

**Alaska Health Care Commission**  
**Policy Recommendation Importance & Impactability Rating Sheet**  
**DUE MONDAY, SEPTEMBER 22, 2014**

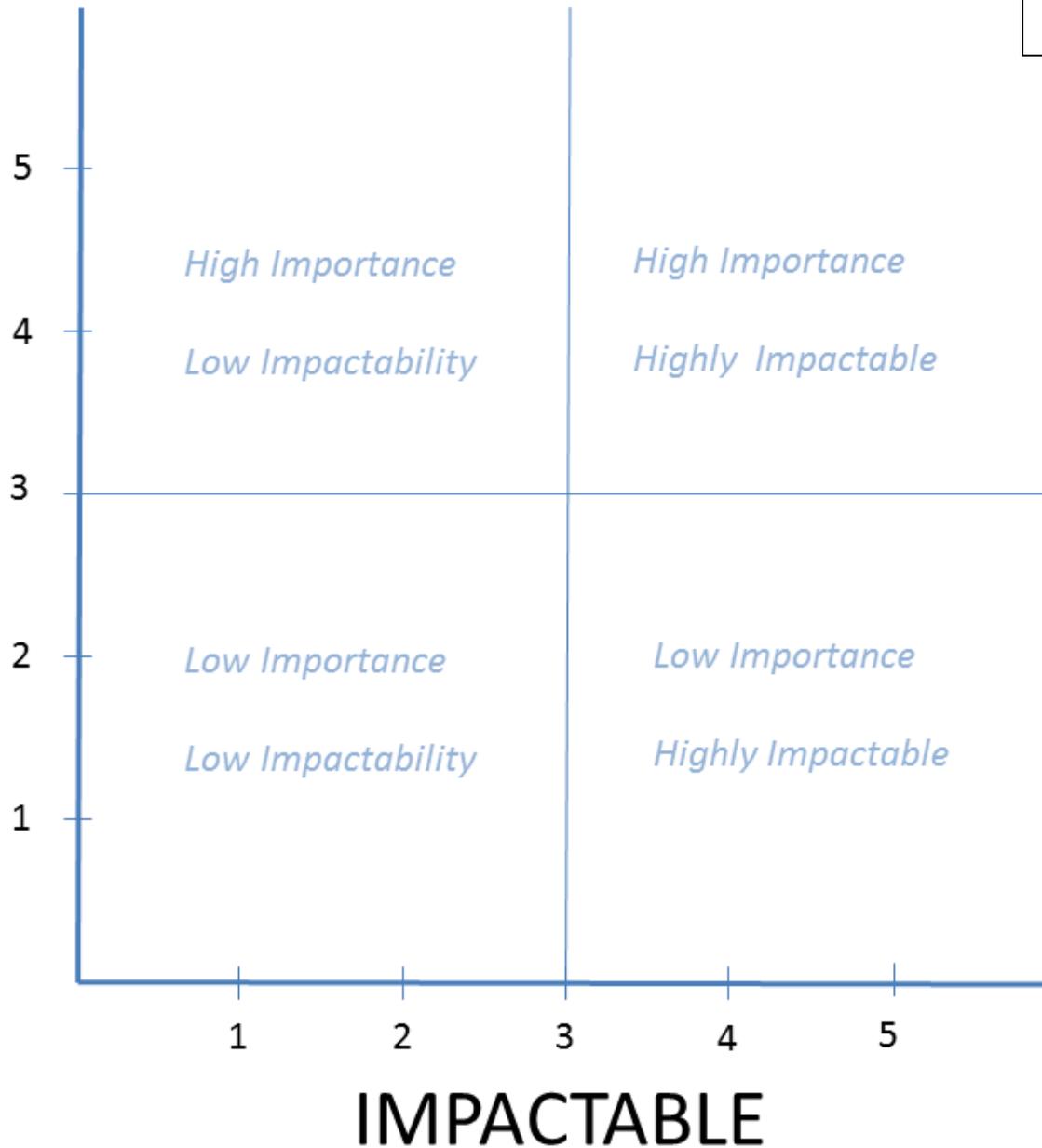
*Rank each Policy Recommendation on a scale of 1 to 5 on each of the two dimensions (Important and Impactable - see next page for definitions), with "5" being the most Important/Impactable, and "1" being the least. The purpose of this ranking exercise is to guide the development of the Commission's work plan for next year for facilitating implementation of current recommendations, and so the policy recommendations should be ranked relative to each other; therefore, **please distribute the policy recommendations across the five potential ranks so that at least five policies are allocated to each rank** (i.e., there should be at least five policies ranked "5", at least five ranked "4", etc.) for each of the two dimensions (both Important and Impactable). Page #s refer to "Core Strategies & Policy Recommendations."*

CORE STRATEGIES & POLICY RECOMMENDATIONS*	Important	Impactable
<b>I. Ensure the Best Available Evidence is Used for Making Decisions</b>		
I. 1.a,d,e. Incorporate Evidence-Based Medicine in Pay & Benefit Design and Provide Decision-Support Tools (see page 3)		
I. 1.b,c; 2. Provide Evidence-Based Medicine Training & Education (pg. 3)		
<b>II. Increase Price and Quality Transparency</b>		
II. 1. Investigate Transparency Legislation (see page 4)		
II. 3. Establish an All-Payer Claims Database (APCD) (see page 4)		
<b>III. Pay for Value</b>		
III. 1,2. Implement Payment Reform; Start with PCMH (see page 4)		
III. 3. Support Payment Reform with Data (see page 4)		
III. 4. Convene a State of Alaska (SOA)-led Multi-Payer Collaborative (pg. 4)		
III. 5. Reduce Fraud, Waste & Abuse (recommendations to be finalized Dec 2014)		
<b>IV. Engage Employers to Improve Health Plans &amp; Employee Wellness</b>		
IV. 1. Increase Transparency (Transparency Legislation & APCD) (page 5)		
IV. 2. Modify Insurance Payment Regulation (see page 5)		
IV. 3. Model Best Practices for Employee Health Management (page 5)		
IV. 4. Reform Workers' Compensation Laws (page 5)		
IV. 5. Regulate Dispensing Clinician Practices (page 5)		
<b>V. Enhance Quality and Efficiency of Care on the Front-End</b>		
V.1-5,7. Foster/Support Patient-Centric Primary Care (see page 6)		
V. 6. Pilot Patient-Centered Medical Home (PCMH) Initiative (see pg.6-7)		
V. 8,9. Support Trauma System (see page 8)		
<b>VI. Increase Dignity and Quality of Care for Seriously Ill Patients</b>		
VI. 1,2,3. Educate Public & Clinicians (see page 8)		
VI. 4. Investigate POLST/MOST Program (see page 9)		
VI. 5. Establish an Advance Directives Registry (see page 9)		
VI. 6. Foster Telehealth & Reimburse for Palliative/Hospice Care (page 9)		
<b>VII. Focus on Prevention</b>		
VII. 1. Encourage and Support Healthy Lifestyles (see page 9)		
VII. 2. Implement Obesity Prevention Program (see page 9)		
VII. 4. Integrate Behavioral & Primary Care; Behavioral Health Screening		
IV. 6. Adopt Opioid Control Policies & Programs (see page 6)		
<b>VIII. Build the Foundation of a Sustainable Health Care System</b>		
VIII. A. 1,3. Health Information Technology: Facilitate Telehealth (pg. 11)		
VIII. A. 4c. Health Information Infrastructure: Establish an APCD (pg. 11)		
VIII. B. Health Workforce Development (see page 12-13)		

\* Commission policy recommendations that are already in implementation, e.g., Mandate Participation in the Hospital Discharge Database, are not included in this exercise.

Your Rankings will be used to populate this grid, and will facilitate the October 2 decision-making work session to determine the Commission's work plan for next year.

**IMPORTANT**



### DEFINITIONS

**IMPORTANT** =  
What is most likely to move the health care system towards the Commission's Vision?

**IMPACTABLE** =  
What is most likely to be successfully implemented because of facilitation by the Commission (i.e., on what will Commission facilitation have the greatest impact)?