

Overview of SIM Funded State Positions

		CY2015	CY2016	CY2017	CY2018	TOTAL
STAFFING	DESCRIPTION	287,150	574,297	574,297	526,297	1,962,041
Project Manager (OHIC) <i>Approved by SIM Steering Committee April 9th, 2015</i>	The SIM Project Manager will serve as the primary liaison with the federal Centers for Medicare & Medicaid Innovation (CMMI) as it pertains to the administration of the SIM Model Test grant award, including the development and oversight of the operational plan and quarterly reporting.	48,142	96,283	96,283	96,283	336,991
HIT Specialist (EOHHS)¹	The HIT Specialist, under the direction of the State HIT coordinator, will facilitate the implementation of the HIT plan as it pertains to the SIM Model Test grant award.	48,000	96,000	96,000	48,000	288,000
Sr. Public Health Epidemiologist (DOH)	The Sr. Public Health Epidemiologist will support the development and implementation of the Population Health Plan required by the SIM grant.	38,262	76,523	76,523	76,523	267,831
Principal Policy Associate (OHIC)	The OHIC Principal Policy Associate will provide lead oversight of the transition to the Value-based Care Paradigm in the commercial insurance market, including policy formation, compliance monitoring, and stakeholder outreach. The position will serve as principal liaison to Medicaid should any policy alignment efforts be undertaken.	48,142	96,283	96,283	96,283	336,991
Value Based Purchasing Analyst (HSRI/EOHHS)	The Value Based Purchasing Analyst will serve as HSRI's lead with health insurers to drive the process in creating insurance plans in support of the Value-based Care Paradigm described in the State Health Innovation Plan.	52,302	104,604	104,604	104,604	366,114
BHDDH Chief of Transformation	The Chief of Transformation will lead BHDDH's policy development and implementation of innovation and integrated models as informed by the behavioral health system transformation plan in the SIM.	52,302	104,604	104,604	104,604	366,114
BENEFITS						1,106,796
Medical						282,739
42% fringe						824,057
GRAND TOTAL		287,150	574,297	574,297	526,297	3,068,837

¹ All of the above positions are slated to be funded for 3.5 years (July 2015 to Dec 2018), with the exception of the HIT Specialist position funded for 3 years (July 2015 to June 2018)

Detailed Descriptions

■ HIT Specialist/EOHHS

The HIT Specialist, under the direction of the State HIT coordinator, will facilitate the implementation of the HIT plan as it pertains to the SIM Model Test grant award. Duties will include, but may not be limited to, the following:

- Support the State's efforts in implementing various aspects of HIT and HIE to support a transformed health care system
- Coordinate the implementation and adoption of all aspects of the SIM HIT plan
- Facilitate the design, development and implementation a statewide electronic clinical quality reporting measurement and feedback system
- Assist SIM staff to support quality measurement alignment efforts that will be necessary prior to the implementation of a statewide quality measurement system.
- Support the State HIT Coordinator in facilitating and monitoring the development of the statewide common provider directory to assure state agency needs are met; serve on the governance committee to define precedence rules, identify priorities, validate the accuracy of the data etc.,
- Work with the Rhode Island Quality Institute as the State's designated HIE to develop, implement deploy and evaluate the use of consumer engagement tools such as CurrentCare for Me to assure that the products and services are rolled out in an manner that consumer
- Facilitate the development and implementation of a state enterprise wide strategy to connecting, interfacing, leveraging a variety of statewide data systems to maximize the collection and use of data as in support of a population and value based system of health care.
- Work to leverage and enhance connectivity between the statewide HIE and other state databases such as the state's prescription drug monitoring database, the MMIS data warehouse, the states All Payer Claim Database, the state's new integrated human services eligibility system and Health benefits exchange, the common provider directory, and the statewide quality reporting measurement and feedback system.
- Monitor community HIT initiatives and efforts in order to help align them with statewide initiatives
- Develop, manage and carry out procurement processes for HIT initiatives that are part of the SIM HIT plan including developing RFPs, single source justifications, contracts etc.; overseeing vendors to assure contract deliverables are met on time and within budget.
- Provide updates to the Healthy RI Steering Committee regarding the progress of implementing the HIT plan
- Work with stakeholders to identify new or to revised existing HIT initiatives that support grant objectives and further the use of HIT tools in support of transforming a health care systems.

■ Senior Public Health Epidemiologist/DOH

The Senior Public Health Epidemiologist will enhance the capacity of the Department of Health to conduct, implement, and evaluate the Population Health Plan that is required by the SIM Model test Grant. The position will:

- Monitor and analyze the incidence and prevalence of disease in the population; to identify effective health promotion and disease prevention strategies; design and/or implement health promotion and disease prevention interventions; and to evaluate health promotion and disease prevention programs.
- Monitor the effects of factors which have a major impact on the population's health, such as environment, genetics, lifestyle, and medical care.
- Develop outcome measures to determine the impact of health and health care activities.
- Analyze and document the impact of various disease processes on the population of the state and/or communities, as well as on other specific sub-populations at risk.
- Develop specific hypotheses which may lead to the better understanding of the etiology of disease entities which affect the population of the state.
- Responsible for the interpretation and analysis of data relating to the health status of the state's population.
- Conduct special studies which will expand the epidemiologic database so that more precise and meaningful data will be available.
- Describe the disease and determinates of disease characteristic of the population.
- Identify the major health status problems of the population.
- Establish goals and objectives for reducing the adverse effects of the major health problems of the population.
- Develop broad strategies and specific tactics that define the most effective means of interviewing in the major health problems of the population.
- Review existing health programs and develop plans for their expansion, modification or elimination in view of changing health needs and specific population based data.
- Establish procedures and standards for the evaluation of health related programs within the state; evaluations will include analysis of the costs and benefits of the programs and their overall efficiency.
- Meet with community leaders and health professionals to discuss community needs in public health and determine how and to what extent the Department of Health can provide programs to meet these ends.
- Provide technical assistance with regard to the major health problems, disease etiology, populations at risk, research and program design, program effectiveness, and program evaluation to agencies and organizations proposing to implement health promotion and disease prevention programs.

■ Principal Policy Associate/OHIC

The OHIC Principal Policy Associate will provide lead oversight of the transition to the Value-based Care Paradigm in the commercial insurance market, including policy formation, compliance monitoring, and stakeholder outreach. Specific duties will include, but are not limited to:

- Support the transition to the Value-based Care Paradigm by monitoring insurer compliance with the care transformation and payment reform requirements of the Affordability Standards.
- Staff OHIC's ongoing Care Transformation and Alternative Payment Methodology Advisory Committees.
- Monitor the development of value-based insurance plan designs.
- Write public facing reports based on monitoring data to keep stakeholders informed of our transformational progress.
- Serve as the principal OHIC staff person on the SIM state working group.
- Support SIM evaluation activities.
- Work collaboratively with OHIC's Informatics Manager to track key system performance metrics.
- Serve as the principal OHIC liaison to Medicaid.

■ Chief of Transformation/BHDDH

The Chief of Transformation will lead BHDDH's policy development and implementation of innovation and integrated models as informed by the behavioral health system transformation plan in the SIM. Specific duties include:

- Analyze Rhode Island's behavioral health services system from a population health perspective towards creating a high performance behavioral healthcare system that achieves full coordination and integration of behavioral healthcare and physical care throughout the person's lifespan; that ensures better healthcare, behavioral healthcare and better overall health - at lower cost.
- Assess current population health gaps, issues, and risks impacting the effectiveness of Rhode Island's Behavioral Healthcare System and its relationship with the broader healthcare community and other community sectors.
- Develop a transformative behavioral healthcare plan that identifies strategies and mechanisms for moving Rhode Island's behavioral healthcare delivery system to a value-driven, community-based system that is patient-centered. This plan will:
 - Address the necessary mechanisms to implement integrated care delivery models that are evidence-based across the lifespan.
 - Identify strategies related to payment alignment among Rhode Island's key health care payers.
 - Establish incentives to move towards value-based purchasing and unified quality outcomes.
 - Identify essential technological infrastructure to support the plan design.
 - Develop strategies related to assuring an adequate workforce.

■ Value Based Purchasing Analyst (QHP & Medicaid) HSRI/EOHHS

The Value Based Purchasing Analyst will serve as the State's lead in the design of health insurance programs (Medicaid Managed Care or QHP) that support the Value-based Care Paradigm described in the State Health Innovation Plan. The Analyst will support the paradigm by working to align purchasing standards across plans that focus on transforming the health care delivery system, including a focus on health improvement through the use of value based networks and plan design. Working with Health Plans and other stakeholders, align standards for value-based purchasing across State programs. Promote efficient delivery of high quality health care, benefit design, provider requirements, performance based contracting, risk-based provider contracting, and network design which promotes primary care, prevention, and efficient use of services.

- Focus on quality measures, aligned and committed to population health goals and objectives that match the aspirations, needs, and objectives of the community.
- Work with health insurers on new plans with integrated networks that incorporate an emphasis on patient-centered care and alternatives to traditional fee-for-service reimbursements with a focus on clinical quality measures.
- Work closely with the EOHHS and the Office of the Health insurance Commissioner on yearly plan approvals and review of plan offerings.
- Serve as HSRI's subject matter expert on plans offered through HSRI, for quality control, training, questions regarding product designs and structure.
- Stay current on new Federal Regulations.