



## A G E N D A

Medicare-Medicaid Program Ad Hoc Advisory Subcommittee  
 303 East 17<sup>th</sup> Ave., Denver CO 80203  
 Seventh Floor, Rooms 7AB

**To call in: 1-877-820-7831, Passcode: 977000#**

**Thursday, January 8th, 2015**

**10:00 a.m. - 12:00 p.m.**

(The meeting may finish early, but adequate time has been scheduled if needed.)

*The mission of the Department of Health Care Policy and Financing is improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.*

**Meeting objectives:**

1. To review and finalize previous meeting minutes.
2. To review and discuss RCCO experience thus far.
3. To provide updates on the Demonstration Project and the Accountable Care Collaborative (ACC) Program Improvement Advisory Committee (PIAC).

I. Opening Remarks	<ul style="list-style-type: none"> <li>• Welcome</li> <li>• Introductions</li> </ul>	Co-Chairs (10 minutes)
II. Review	<ul style="list-style-type: none"> <li>• Minutes (Comments/Corrections)</li> </ul>	Co-Chairs/All (5 minutes)
III. Discussions and Actions	<ul style="list-style-type: none"> <li>• ACC:MMP Update</li> <li>• RCCO Update and discussion</li> <li>• Client/Provider communications update</li> <li>• Future of the program, open discussion</li> </ul>	The Dept. (15m) RCCOs/All (30m) The Dept. (10m) All (20)
IV. Updates	<ul style="list-style-type: none"> <li>• ACC Program Improvement Advisory Committee (Public Comments and Discussion)</li> </ul>	Reporting Liaison/ Co-Chairs (10m)
V. Closing Remarks	<ul style="list-style-type: none"> <li>• Follow-up Information</li> <li>• Other</li> </ul>	Co-Chairs (10m)

Reasonable accommodations may be provided upon request for persons with disabilities. **Please contact Van Wilson at [Van.Wilson@state.co.us](mailto:Van.Wilson@state.co.us) or 303-866-6352 for assistance.**

## **Participants**

Sheryl Bellinger	Elizabeth Baskett
Van Wilson	Francesca Maes
Shelly Spalding	Christine Fallabel
KK Forthofer	Leah Jardine
Leslie Reeder	Lois Munson
Joe Farr	Adam Bean
Kristen Trainor	Deb Knolls?
Elizabeth Erickson?	Shannon Mcknoll (sp)
Alex Andrew?	Matt Vedal
Doug Farmer	Sophie Thomas
Amy Miller	Mary Catherine Rabbit
Mary Kay Kisseberth (sp)	Jennifer Martinez
Lori Roberts	Greg Andleman (sp)(VOA)
Janelle Johnson	Casey Jane
Carrie Yeager	Kelly Morrison
Patricia Yeager	Tom Hill
Gary Montrose	Joe Smiley
Cathy Shipler (sp)	Lacey McFall
Todd Lessley	Sarah Roberts
Mary Dwyer	Carol Mitchell
Sarita Reddy	Dave Rastatter
Stephanie Brooks	Stephanie Brooks
Jan Eyer	Leah Burura
Theresa Diane	Molly Yotte
Beth Denan	Liz Mcpherson
Grant Jackson	Pat Jefferson
Amy Pulick	Christina Johnson
Brian Dannon	Rochelle Larson
Barb McConnell	Joanna Mortinson
Kristin Trainor	Jeanine Vincent
Heidi Walling	Chris Scofield
Kelley Vivian	

[All participants may not have signed in.]

Van Wilson, MMP project manager, welcomed everyone and called the meeting to order at 10:00 a.m. Phone-in and in-person participants introduced themselves.

## **Review**

Van asked the subcommittee to review the previous meeting minutes. September and November minutes were approved.

### **Discussion and Actions**

This meeting was a combination of the quarterly stakeholder meeting group and monthly subcommittee group. Van explained that meetings will continue to be combined through 2015, with meetings held every other month.

Van gave a program update on the following items: enrollment numbers for November 1 2014 are 12,538, and through December 2014 enrollment is 16,421. Van reflected on the first hurdle of enrollment, and noted that the real work begins now. We have three years to make improvements in the delivery system. Opt out rates are under 9%, but these numbers need to be confirmed because of various sources. The Department turned in the first quarterly CMS/RTI demonstration report on Jan 12<sup>th</sup>, and Van shared generally a few of the questions that were included in the report.

The Department plugged the upcoming LTSS webinar to be hosted in later January 2014.

Tom Hill asked if the RTI report would be published. The Department noted that RTI would be publishing an aggregate report that would include results from a site-visit as well, and that would give the best picture of the program.

RCCO representatives were asked to share their responses to the following questions: What is working well so far? Biggest challenges now and going forward? Top budget priorities? Engagement activities with providers in your area? What have you learned about the population?

Jenny Nate from RCCO1 explained that they were holding client/caregiver focus groups to learn more about how to respond to the challenges facing clients. Administrative issues have continued to be challenging. Building relationships with other care providers has been a significant area of focus. RCCO1 is starting a hard-of-hearing workgroup to learn more about these issues as well.

Drew Kasper from RCCO 2, 3, and 5 explained that they have had varying degrees of client engagement when completing SCPs. They have a web-based tool that auto-populates the SCP. Goal setting with clients is difficult. Volume of clients is difficult and training delegates is difficult. Budget priorities include staffing and neighborhood development. They have been embedding care managers in hospitals. Transportation to specialists is a challenge in region 2. They have had success reaching out and forming MOUs with SEPs, CCBs, and CMHCs in their regions. However, on the ground it is still difficult. Some organizations are requiring client ROIs. Nursing home interaction is the most difficult so far.

Lori Roberts from RCCO 4 explained that their community outreach is clicking. Their biggest challenge is volume of clients, which has hurt other care coordination activities. They are finding that other organizations and clients are asking why the RCCO is completing the SCP as opposed to other agencies. Top budget priorities include SCP completion and reporting capabilities. Educating providers, especially small providers, has been a continual challenge. Lori noted that their call-center volume is up.

Adam Bean from RCCO 6 explained that their IVR is working well, except for individuals in facilities. Top budget priorities include expanding care coordination staffing resources and provider outreach. Relationships with hospitals and “mom and pop” practices has been resource intensive. They have learned that 70% of their population has a disability vs 30% strictly elderly clients.

Joe Farr from RCCO 7 explained that client volume and data accuracy are their biggest challenges. Top budget priorities include SCP completion and creating the delegated relationships to complete the SCP. They have learned that in smaller communities, it works well to embed a care coordinator in provider offices.

Sophie Thomas from the Department provided an update on the communication efforts. She mentioned the LTSS training at the end of January and reminded participants of the training we’ve held in the past. She explained the focus interviews to be conducted in late April and the client “tele-town hall” to be held in early May. Van noted that our focus has shifted to client retention.

Van shifted the conversation to the future of the program. He asked the subcommittee to share their thoughts on what they thought the focus should be. Sheryl noted that the subcommittee could identify the “one thing” that we will see change in at the end of the program. Gary Montrose noted the importance of the mFFS system and how unique the opportunity is. Mary Catherine Rabbitt noted that many of the elements will be qualitative, and we need to keep those in mind. The conversation wrapped up and Elizabeth Baskett noted that we should continue the conversation in the following meeting.

Sheryl asked if there was anything else we need to discuss in the meeting. Nothing was voiced. The meeting was adjourned.

ACTION ITEMS	RESPONSIBILITY	TIMEFRAME
None Identified		