manatt

Encounter Data Improvement Program

Governance Workgroup

Working Session #4

January 8, 2020 | 3:00 – 5:00 pm



Workgroup Timeline and Approach

#	Meeting Topics	Proposed Meeting Agenda
1	Work Group Kickoff Meeting	Objectives : Introductions, ratification of work group charter and charge; develop initial consensus around core issues for resolution
_	Date: October 29th	 Review and affirm work group charge, scope, and work plan Review, revise and validate governance principles
2	Working Session #2	Objectives : Confirmation of principles, refinement of criteria, and introduction of potential governance models
	Date: November 18th	 Confirm the principles and straw model from meeting #1 In-depth governance principles discussion
3	Working Session #3 Date: December 9th	 Objectives: Define governance structure and representation and review model options Review and refine governance straw model Define governance representation and decision-making processes Consider spectrum of potential governance models, and framework for assessing them Define initial governance options
4	Working Session #4 Date: January 8th	 Objectives: Refine model options and governance structure. Define models for financing and sustainability, implementation plan and roadmap Review and refine governance straw model Discuss role of governance in future of standardization and technology and assistance Discuss governance authority, financing, sustainability and other criteria Discuss Implementation plan and roadmap
5	Working Session #5 Date: February 3rd	 Objectives: Review and finalize recommendations, implementation and financial plan Review and refine straw model Finalize recommendations Develop implementation roadmap and sustainability plan

- Review and refine governance straw model
- Discuss role of governance in overseeing standardization, technology and technical assistance program development
- Discuss governance authority, financing, sustainability and other criteria
- Next Steps

Governance Problem Statement and Governance Charge

Problem Statement

In California, we have not been successful in our efforts to prioritize, organize and communicate encounter reporting improvement initiatives, oversee changes to standards, policies and processes, and support communication and collaboration up and down the reporting chain and across lines of business.

Encounter data reporting governance charge:

- 1. Oversee standards, specifications and companion guide development and updates; including changes to existing documentation and processes, and necessary steps to inform and communicate with stakeholders as changes occur.
- Develop and promulgate processes that foster collaboration between regulators and plans during specification and companion guide development and refinement to ensure there is consistency across purchasers, plans, and other payers and lines of business.
- 3. Establish a framework for reporting progress, with baselines and targets to achieve, and benchmarking of completeness, timeliness, and accuracy of encounter file submissions
- 4. Create mechanisms for advancing recommendations and meeting requirements, supported by necessary infrastructure and capabilities
- 5. Develop transparent processes to identify, prioritize and fund initiatives that improve encounter data reporting
- 6. Establish a framework to develop and align reporting improvement incentive programs that span payers and lines of business



Data Standardization Working Session #3

Key Takeaways

Alignment on Key Data Standardization Issues: The work group identified the most impactful and prevalent issues, errors, and points of failure. The top five addressable issue areas were:

- Duplicate Claims and Encounters. Provider submission of duplicate claims and encounters (and the
 propagation of the duplications through clearinghouses and payers), are a widespread problem.
- Use of Local Codes. Providers' use of local codes raises challenges when managed care plans
 (MCPs) cross-walk them to national codes. Medi-Cal providers in fee-for-service continue (and are
 allowed) to submit encounters with 'local codes'.
- Newborn Identifiers. Encounters for newborns may be rejected if they don't conform with DHCS's appropriate identification guidance. Providers' and clearinghouses' logic for addressing newborn's identification varies.
- Tracing Errors. It can be difficult for a MCP to identify whether the rejected item was an encounter
 or a claim they received from a rendering provider, and difficult to trace the claim/encounter back
 to its source.
- Companion Guide Variation. MCP's companion guides can vary significantly from plan to plan.

Other identified issues to be resolved included:

1) implementation of new NDC Codes, 2) variable void replacement logic, 3) HCP code requirement, and 4) CN segment requirement.

Technology + Technical Assistance Working Session #2

Key Takeaways

The workgroup emphasized the **importance of linking technological and technical solutions to those proposed for governance and data standardization**. For example:

- Clear processes should link proposed training solutions/curricula with updates to data standards and processes, as recommended by the Data Standardization workgroup.
- The proposed Governance committee will oversee the prioritization and implementation of Technological + Technical Assistance solutions.

To help facilitate knowledge sharing and solution development across workgroups, Manatt will schedule and facilitate discussion with all work group co-chairs.

The workgroup confirmed <u>five</u> targeted solution areas for development:

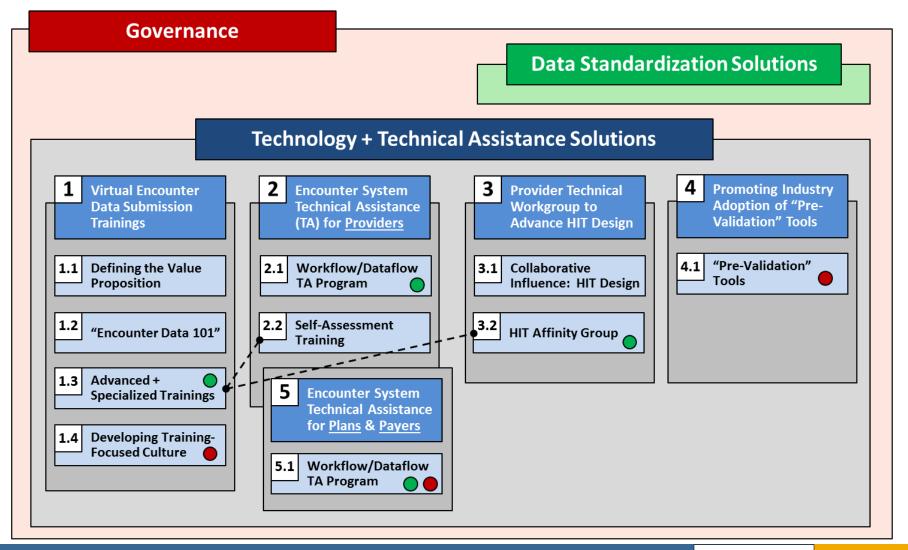
- 1. Virtual Encounter Data Submission Training
- 2. Encounter System Technical Assistance for Providers
- 3. Provider Technical Workgroup to Advance HIT Design
- 4. Promoting Industry Adoption of "Pre-Validation" Tools
- 5. Encounter System Technical Assistance for Plans and Payers



Technology + Technical Assistance Working Session #2

Key Takeaways

For the five targeted solution areas for development, the work group is developing refinements to maximize impact, scalability, sustainability, and viability.



Governance Options

Options to consider include informal collaboratives, non-profits, and governance agency advisory groups

Collaborative –Subsidiary of PBGH

Non-Profit – Private 501(c)(3) Public Advisory – Stakeholder advisory committee (CalAIM) State Government
Agency –
Public Entity

Model

Examples (illustrative)











Given the attributes we have identified and will discuss, which <u>model</u> will be most effective in governing encounter data improvement efforts?

Preliminary Model Tradeoff Assessment – (organizations are illustrative, not candidates per se)

Attribute	OCQC	NCQA	SDHCS	OSHPD
Decision-Making				
Authority and Alignment				
Transparent				
Accountable and Responsive				
Communication				
Effectiveness				
Sustainability				
Participatory/ Representative				



Governance Decision-Making – For Discussion

Governance Decision-Making Criteria

- Governance will oversee data standardization and technology + technical assistance programs, identify and target organizations most in need of assistance, and monitor program results.
- Governance will establish and oversee committees that represent industry stakeholders and subject matter experts, considering and incorporating guidance into program activities and priorities.
- Governance will establish policies and consensus-based decision-making processes that advance encounter data reporting priorities, including recommended changes to standards and specifications.

Illustrative Examples	©CQC	NCQA	SDHCS	OSHPD
Descriptions	Collaborative	Non-Profit	Advisory	State Agency
Governance Decision-Making: Pros and Cons	 ✓ Entity can be designed representative of indu – Bylaws may need to be representative stakeh × Difficult to compel state policies and changes to force of law 	ustry stakeholders be changed to ensure older engagement.	 × Advisory groups can be consensus-based, but decisions are made by agency leadership. ✓ Policies can be supported by regulations under the agency's purview 	 Consensus decision making can be more difficult to do in a public entity. ✓ Policies can be supported by regulations under the agency's purview



Governance Authority and Alignment – For Discussion

Governance Authority and Alignment Criteria

- Governance will establish policies and practices that are designed to ensure compliance and alignment with enforceable regulatory rules, business requirements and incentives.
- Governance will follow state and federal regulations and rules to guide and reinforce its recommendations and advance decisions and proposed initiatives.
- Governance will assess and revise the guidance it makes to ensure alignment and avoid conflicting messaging as new State and federal policies are promulgated.
- Governance will/could play a role in recommending how the business community will align contracting requirements to support encounter data improvement efforts, and will help define incentive program frameworks.

Illustrative Examples	OCQC	NCQA	SDHCS	OSHPD
Descriptions	Collaborative	Non-Profit	Advisory	State Agency
Governance Authority and Alignment: Pros and Cons	✓ Non-profit structures are not regulators, but can have strong "bully pulpit" influence in their role developing standards and programs and can work with industry leaders to compel them to adopt		 ✓ Policies can be designed a actors under their purview can be aligned in some cits supportive contracting remarks. – Authority of State Agencianew legislation × Regulatory authority may of business (i.e., Medi-Care 	w towards compliance, and reumstances with quirements es may need to come from be limited to a single line
		× ERISA plans are not	beholden to State rules	

Governance Transparency – For Discussion

Governance Transparency Criteria

- Governance will establish and make public its policies and processes for formulating and advancing recommendations and decisions.
- Governance will make its actions and decisions visible and open to external stakeholders/public, and will establish clear transparency processes/policies that describe how governance establishes and refines the programs and targets it sets.
- Governance will support a broad group of stakeholders that develop standards and programs through a real-time collaborative process with broad input facilitated through public comment.

Illustrative Examples	OCQC	NCQA	SDHCS	OSHPD
Descriptions	Collaborative	Non-Profit	Advisory	State Agency
Governance	 ✓ Non-profits and collaboratives have significant latitude and flexibility to develop consensus through a broad, stakeholder input process × Non-profits are not subject to public record acts or sunshine laws that require transparency 		 Advisory groups may make recommendations that the State agency it is advising need not adopt 	Consensus decision making can be more difficult to do in a public entity.
Transparency: Pros and Cons			 ✓ Public agencies are subject to additional scrutiny and public oversight by the legislature to ensure they comply with State law ✓ Agencies and sanctioned public advisory bodies are beholden to State transparency and open meeting laws 	

Governance Accountability and Responsiveness – For Discussion

Governance Accountability and Responsiveness Criteria

- Governance will establish meaningful targets and metrics, collect and publish accountability metrics, track
 industry performance and improvement against agreed-upon metrics, targets and standards, and leverage what
 State agencies (e.g., DHCS) are doing.
- Governance will translate what's appropriate to impacted organizations downstream (e.g., at the group and practice level) and consider what does/does not translate to other lines of business.
- Governance will be forward-looking, considering future programs (including waivers, new programs and requirements).
- Governance will respond to encounter data performance reports by developing and publishing proposed actions to address ongoing challenges, and provide opportunities for the public to provide input on decisions and recommendation that it makes, including through public comment prior to new announcements.

Illustrative Examples	OCQC	NCQA	SDHCS	OSHPD
Descriptions	Collaborative Non-Profit		Advisory	State Agency
Governance Accountability and Responsiveness:	have significant flexibility to develop processes to be accountable to their representative stakeholders Non-profits and collaboratives are not subject		✓ Advisory bodies may seek and incorporate input from stakeholders that participate in other business lines	× State agencies typically do not follow or design programs with the intent of having an impact on other business lines
Pros and Cons			✓ Public entities are design responsive to the public	

laws, and are beholden to lawmaker oversight

Governance Participation/Representation – For Discussion

Governance Participation and Representation Criteria

- Governance will ensure public and private stakeholders have a voice and are adequately and meaningfully represented.
- Governance will ensure there is a diverse set of representation across the entire encounter data value chain.
- Governance participants include, but are not limited to, health plans, hospitals, IPAs/MSOs, community clinics, rural health centers, private practices, and public agencies (e.g., DMHC, DHCS, Covered California CMS, etc.). In addition to the aforementioned organization types, advisors to governance may also include Clearing houses, EHR vendors and other technical experts.
- Governance will have a minimum defined set of competencies for members serving on governance, and the committees governance forms will be represented by volunteer industry stakeholders and subject matter experts.
- Governance will require an explicit commitment to diversity, which may include racial, gender, ethnic, cultural, and geographic (e.g., rural, urban, etc.) representation.

Illustrative Examples	OCQC	NCQA	SDHCS	OSHPD	
Descriptions	Collaborative	Non-Profit	Advisory	State Agency	
Governance Participation & Representation : Pros and Cons	✓ Flexible structure easily allows for changes to representation	× Bylaws may need to be changed to conform with representation requirements	 ✓ Advisory bodies can be intentionally composed of necessary stakeholder representatives ✓ Public entities can be compelled by State Law to 		
	 ✓ Representation can be designed to include all stakeholders necessary for success × State agencies may not be compelled to participate 		 seek public input Stakeholders have a role in providing guidance but have no ability compel execution of their recommendation 		

Governance Sustainability – For Discussion

Governance Sustainability Criteria

- Governance will seek funding to establish and sustain encounter data improvement programs and priorities and secure resources to staff governance processes and any committees and operational functions it may establish.
- Governance will develop annual budgets and processes to ensure revenues and expenses are effectively managed, and develop financial controls to ensure it is using resources according to stated policies and objectives.
- Governance will develop, revise and publish an annual business plan.

initiatives: susceptible to "free riders"

Illustrative Examples	OCQC	NCQA	SDHCS	OSHPD
Descriptions	Collaborative	Non-Profit	Advisory	State Agency
Governance	× Stand-alone collaborative require a vehicle to collect grants and manage finances.	 ✓ Can access State general or special funds ✓ Budgets, funding and resources are publiceported 		esources are publicly
Sustainability: Pros and Cons	 ✓ Can adopt a variety of funding models; collect membership fees, dues, grants from multiple sources, etc. × Cannot easily access State general or special funds × May be difficult to compel parties to fund 		 Once government initiatives are created, funding mechanisms may not stop unless explicitly sunset. Difficult to access private funding sources Funding susceptible to economic and political environment changes 	

Governance Communication – For Discussion

Governance Communication Criteria

- Governance will monitor the regulatory landscape and business environment to identify and report on changes to encounter data reporting standards or requirements that may impact stakeholders or established policy and procedures.
- Governance will craft and communicate targeted messages to impacted stakeholders across data standardization, technology and technical assistance programs, and develop communication plans to stakeholders.

Illustrative Examples	OCQC	NCQA	SDHCS	OSHPD
Descriptions	Collaborative	Non-Profit	Advisory	State Agency
Governance Communication: Pros and Cons	✓ Effective communication will be critical to maintain industry funding sources. This inherent incentive will help ensure the entity is always aligned with it's stakeholders.		✓ Public entity reporting requirements can help ensue effective and timely communication	

Governance Effectiveness – For Discussion

Governance Effectiveness Criteria

- Governance will establish key performance indicators that monitor how effectively governance is meeting its
 goals and targets, and adopt data-driven frameworks for assessing potential impact of initiatives it is assessing.
- Governance will adopt processes to evaluate the impact of initiatives it oversees, and seek stakeholder feedback
 on the impact they are having on the encounter data reporting landscape and ways they can be more impactful.
- Governance will not solely focus on initiatives that advance progress on a statewide basis, but will identify regions, subgroups or constituencies most in need of improvement, and will develop key performance indicators to inform it's analyses.
- Governance will develop a decision framework to continue or cease funding for initiatives based on milestones and metrics that are or are not met.

Illustrative Examples	QCQC	NCQA	SDHCS	OSHPD
Descriptions	Collaborative	Non-Profit	Advisory	State Agency
Governance Effectiveness: Pros and Cons	 ✓ A clear mandate and active industry participation can shift and align industry behavior × Lack of legal authority to compel action may limit program effectiveness. 		✓ Public reporting rules can publicly report key metric effectiveness	•

Preliminary Model Tradeoff Assessment – For Discussion

Attribute	OCQC	NCQA	SDHCS	OSHPD
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Appendix A



Governance Case Studies: CQC

	California Quality Collaborative (CQC)		
Model Structure	CQC is a collaborative and a subsidiary of the Pacific Business Group on Health (PBGH)		
Launched	2003		
Brief Description	CQC is a health care improvement organization dedicated to advancing the quality and efficiency of the health care delivery system in California. CQC establishes collaboratives and workshops that include quality improvement training programs and topic-specific collaboratives to facilitate adoption of best practices		
Board Composition	The CQC has Steering Committee selected comprised of leaders from physician groups, health plans, purchasers, public health entities and their partners.		
Funding Model	CQC is funded by programs sponsors, including health plans, provider organizations and payers, through charitable grants, and has received a Centers for Medicare & Medicaid Services Innovation Award		
Additional Considerations	CQC is an open collaborative model. Programs include Building Capacity for Improvement, offering programs for individuals to build skills or knowledge in core content for delivery system improvement; and Practice Transformation, a four-year initiative to engage 4,800 clinicians contracted with provider organizations to improve measures of cost, quality and patient experience.		



Governance Case Studies: NCQA

	National Committee for Quality Assurance (NCQA)				
Model	Private 501(c)(3) not-for-profit organization				
Launched	1990				
Brief Description	 NCQA's mission is to improve the quality of health care. They administer three programs: Patient-Centered Medical Home recognition program Health Plan accreditation through a comprehensive framework for essential quality improvement and measurement HEDIS: development and management of quality improvement measures used for health plan accreditation, reporting and performance improvement 				
Board Composition	17 Directors from a broad and diverse set of national healthcare stakeholders including former state government officials, academics, health plan and purchasers, clinical leaders, information technology organizations and vendors, and consumer advocates				
Funding Model	Sponsorship and corporate membership fees, funding from foundations and service revenue				
Additional As a non-profit they have established formal bylaws and they have a board directors with fiduciary responsibility for the organization and its programs required to file tax returns and report revenues and expenses.					



Governance Case Studies: DHCS CalAIM

	California Advancing and Innovating Medi-Cal (CalAIM)				
Model	Public Stakeholder Advisory Committee (SAC) supported by DHCS				
Launched	2019				
Brief Description	California Advancing and Innovating Medi-Cal (CalAIM) is a multi-year Department of Health Care Services (DHCS) initiative to implement overarching policy changes across all Medi-Cal delivery systems. It is a vehicle that will help inform the development of DHCS's 1115 and 1915b waivers				
Board Composition	 DHCS' Stakeholder Advisory Committee members are recognized stakeholders/experts in their fields and include: Medi-Cal managed care plans Provider organizations Counties Consumer advocates Foundations and think tanks Labor 				
Funding Model	DHCS is funded through state and federal appropriations				
Additional Considerations	Throughout 2019 and 2020, DHCS will conduct extensive stakeholder engagement for both CalAIM and the Medicaid Section 1115 waiver renewal. The SAC is advisory in nature; they will review and provide feedback for DHCS's waiver proposals through 2019 and 2020				



Governance Case Studies: OSHPD

	Office of Statewide Health Planning and Development (OSHPD)					
Model Structure	Public entity					
Launched	AB 1810 signed into law June 2018					
Brief Description	OSHPD is the leader in collecting data and disseminating information about California's Healthcare infrastructure. Under 1810 the Legislature established the Health Care Cost Transparency Database to collect information regarding the cost of health care and requires the OSHPD to convene a review committee to advise the Office on the establishment and implementation of the database and requires the OSHPD to establish, implement, and administer the database. 1810 requires OSHPD to establish The Healthcare Payments Data (HPD) Review Committee to support the planning and development of the Database.					
Board Composition	OSHPD is a governance agency overseen by a executive staff appointed by the Governor. The HPD Review Committee includes trade associations, non-profits and researchers					
Funding Model	State-funded (appropriation)					
Additional Considerations	Authority of the Review Committee and OSHPD over the database was established in State law. The Committee advances recommendations to the legislature. OSHPD is responsible for adopting the recommendations and developing the Database. The Database may ultimately be housed and managed within State government or by a third party.					



Workgroup Charter

Scope	Description
Charge	This workgroup will develop data and program governance recommendations, including processes to coordinate and prioritize encounter reporting improvement initiatives, oversee changes to standards, policies and processes, and support communication and collaboration.
Membership	Up to 15 members, including two co-chairs, representing providers, health plans, intermediaries, health information technology vendors and government agencies.
Objectives	Through a consensus-based and collaborative process, the Workgroup will:
	 Define core governance principles, critical stakeholder participants, governance structure, authority and decision making processes Articulate the role governance should play in overseeing reporting standardization, prioritizing technology and technical assistance programs, and institutionalizing mechanisms for effective communication across stakeholder groups and lines of business Develop a an implementation plan and roadmap Develop financing and sustainability models The workgroup may also be asked to review solutions being developed as part of the
	Technology and Technology Assistance and Data Standardization workgroup processes.
Meeting Frequency	The workgroup will meet five times from October 2019 through February 2020.
Commitment	Workgroup members will be expected to actively participate in meetings, contribute to, review, and comment on materials, and participants may be asked to present on their experience and best practices.

Workgroup Roster

#	First Name	Last Name	Job Title	Company	Industry
Co-Chair	Charles	Bacchi	President & CEO	California Association of Health Plans (CAHP)	Managed Care Plan or Health Plan
Co-Chair	Sarah	Summer	CEO, Physician Services Organization	California Medical Association (CMA)	Independent Practice Association or Medical Group
1	Bill	Barcellona	Sr. Vice President	APG	Health System, Academic Medical Center, or Hospital
2	Robert	Beaudry	Executive Vice President and CSO	California Primary Care Association	Health System, Academic Medical Center, or Hospital
3	Aaron	Goodale	VP, Health Information Technology	MedPOINT Management	Managed Services Organization or Clearinghouse
4	Allison	Kawamoto	VP, Revenue Management	Blue Shield of California	Managed Care Plan or Health Plan
5	Kristen	Miranda	CA President and West Region Head	Aetna	Managed Care Plan or Health Plan
6	Michael	Myers	President & CEO	Dignity Health MSO	Managed Services Organization or Clearinghouse
6	Jeffrey	Rideout	CEO	Integrated Healthcare Association	Cross-Industry Convener or HIT Vendor
7	Shelley	Rouillard	Director	California Department of Managed Health Care (DMHC)	Government (State, County, Federal)
8	lMartha	Santana- Chin	Sr. Vice President, Health Care Delivery	Health Net	Managed Care Plan or Health Plan
9	Ryan	Witz	VP Healthcare Financing Initiatives	California Hospital Association (CHA)	Health System, Academic Medical Center, or Hospital
10	Nathan	Nau	Chief of Managed Care Quality and Monitoring Division	California Department of Health Care Services (DHCS)	Government (State, County, Federal)
HN	Carol	Kim	VP, Community Investments and Government & Public Affairs	Health Net	Project Leadership/Staff
Harder	Allison	Wolpoff	Director	Harder+Company Community Research	Project Leadership/Staff
Manatt	Jonah	Frohlich	Managing Director	Manatt Health Strategies, LLC	Project Leadership/Staff
Manatt	Anthony	Brown	Consultant	Manatt Health Strategies, LLC	Project Leadership/Staff

Co-Chairs

Workgroup members

Health Net & Harder

Manatt Health



Appendix B Governance Criteria

Decision-Making

Rules and decisions are made in accordance with established policies. Actions and decisions are designed in a non-biased manner to ensure stated objectives are met.

Governance Scope and Decision Making

- Governance will establish a mission, charter and charge that includes oversight of data standardization, technology, technical assistance, and other initiatives.
- Governance will adopt a data-driven decision-making approach, using and analyzing information in a strategic manner, and identifying, targeting and prioritizing providers, groups and organizations in need of most assistance
- Governance decision-making processes will coordinate and oversee core functions, including standardization, technical assistance and other programs
- Governance decisions will be consensus-based
- Governance will establish policies and decision making processes that advance encounter data reporting priorities. Potential examples include:
 - Recommendations to industry stakeholders regarding changes to standards and specifications
 - Recommendations regarding priority initiatives to improve technical assistance, education programs and technology adoption
- Governance will establish and oversee committees that:
 - Have representation from industry stakeholders and subject matter experts.
 - Take into consideration various perspectives and incorporate guidance provided by a variety of stakeholders that represent it.

Authority and Alignment

Governance establishes policies and practices that are designed to ensure compliance and alignment with enforceable regulatory rules, business requirements and incentives.

Regulatory Alignment & Authority

Governance will:

- Follow state and federal regulations and rules to guide and reinforce its recommendations and advance decisions and proposed initiatives.
- Advance initiatives that follow state and federal regulatory rules, processes and requirements, ensuring it does not overstep existing industry oversight structures
- Assess and revise guidance it makes to ensure alignment and avoid conflicting messaging as new State and federal policies are promulgated
- Define under what conditions it formulates and proposes rule and policy changes, and advance them to the relevant federal and state rule-making bodies

Industry Alignment & Authority

Governance will:

- Play a role in recommending how the business community (e.g., health plans, purchasers, etc.)
 will align contracting requirements to support encounter data improvement efforts.
- Define incentive program frameworks (e.g., gates and achievement scores)

Transparent

Activities and performance is monitored, decision making processes are visible to the public, and there is clear visibility into how the rules and policies are created.

Governance will:

- Establish-and make public its policies and processes for formulating and advancing recommendations and decisions
- Make its actions and decisions visible and open to external stakeholders and the public
- Establish clear transparency processes and policies that describe how governance establishes and refines programs and targets it sets
- Support a broad group of stakeholders that develop standards and programs through a real-time collaborative process with broad input facilitated through public comment

Accountable and Responsive

Conscious effort is made to use benchmarks and targets to report and improve performance; with processes and feedback mechanisms to respond and adapt to the changing needs and expectations of all of its stakeholder.

Governance will

- Work with California stakeholders to establish meaningful targets to improve encounter data reporting
- Collect and publish accountability metrics (not collecting encounter data itself) starting with establishing meaningful targets and metrics, then focus on collecting data on the timeliness, accuracy and completeness of data.
- Track industry performance and improvement against agreed-upon encounter data reporting targets and standards
- Leverage what others entities (e.g., DHCS) are doing; translate what's appropriate to impacted organizations downstream (e.g., at the group and practice level) and consider what does/does not translate to other lines of business.
- Be forward-looking, considering future programs (including waivers, new programs and requirements).
- Respond to encounter data performance reports by developing and publishing proposed actions to address ongoing challenges
- Provide opportunities for the public to provide input on decisions and recommendation that it makes, including through public comment prior to new announcements.



Communication

Decisions, guidance and relevant information is effectively communicated to impacted stakeholders

Governance will:

- Monitor the regulatory landscape and business environment to identify and report on changes to
 encounter data reporting standards or requirements that may impact stakeholders or established
 policy and procedures.
- Craft and communicate targeted messages to impacted stakeholders across data standardization, technology and technical assistance programs.
- **Develop communication plans** to stakeholders that may include:
 - Performance reporting
 - Regulation updates and upcoming changes
 - Rationale and implications of federal and State rule changes
 - Data standardization updates
 - New programs initiated to improve encounter data reporting and opportunities to participate
 - Case study spotlight across various stakeholder types

Effectiveness

Governance measures its success by its ability to help enable and lead changes in practice by embracing policies, processes, and initiatives that coordinate and makes the best possible use of available resources

Governance will:

- Establish key performance indicators that monitor how effectively governance is meeting its goals and targets
- Adopt data-driven frameworks for assessing potential impact of initiatives it is assessing
- Adopt processes to evaluate the impact of initiatives it oversees
- Seek stakeholder feedback on the impact they are having on the encounter data reporting landscape and ways they can be more impactful
- Not solely focus on initiatives that advance progress on a statewide basis, but will identify regions, subgroups or constituencies most in need of improvement, and will develop key performance indicators to inform it's analyses
- Develop a decision framework to continue or cease funding for initiatives based on milestones and metrics that are or are not met

Sustainability

Governance processes are designed to be self-sustaining

Governance will:

- Seek funding to establish and sustain encounter data improvement programs and priorities and secure resources to staff governance processes and any committees and operational functions it may establish
- **Develop annual budgets** and processes to ensure revenues and expenses are effectively managed
- **Develop financial controls** to ensure it is using resources according to stated policies and objectives
- Develop, revise and publish an annual business plan
- Design a set of recommendations that will define long term funding solutions

Governance and the structures that support improvement efforts may not be needed in perpetuity; there will be measures and decision points to help governance decide if it should sunset core functions and operations

Participatory/Representative

Public and private stakeholders have a voice and are adequately and meaningfully represented.

Participation

Organization types may include:

- Health plans (Medi-Cal COHS/Local Initiatives; commercial, national plans, etc.)
- Hospital (public, private, systems)
- o IPAs/MSOs
- Community clinics, rural health centers
- Clinicians and private practices
- Public agencies: (DMHC, DHCS, Covered California, CalPERS, OSHPD, CMS)

Advisors to governance may also include clearinghouses, EHR vendors and other technical experts

Qualifications

- There will be minimum defined set of competencies for members serving on governance, such as:
 - Health care industry background
 - o Knowledge of encounter data reporting
 - Ability to represent interests of constituency
- Committees governance forms will comprise volunteer industry stakeholders and subject matter experts
- Governance will require an explicit commitment to diversity, which may include racial, gender, ethnic, cultural, and geographic (e.g., rural, urban, etc.) representation

