## CRG Conference Call, January 22<sup>nd</sup> 2014

| Attendees          |                               |
|--------------------|-------------------------------|
| Neil Pessin        | ССМР                          |
| Michelle McElroy   | Southern Tier AIDS Program    |
| Jessie Sullivan    | Hudson Health Plan            |
| Karen Nelson       | Maimonides                    |
| Shari Suchoff      | Maimonides                    |
| Kristina Monti     | Continuum Health Home Network |
| Shawna Craigmile   | OCMS                          |
| Susan Essocks      | ОМН                           |
| Rob Piculell       | OASAS                         |
| Dawn Lambert-Wacey | OASAS                         |
| Madeline Rivera    | Maimonides                    |

## Update on Consolidated Workgroup Meeting 1-9-14

This group's recommendations on homelessness were presented. NYS indicated that acuity scores may be moving to a tiered model where each member will be either high, medium or low acuity. Therefore the purpose of this group may become how to inform the CRG model to determine the tier in which a member belongs.

## **Patient Activation Measures**

Michelle sent out the Patient Activation Measure (PAM) developed by Judy Hibbard and colleagues at the University of Oregon. PAM and a similar measure created by John Watson of Dartmouth were previously recommended by Dr. Goldfield. Watson's model can be used free of charge while Hibbard's carries a small cost. The group agreed that Hibbard's measure may be preferable, despite costs, as it is more extensively reviewed / established.

Some concern was expressed that the measure would not take into account the unique conditions of the Health Home population, and that patient activation may not be a reliable measure in general. However the consensus was that the measure is reliable, supported as it is by peer reviewed studies, and has been shown to be useful across a broad population.

There was consensus that the group needed to agree on a measure relatively soon so as to begin work with Dr. Goldfield in how best to collect this data to inform the CRG model.

## **Next Steps**

Michelle will work to schedule a follow up meeting for early February. Workgroup members should review the literature and send feedback to Michelle and Neil before that meeting. In the meantime, Neil and Michelle will reach out to Lyn Hohmann about scheduling another call with Dr. Goldfield for mid to late February.