***Welcome to our new EEC format! We are piloting meetings without a roll call. When you are prompted by Adobe Connect for your name, please enter your first name, last name, and state/org (i.e., Lara Kaye (NY)). If you are sharing a screen, please be sure that all in your party add their full names and state into the chat box at the start of the call.***

**CALL IN LINE:** 1 877 273 4202, room **793-903-441. Please mute your line when you are not speaking.**

**ADOBE CONNECT:** [**https://chronicdisease.adobeconnect.com/eec/**](https://chronicdisease.adobeconnect.com/eec/)

|  |  |
| --- | --- |
| EEC Leads | Belle Federman (KS), belle.federman@ks.govLara Kaye (NY), lara.kaye@heatlh.ny.govShelby Vadjunec (WI), Shelby.vadjunec@dhs.wisconsin.gov |
| NACDD Consultant | MaryCatherine Jones, mcjones@chronicdisease.org |
| Date | January 9, 2019 |
| Time | 11am PT/12pm MT/1pm CT/2pm ET |
| Objective | To provide opportunities for staff working on 1815/1817 epidemiology, evaluation, data and performance measurement to collaborate on their work through the exchange of questions, ideas, insights, and resources with their peers. |

| Time/Discussion Lead | Agenda Item | Discussion | Actions |
| --- | --- | --- | --- |
| 2 minutesLara | Welcome and Housekeeping | Welcome to our first meeting of 2019!Instructions for joining Adobe ConnectWe are testing holding meetings with no roll call. If you didn’t enter your firstname\_lastname(state) when you logged on, please enter it into the Chat using this format. |   |
| 5 minutesShelby | New Member Introductions | EEC is a community of peers and we love to know who is with us, especially those who are new in their positions and new to EEC. If you are new to EEC, please introduce yourself:* Name and state
* Epi/eval role
* Which part(s) of 1815/1817 you work on
* What you hope to get out of this group
 | EEC agendas and minutes are sent by email. If you are not on the EEC email list, please add your email address to the Chat and/or email MaryCatherine Jones.  |
|  |  | Maria Cooper-1815/1817 evaluator for TexasBrianna Monahan ND Diabetes Coordinator, 1815Bradley Richardson, University of Iowa, 1815 evaluator |  |
| 15 minutesMaryCatherine | NACDD Updates | * Belle, Lara and Shelby will be representing EEC on the CVH Network Leadership Team. Brittany will be chairing the group, Rachael will be the new GIS liaison, and Paul will be the Peer to Peer Program liaison. It’s great to have such strong representation from EEC on what has historically been a program-oriented group. This bodes well for our intentions to bridge program-data gaps.

In response to feedback at our December meeting, we’re trying out some changes:* Using Adobe Connect for our meetings. We will skip roll call and ask everyone to login and/or submit their names through the chat so we can document attendance.
* NACDD peer exchange webpage for EEC. While we don’t have the technology to have a website where people can post their own content, MaryCatherine can post on behalf of EEC members so we can have all of our attachments/shared resources in one place. In an effort to keep this private to the group, we would not share the link to this page outside of EEC.
* We previously discussed how we can share EEC discussions that take place in between meetings. These often occur when someone asks a question and gets responses by email. While we can post any shared resources to the internal EEC webpage, we’d like to ask whether the question asker can summarize the responses at the next meeting or send them to be included in the minutes. Would this work for everyone?
* We’ve added a Questions from States section to the end of the agenda. While members are always encouraged to submit discussion questions to the agenda, this allotted time would allow for more spontaneous discussions. We have one question that was submitted for today.
 |  |
| 25 minutesLara | 1815/1817 Discussion | * Given that we yet don’t know all of what will be required, how are states collecting data for performance measures, particularly health systems, and working to ensure partners and contractors are collecting/reporting the data needed to report back to CDC?

States are finding it hard to wait for PM profiles because contracts need to be finalized that include data deliverables.Tiffany (ND): ND received approval from our evaluators at CDC to push out our pharmacy assessment. We gathered many PMs from 1305. Kim Crawford had sent out the assessment to EEC via email on 11/14, but it has been updated since then. Tiffany will send it to MaryCatherine.Tiffany: The biggest thing we learned when working with CDC was that we needed the assessment in order to do pharmacy work. We know that some of the questions are worded in a way where we can’t get the exact PM but are working toward it. Lara: Are there other states that have developed tools or advice for tracking PM for the new grants?Courtney(SC): We’re in the process of developing a baseline assessment tool for 1815 and 1817. It will be used for health systems. Our goal is to try to have it completed via their governing body for the SC Office of Rural Health or SC Primary Healthcare Association. Any setbacks are likely to be due to contracts.Lara: What sorts of advice have states given partners re: PMs? Tiffany: Anytime that we’re involved with conversations and see an opportunity to bring up performance measures, we bring this right back to our partners. Small group discussions with CDC on developing PMs have been helpful. Concrete feedback from partners, esp. on cholesterol, has been very helpful to share with CDC to show how health systems would be able to pull information. We’ve seen some tweaks to the PMs as a result of these conversations. Michelle (MI): In terms of chol, did CDC give a better idea of how this could be operationalized? Dora and I have given feedback on this measure. You need some kind of chart or lab data, correct?Tiffany: We had to clarify with CDC whether they were looking for BP AND patients with BC issues or as two separate topics. They are looking for two separate patients. For that activity, chol and BP are separate PMs. We’ve been talking about how each of these will be measured and different options. There is some testing and some optional code that they will recommend that we look at. Our health systems were not confident they could pull this.CDC says they expect that the majority of states wouldn’t be able to report chol data from the beginning but would develop the ability to do it. We have 5 health systems we’re working with and each will pull its EHR data separately. We’ll probably continue to work with the health systems on chol for Years 2-5. Dora (RI): Appreciate that states have been able to provide intensive to CDC on performance measures, but not sure how this works given that there were separate discussions on the same PMs for 1815 and 1817. Could this have been streamlined? Our PM is really sure that the complicated chol measure will be mandatory in 2020. Michelle: Can we we reach out to NCQA to find out whether this is true?CDC: For the cholesterol measure, yes, we understand that it will be a mandatory measure. The suggestion of taking it to your partners to set them up is a great idea. For the two long-term measures, we did convene 1815 first and then let them know we’d take this feedback to the 1817 group because we didn’t want to overburden folks by having people participate in more than 2-3 sessions. We apologize if this seemed unhelpful but thought it would be the best route moving forward to get input from both groups. Dora: This whole process has been helpful to learn about the different ways states will acquire the information depending on your sources (HIE, claims, etc.). We were really trying to map out how it would work. CDC’s approach to engaging states was very helpful.CDC: Workgroups were very helpful for all measures, has helped the team to learn a lot. We want to have measures that are broad enough to speak to the way everyone is implementing and can collect data but allow us to have meaningful data. * Have any states developed advice/tools for tracking of all the requirements, measures, etc. for all the new grants?
* How can EEC support states in ensuring evaluators get added to the correct email lists and on evaluation communications that are sent to the PI?

Rachael (NY): We have such a large team that we actually prefer to only have the PI and lead evaluator be on the CDC email list. That way the PI can distribute information to the program team and I can distribute evaluation related information to the eval team. In the past, we’ve had staff confusion because they think they might need to respond to everything that comes through the 1815/1817 listserv, which is rarely the case. We had no problems adding the correct people to the list – we just asked our project officers to update the list of people from NY who were on the blast email list. We might be in a unique position because we are such a big state, but just wanted to share our perspective as well in case it is helpful. I guess I am not 100% sure I see a role for EEC in this process because states may handle it on a case by case basis, unless a particular state is having trouble or issues accessing the email list.  Kathryn (MO): Including the lead evaluator would be sufficient for our state. We would welcome it going out to the entire eval team. We want to make sure someone on the eval side is included.Tiffany (ND): Our communications are not going to the right people.Danielle (TX): we’d like to understand what all the email listservs are an clarify who needs to be on them. We have people receiving emails but don’t know if everyone else received them.Kathryn (MO): we’ve missed emails since early onAllie (KY): we struggle with this, too. Our PM is inundated with emails and we also have new staff. This combination means it can take a while for communications to get to the eval staff.Mojde: We are also having some issues getting information to the right people.A little bit of redundancy may not be a bad idea, really want to see these emails going to the eval side, not just program. People would rather get it twice than not at all.Adrian (MI): I forward stuff I receive directly.Lara: There are still some issues around this topic. Rachel (CDC): States would need to ask their project officer how to get their lead evaluator on the list. There have been a lot of issues, always are with staff changing. Soon we’ll have a system in place. For now, we’re trying to make sure we have our CDC evaluators forward things to their state evaluation contacts. Some people have designated multiple evaluators from each state.Kamesha (CDC): When we did initial introduction calls for states, the CDC project officers collected the PI plus one and these were put into a listserv. Clearly not everyone got in there, but I can take this back to our team and Lazette and see what we can do. States may need to have a conversation with the PI so they know that evaluators are added.Marla (CDC): Everything is sent to the PI. Some things are sent to the PI and their plus one.Miriam (NACDD): NACDD and CDC need to discuss whether NACDD can be added to the listserv for 1815/1817 communications. With 1305/1422, we took messages related to CVH and sent them to a broader state distribution list through Off the Cuff. We received positive feedback on this. Lara: Let’s plan to follow up with some ideas on communication. If you have additional questions or topics, please email MaryCatherineMarla: Please note the upcoming Category A and Category B evaluation meetings. Will send the details to MaryCatherine for distribution with EEC.  | Tiffany to send ND assessment update to MaryCatherine for distribution to the groupSee information re: CDC Cat A and B eval meetings below. Thanks, Marla! |
| 10 minutesShelby | Questions from States | Does anyone have questions they would like to ask of the group while we’re all on the call? Resources to share?Brittany (UT): Wondering if any states have worked with incorporating Registered Dietitians for team-based care activities? This is something we are working on with our new grant and are currently in the process of developing a survey to assess the use of RDs in outpatient settings for patients with high blood pressure, cholesterol, diabetes, and other chronic conditions, reimbursement for those services, etc. Do any states have any experience with this or planning to implement similar activities?Mojde (NV): we are trying to implement something similar for 1817 and will be in touch with Brittany. Debra (AL): We are, too. Two of our health systems, as part of the lifestyle modification program. One is the lead for the lifestyle modification program. The other is on the management team but not the lead. We’re working with them on the materials. Both sites are independently developing both dashboards and apps that link to dashboards so that patients can enter their data directly into the app and it will link to their EHR through the dashboard. Debra will also be able to access the data. Both health systems are independently developing their own app. |  |
| Adjourn | Next meeting Wednesday, February 13 at 2pm ET. Please email any agenda items to MaryCatherine |

**DP18-1815 Category A National Evaluation and Performance Measure Overview Webinar**

The Centers for Disease Control and Prevention’s (CDC) National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Division of Diabetes Translation will host an interactive webinar for DP18-1815 recipients. Attendees will learn more about the DP18-1815 national evaluation design, updated DP18-1815 performance measure definitions, and key dates and activities.

**Tuesday, January 15, 2019**

12:00-1:00 pm PT, 1:00-2:00 pm MT, 2:00-3:00 pm CT, 3:00-4:00 pm ET

**To join the webinar remotely, follow the instructions below to connect to the presentation and audio.**

**To join the webinar:**

Click on the link <https://adobeconnect.cdc.gov/rbseshizd2hn/>

**To join the audio:** Conference Number: 1-866-692-4541, Conference ID: 12252081#

DP18-1815 **Category B** Recipient Webinar: National Evaluation and Performance Measure Overview

Dear DP18-1815 Principal Investigators and Evaluation Staff,

The Division for Heart Disease and Stroke Prevention (DHDSP) is hosting a webinar to engage recipients in the design of the CDC-led National Evaluation for Category B and provide an overview of the updated DP18-1815 Category B performance measure definitions.

In this webinar, the DHDSP **Category B** evaluators will discuss:

* Category B National Evaluation design and timeline
* Recipients’ role in the National Evaluation
* The process of clarifying, updating and revising performance measure definitions based on recipient feedback
* Overview of the performance measures, noting key changes and updates to the definitions
* Q&A

**When:**Thursday, January 17, 2019

**Time:**3:30 – 4:30pm EST

**How to join the webinar**:

* **To join the webinar**: Click on the link to join the webinar at the specified time and date:

<https://adobeconnect.cdc.gov/rth57i4j5xd7/>

* **To join the audio**: Dial-in to the conference line and enter the conference ID.

**Conference Number**: 1-866-692-4541

**Conference ID**: 12252081#

The webinar will be recorded and shared about a week after the live event.

If you have questions about this webinar, please contact Marla Vaughan (mhv1@cdc.gov).

EEC Members

\_x\_\_ Debra Hodges AL

\_\_\_ Kortnei Scott AL

x\_\_\_ Sharada Sarah Adolph AR

\_\_\_ Diana Cassidy CA

\_\_\_\_ Catrina Taylor CA

\_\_\_ Lisa Rawson CA

\_\_\_ Carolina Downie CA

\_\_\_ Ian Danielson CO

\_\_\_ Renee Calanan CO

\_\_\_ Sara Wakai (UConn) CT

\_\_\_ Eric Horan (UConn) CT

Exc. Stephanie Poulin CT

\_\_\_ Latrice Holt DC

\_\_\_ Ian Quan DC

\_\_\_ Jamie Forrest FL

\_\_\_ Keneshia Holmes FL

\_\_\_ Megan Macdonald FL

\_\_\_ Edward Clark FL

\_x\_\_ Rodrigue Pierre FL

x\_\_\_ David Gbogbo FL

\_\_\_ Monyette Childs GA

\_\_\_ Emma Bicego GA

\_\_\_ Lance Ching HI

\_\_\_ Ann Pobutsky HI

x\_\_\_ Kara Mastalski ID

\_\_\_ Janae Price IL

\_x\_\_ Jennifer Wellman IL

x\_\_\_\_ Emily Ohannesian IN

\_x\_\_ Jack Kinsey IN

x\_\_\_ Lindsey Sanner IN

\_\_\_ Anne Abbott IA

\_\_\_ Brad Richardson IA

\_\_\_ Cathy Lillahoj IA

x Mengyi Li KS

\_\_\_\_ Karen Cinnamond KY

\_\_\_ David Davis KY

\_\_\_ Sarojini Kanotra KY

\_\_x\_ Allie Merritt KY

\_\_\_ Annie Preaux LA

\_\_\_ Sanouri Ursprung MA

x\_\_\_ Dinesh Pokhrel MA

\_\_\_ Meg Her MA

\_\_\_ Lori Kiel MA

\_\_\_\_ Vicki Nielsen MA

\_\_\_ Lisa Gardner MD

x\_\_\_\_ Linda Carter MD

\_\_\_\_ Carly Stokum MD

x\_\_\_ Caitlin Pizzonia ME

\_\_\_\_ Ruth Dufresne ME

x\_\_\_ Kira Rodriguez ME

\_\_\_ Pamela Bruno ME

\_\_\_ Toho Soma ME

\_\_\_ Gregory Parent ME

\_x\_\_ Adrian Zeh MI

x\_ Michelle Byrd MI

\_x\_\_ Kristina Dawkins MI

\_\_\_ Emily Styles MN

\_\_\_ Jim Peacock MN

\_\_\_ Megan Chacon MN

\_\_\_ Kyle Waller MO

\_\_x\_\_ Kathryn Metzger MO

\_\_\_ Fei Teng MS

x\_\_\_ Jessie Fernandes MT

\_\_\_ Carrie Oser MT

\_x\_\_\_ Dorota Carpenedo MT

\_x\_\_\_ Victoria Troeger MT

\_x\_\_\_ Trina Filan MT

\_\_\_ Sam Thompson NC

x\_\_\_\_ Essete Kebede NC

\_x\_\_\_ Clint Boots ND

\_\_\_ Janna Pastir ND

x\_\_\_ Tiffany Knauf ND

\_\_\_ Laran DeSpain ND

x\_\_\_ Brianna Monahan ND

\_x\_\_\_ Liz Gebhart NE

\_\_\_ Karen Craver NH

\_\_\_ Uta Steinhauser NJ

\_\_\_x\_ Humphrey Costello NM

\_x\_\_ Wayne Honey NM

\_x\_\_ Laura Feldman NM

\_x\_\_\_ Mojde Mirarefin NV

\_\_\_ Lisa Sheretz NV

\_\_\_ Masako Berger NV

\_\_\_ Mark Ma NV

Exc.\_ Rachael Austin NY

\_\_\_ Ann Lowenfels NY

\_\_\_ Traci Capesius OH

\_x\_\_ Melissa Chapman Haynes OH

\_\_\_ Joyce Lopez OK

\_\_\_ Joyce Samuel OK

\_\_\_ Fahad Khan OK

\_x\_\_ Beth Vorderstrasse OR

\_x\_\_\_ Jackie Williams PA

x\_\_\_\_ Dora Dumont RI

x\_\_\_\_ Elise George RI

x\_\_\_ Kristian Myers SC

x\_\_\_ Kelly Kavanaugh SC

x\_\_\_ Courtney Brightharp SC

x\_\_\_\_ Joshua Sellner SC

x\_\_\_ Betsy Barton SC

x\_\_\_ Katie O’Shields SC

x\_\_\_\_ Ashley Miller SD

\_\_\_ Lisa Kocak TN

\_\_\_ Donald Perry TN

\_\_\_ Jacob Black TN

\_\_x\_ Maria Cooper TX

xx\_\_ Danielle Hodgson TX

x\_\_\_ Melissa Dunn TX

x\_\_\_\_ Emily Johnson TX

Exc. Brittany Brown UT

Exc. Paul Meddaugh VT

\_\_\_ Shahid Hafidh VA

\_x\_\_\_ Lavonda Harrison VA

\_\_\_ Djibril Camara VA

x\_\_\_ Angela Kemple WA

\_x\_\_ Jessica Marcinkevage WA

x\_\_\_\_ Peter Dieringer WA

\_\_\_ James Oloya WA

\_\_\_ Megan Elderbrook WI

\_x\_\_\_ Lena Swander WI

\_\_\_ Jing Fang CDC

x\_\_\_\_ Kamesha Ellis CDC

\_x\_\_\_ Marla Vaughn CDC

\_\_x\_\_ Rachel Davis CDC

\_x\_\_ Aisha Tucker-Brown CDC

\_\_\_ Valerie Lawson CDC

\_\_\_ Gia Rutledge CDC

\_\_\_ Timethia Bonner CDC

\_\_\_ Robert Montierth CDC

\_x\_\_ MaryCatherine Jones NACDD

\_\_x\_ Miriam Patanian NACDD

\_\_\_ Trina Thompson NACDD

\_\_\_\_ Natasha McCoy NACDD

\_\_\_\_ Ann Marie Shields NACDD