engage a broad base of stakeholders that were engaged in the workgroup for the OHIP initiative. Below is the current composition of stakeholders for each workgroup. Through ongoing stakeholder engagement meetings and outreach, the OSIM team is continually recruiting stakeholders to become active participants in workgroup deliberations.

Table 3: OHIP/OSIM Workgroup Stakeholders

Workgroup	State/Local Agencies	Providers	Payers	Consumer Advocates	Academic Institutions	Tribal Nations	Other
Health Efficiency & Effectiveness	• OSDH • ODMHSAS • ODHS • Tulsa City-County Health Department	**Facility** • Variety Care, Inc. **Group** • OU Physicians **System** • INTEGRIS Health **Associations** • OHA • Oklahoma Academy of Family Physicians • Mental Health Association • LeadingAge Oklahoma	• OCHA	• Oklahoma Family Network • Homeless Alliance	• OU Health Sciences Center • Oklahoma LEND	• Cherokee Nation • Absentee Shawnee Tribe of Oklahoma	
Health Workforce	• OSDH • ODMHSAS • ODC • Oklahoma Employment Security Commission • Physician Manpower Training Commission	Associations • Oklahoma Medical Association • Rural Health Association • Oklahoma Association of Nurses • Oklahoma Osteopathic Association	• OCHA		• OSU Health Science Center • OU College of Medicine • OU Heartland Center for Telehealth • Career Tech Education	• Little Axe Health Center • Absentee Shawnee Tribe of Oklahoma • Northeastern Tribal Health Center	**Non-Profit** OFMQ **Licensing Boards** • Board of Medical Licensure • Board of Nursing

		• Telehealth Alliance of Oklahoma • Oklahoma Primary Care Association				
Health Finance	• OSDH • ODMHSAS • Oklahoma City-County Health Department	**Facility** • Variety Care, Inc. **System** • INTEGRIS Health **Associations** • OHA • Oklahoma State Medical Association • Oklahoma Chapter of American Academy of Pediatrics • Oklahoma Primary Care Association (OKPCA)	**Payers** • OCHA • EGID • Blue Cross Blue Shield • Community Care HMO **Associations** • Oklahoma Association of Health Plans	• Oklahoma Family Network • Alliance for the Uninsured	• OU Health Sciences Center • OSU School of Health Care Admin.	• Chickasaw Nation • Oklahoma City Area Inter-Tribal Health Board	
Health Information Technology	• OSDH • ODMHSAS • Office of Management and Enterprise Services-Health Information	**Associations** • OKPCA	• OCHA		• OU College of Medicine • OU Health Science Center Telemedicine/ Heartland Telehealth Resource Center	• Choctaw Nation • Chickasaw Nation	**Non-Profits** • OFMQ **Commercial Vendors** • Yeaman and Associates • MyHealth Access Network

One-On-One Stakeholder Meetings

One-on-one meetings focus on in-depth discussions with key personnel at stakeholder organizations representing a large membership base. In May, the OSIM team met with the following organizations:

- Greater Oklahoma City Chamber
- Yukon Chamber of Commerce
- Alliance for the Uninsured
- St. John's ACO
- St. Anthony's ACO, SSMOK
- Public Health Educators

Prior to the June 11, 2015 statewide stakeholder meeting, the OSIM team will meet with the following additional organizations:

- Tulsa Chamber of Commerce
- Central Community Health Access Network
- Oklahoma City Association of Health Underwriters
- State Chamber of Commerce

Statewide Stakeholder Meetings

The OSIM team is targeting stakeholders interested in learning more about and supporting the OSIM goals to attend the statewide stakeholder meetings, including stakeholders from:

- OHIP/OSIM Workgroups
- OSDH/OSIM Leadership
- One-on-One Meetings
- Conference Presentations
- General Outreach Efforts

Conference Presentations

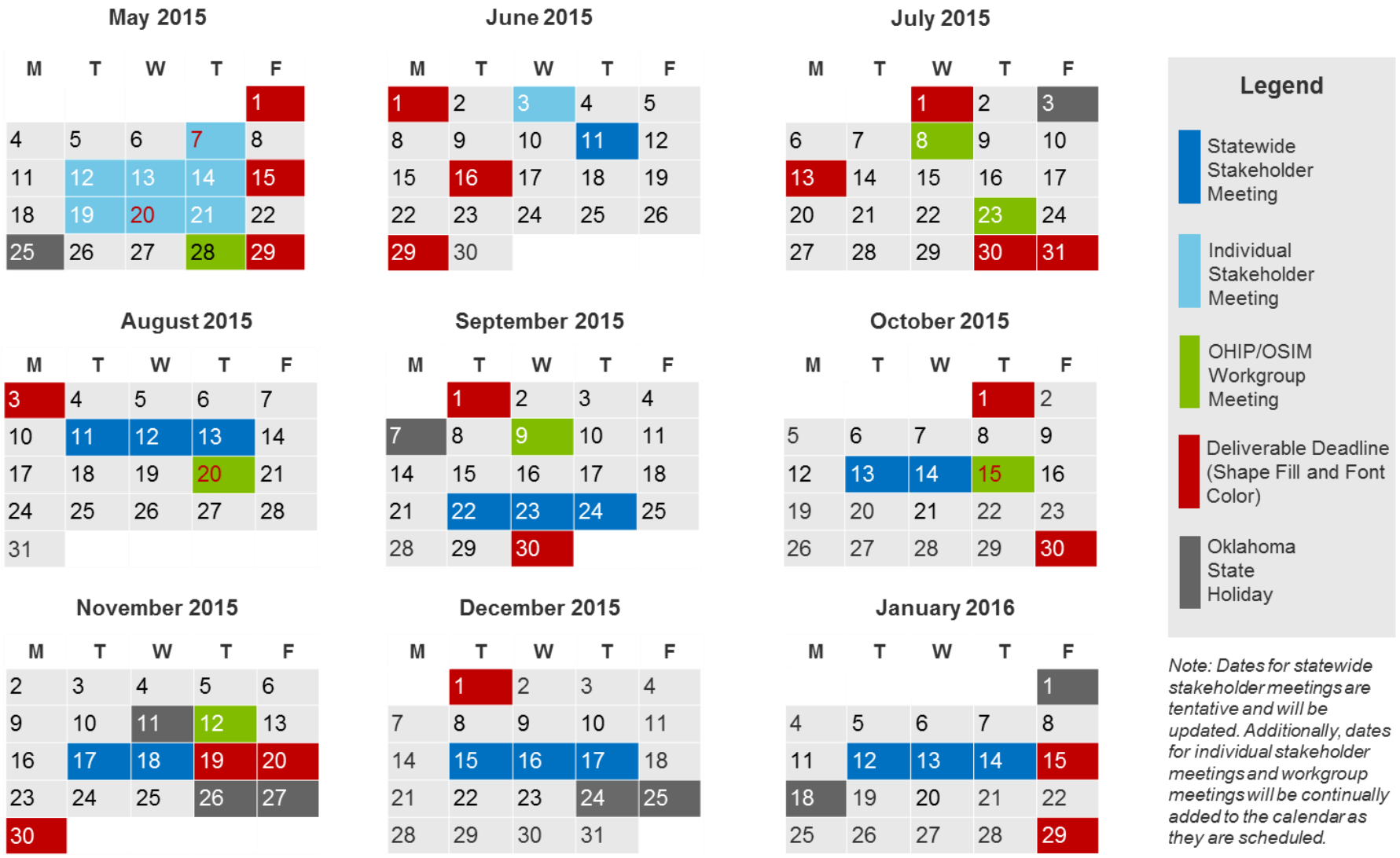
To date, the OSIM team has delivered presentations at the following stakeholder organizations:

- Turning Point Program
- Partnership for Health Improvement

In the near future, the OSIM team will deliver presentations at the following organizations and events:

- Variety Care, Inc.
- Rural Health Conference
- OCHA's Medical Advisory Committee Meeting

Appendix A: Stakeholder Engagement Calendar



Note: Dates for statewide stakeholder meetings are tentative and will be updated. Additionally, dates for individual stakeholder meetings and workgroup meetings will be continually added to the calendar as they are scheduled.