



**Dual Eligible Demonstration Contract Coordination of Care Workgroup**

Meeting Minutes  
May 18, 2012

**Opening:**

The regular meeting of the Coordination of Care Workgroup began at 11:30 a.m.

**Present:**

Louise Apodaca, Colorado Cross Disability Coalition  
Elisabeth Arenales, Colorado Center on Law and Policy  
Sean Bryan, HCPF  
Susan Cassel, Family Voices Colorado  
Marya Choudhry, HCPF  
Marci Eads, HCPF  
Drew Kasper, Colorado Access  
Laura Kiel, HCPF  
Susan Langley, The Denver Hospice  
Carol Meredith, The ARC Arapahoe and Douglas Counties  
Kirstin Michel, HCPF  
Lois Munson, Senior Counseling Group, LLC  
Sheila Powell, Boulder Hospice  
Lesley Reeder, Rocky Mountain Health Plans  
Jim Rowan, Division of Behavioral Health  
Casey Ryan, Long-Term Care Options, LLC  
Vickie Sims, HCPF  
Jerry Smallwood, HCPF  
Greg Trollan, HCPF  
Meredith Warman, Colorado Community Managed Care Network

**New Business:**

1. Kirstin welcomed everyone and thanked them for their comments and feedback on the proposal. She explained that the proposal would be submitted to CMS by the end of May.
2. The process for the Dual Eligible Advisory Committee will be determined in June.
3. Representatives from the RCCOs were invited to today's meeting. Today's meeting was intended to discuss what is currently working well in care coordination, what gaps exist, and how organizations and RCCOs can better work together moving forward.
4. Susan asked if the RCCOs could comment first. The group agreed, and Kirstin called

on Lesley.

Lesley addressed the group by introducing herself and the region she represents, Region 1. She reminded the group that she could only talk about her region but assured participants similarities exist among all the regions along with flexibility. All of the RCCOs work closely together.

Rocky Mountain Health Plans has located and developed trans-disciplinary Care Coordination Teams (CCTs) that include a variety of entities such as a private/public partnership for medical care, nurses, and behavioral health specialists. They reach out to other providers including rehabilitation providers and developmental disability providers. They gather data to determine the higher cost, higher risk clients and target care coordination for those clients.

Many successes have occurred with this approach, and one positive aspect is the involvement of the Larimer Center for Mental Health. They are preparing for the enrollment of dual eligible individuals as well as care transitions for clients.

Sean asked about the interaction with the SEPs and the CCBs and if there had been issues with information sharing related to HIPAA [Health Insurance Portability and Accountability Act]. Lesley responded that communication was ongoing within the parameters of HIPAA. Jim added that Larimer County works well within those limits.

5. Elisabeth asked Lesley if the RCCO's Advisory Committee had discussed dual eligible individuals' enrollment and what changes would be needed. Lesley responded that it had not been discussed in that forum yet. Current hot topics had been RCCO metrics and the referral process. Preparing for enrollment of dual eligible individuals would be an ongoing process, always with areas for improvement.

Elisabeth requested more clarification on discussions about enrollment of dual eligible individuals. She wondered what barriers exist, what training would be needed, and what additional providers would be included. Lesley replied that some of the anticipated barriers relate to disconnects in payment policy and benefit structure between Medicare and Medicaid.

6. Carol asked if discharge had been discussed yet. Lesley indicated that care transitions would be a significant piece of work. In Larimer County, for example, their Care Coordination Team is housed within the hospital system, which aids in communication. However, that would not be the case for all regions.

7. Kirstin mentioned a new care coordination effort being spearheaded by Marci and Jerry. She asked Jerry to explain the project to the group.

Jerry stated that a fractured process currently exists across programs, departments, and providers. The new project would identify and map all current efforts and services for Medicaid clients. To improve processes, it would be necessary to get a clear picture

of existing services and who is delivering them. Although the project had recently begun, the Department would collaborate with partners and advocates.

Jim stated that this would be helpful with the substance abuse benefit since it seems that many need clarification. Jerry replied lack of understanding often contributes to benefits being delivered differently. Jim agreed that continuity of care is needed along with more easily understandable benefits.

Susan asked about the project's timeframe. Jerry replied that no timeframe currently exists. The project had just begun at an internal level. A plan would be created, and community outreach would be conducted. Susan wondered if the project would be completed before the dual eligible individuals are enrolled into the ACC Program. Jerry replied that the goal would be to have parts of it underway although it would not be finished.

Elisabeth responded that the timing needs to be clarified with much work to be completed and a need for greater detail. Marci agreed and informed the group a timeline would be developed within the next couple of months.

Elisabeth responded that we would not want to be behind the curve or have the Department make all the decisions. Marci agreed and said that everyone is discussing the needs and approach. The layers of care coordination need to be mapped, and the new project would help. Susan added that the data would need to be well managed after it is received for it to be useful. She stated that she wished the project had been started before the Demonstration had begun. Marci agreed that it was long overdue. Carol stated that reaching out to a limited number of clients during the preliminary research phase would be helpful in obtaining a clearer picture. Elisabeth expressed the opinion that the proposal's budget should include money for outreach so that it would be done well and thoroughly.

Lois suggested defining meetings, workgroups, and committees by population might be helpful in obtaining input as both projects move forward. Kirstin replied that workgroups could evolve and the process for the Dual Eligibles Advisory Committee would be determined in June. A new phase of work would begin in the summer. Susan agreed with Lois' suggestion about groups being more population specific to get a better perspective on each area. Lesley also agreed and stated that the RCCOs need more information about the different populations, their needs, and their Medicare and Medicaid benefits.

8. Kirstin reviewed the goals of the group and asked for questions, feedback, or input on those topics. Lois stated that she would like clarification from the other RCCOs and wanted to know if she could contact them directly to gain better understanding of how they could best coordinate services with them. Jim stated that all the RCCO contact information was on the webpage but difficult to locate. Greg stated that he would provide the list and links to Kirstin, who would distribute it to the workgroup.

Lois requested clarification about whom the RCCOs contract with. RCCOs contract with Primary Care Medical Providers (PCMPs), but they can establish relationships with any type of provider. Drew stated that his RCCO is frequently in contact with other agencies so that care coordination works well and that contact with providers, advocates, and caregivers is welcomed.

Greg stated that the Department is working on a letter about information sharing that will increase confidence by all parties in this area.

9. Kirstin mentioned the Department would like to request funding for future conferences and trainings to bring everyone together. The Dual Eligibles Advisory Committee could be involved in planning and organizing these conferences. Lesley asked how the Dual Eligibles Advisory Committee would be formed and who would be included. Kirstin replied that those details had not been determined yet. Completion and submission of the proposal was the Department's first priority. The process for the Dual Eligibles Advisory Committee would be determined in June.

10. Kirstin stated that everyone was still welcome to submit comments about the proposal. The next full stakeholder meeting had been scheduled for June 1<sup>st</sup> at the Multiple Sclerosis Society. She thanked everyone for their participation. The meeting was then closed.

**Closing:**

Meeting ended at 1:00 p.m.

Vickie Sims prepared the minutes.