



COLORADO

Department of Health Care
Policy & Financing

MINUTES OF THE MEETING OF THE HEALTH IMPACT ON LIVES: HEALTH IMPROVEMENT SUBCOMMITTEE

303 East 17th Avenue 11th Floor Conference Room 11C

July 28, 2016

Call to Order

David Keller called the meeting to order at 3:03 PM.

Roll Call

- A. Participants Present:** Berry, Emily; Hall, Erin; Aultman-Bettridge, Tonya; Kaufmann, Ellen; Kennedy, Russ; Lessley, Todd; Madrid, Amalia; Mortenson, Katie; Koltonski, Christian; Brabson, Jason; Gaub, Tim; Davis, Paula; Keller, David; Conway, Jolene; Thomas, Sophie; Harris, Ben
- B. Participants on the Phone:** Bartilotta, Kathy; Forbes, Elizabeth; Mills, Gretchen; Montrose, Gary; Nate; Jenny; Nancy

General Announcements

A reminder that the Health Impact on Lives committee has moved its meeting time to **the fourth Thursday of every month**. The next meeting is scheduled for **Thursday August 25, 2016** beginning at 3:00 p.m. at 303 East 17th Avenue, Denver, CO 80203, Conference Room 11C.

Approval of Minutes

David provided a brief overview of the proceedings from the committee's May meeting. The committee's conversation centered on ACC KPIs. The committee shelved the topic of the ER KPI after extensive discussion. The committee expressed interest in taking up EPSDT and how Healthy Communities could improve and align with RCCO performance improvement strategies. The topic has been slated for the committee's August meeting. The Department's Quality and Health Improvement section gave a presentation regarding KPIs for ACC Phase 2 to the committee. Following David's overview, there was a motion to approve the minutes from the May meeting. The motion was seconded, and the minutes were approved.

Discussion

- A. PIAC Meeting Report-out:** Todd provided an update from the June PIAC meeting as there was no meeting in July. Evaluators from TriWest and the Colorado School of

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.
www.colorado.gov/hcpf



Public Health presented their findings from the initial rounds of their ACC evaluations. PIAC had numerous questions about each evaluation and requested follow-up from the Department and the evaluators. Todd requested that the Colorado School of Public Health's presentation be sent to this committee for those members who were not able to attend PIAC. The Department's Health Data Strategy section also gave a presentation on the COMMIT and BIDM transition and rollout. David expressed disappointment that the ACC will not use 3M's CRG calculation as he encouraged Children Hospital's to adopt this function. Todd mentioned that Truven will have a new CRG.

B. TriWest ACC Qualitative Evaluation: Before introducing the TriWest presentation, David mentioned that the committee has long been interested in evaluating member experience. It had previously reviewed member experience surveys, including CAHPS. Moving forward, it was hoping to identify a tool that could be linked to patient outcomes and identify patient experience measures for ACC Phase 2.

Tonya, a TriWest co-lead, began with an update on the evaluation's progress. TriWest recently published the final report from the dyad interviews concerning the best practices of care coordination within the ACC. In hopes of increasing the meaningfulness of their findings to stakeholders and members, TriWest created a one-page handout outlining their major findings and requested feedback on the handout's format and content (please see the distributed handout). The document initially describes methodology and sampling of each of the 10 dyad interviews and outlines best practice findings and recommendations for members and care coordinators. The central recommendation was to build trust between a member and his/her care coordinator through the following strategies: foster positive relationships between a member and his/her provider; follow up quickly on requests; take a holistic approach to a member's life and needs; maintain and address a member's own health; set and achieve small goals; and be honest and open-minded about available services. Erin mentioned that some dyads spoke about how the member was referred to the care coordinator by a family member and how members initially confused the RCCO with social services or "the system." David commented that that sentiment and confusion was true across members and provider settings.

Todd and David expressed initial concern regarding the recruitment strategies and areas. It appeared that no interview was conducted in Denver County and only one was done in the northeast region of the state. Erin clarified that the document's map was incorrect and had misplaced an interview in Commerce City when, in fact, the interview had taken place in Denver. Tonya mentioned that while they had recruited in the northeast region of the state, they were unsuccessful at obtaining a dyad.

David commented that the findings would help re-orient providers' primarily medical-centric notion of care coordination to one that accounted for the social aspects of a member's life. He also was optimistic that it would help better define care coordination.



There is often confusion when trying to distinguish the responsibilities and roles of a social worker, a patient navigator, a community health worker, a legal aid worker, and a care coordinator. There is a spectrum of care coordination, and having field descriptions would bring clarity to the conversation. Ellen commented that the document and findings would help inform the formation of the Regional Accountable Entities (RAEs) in ACC Phase 2. Todd echoed these comments and added that care coordination offered through the ACC is still a relatively new concept to providers. The document would help increase awareness among providers regarding these resources. Both Todd and David recommended shortening the takeaways and comments sections. Ben requested that all further comments on the document be sent to him. He would follow-up with TriWest directly.

Tonya then transitioned the conversation to the next phase of the qualitative evaluation. In the hopes of interviewing 70 members about their overall experience with the ACC, TriWest is staging a mailing of an outreach letter to 1400 members regarding the interviews. The letter outlines TriWest's privacy policy, how members can contact interviewers if they, themselves, elect to participate, and the benefits – a \$10 grocery card – they can receive should they participate. Interviews began on July 25, but no preliminary feedback and findings are available. Tonya mentioned that she led a similar initiative in Washington State regarding child protective services and was optimistic that they could conduct 70 interviews by mid-August.

Emily asked if interviews would be conducted in both English and Spanish. Tonya confirmed that TriWest has two Spanish speaking interviewers, but no additional languages would be covered. Todd asked if TriWest would be contacting all 1400 identified members. Tonya clarified that only 70 interviews would be conducted and that 1400 members were identified in hopes of achieving 70 interviews because conducting telephonic surveys was difficult. Erin noted that among the 1400 members, telephone number data was poor.

Tonya next outlined the sampling protocol. TriWest will be using a stratified random sampling methodology and will use the following criteria when stratifying the sample: language (English vs. Spanish); geography (rural vs. urban); risk (high vs. other); age (adult vs. children); ethnicity; foster child status; and care coordination location (delegated partner vs. RCCO). For children, TriWest will interview their parents as there is no formal consent process and will use a different interview protocol. Tonya also mentioned that using a stratified random sampling methodology allows TriWest to target missing demographic groups and adjust their outreach strategies in real time.

Tonya reviewed TriWest's interview domains. Key domains include: barriers to care; satisfaction with care; and access to specialty providers. The team has been meeting at least once a week to discuss and revise questions within each of those domains. David and Todd asked about the type of providers represented in the specialty provider section, particularly dentists and behavioral health providers. Todd wondered whether



members would understand what behavioral health was. Tonya said that both specialties are represented in that domain, but interviewers will only ask about access and use of those providers, not their problems understanding those providers. Tonya also mentioned that the interviews will focus on the degree to which members are engaged in their care. In particular, the interviews will employ a car analogy, where the occupants of the car are the care team members, the direction and speed of the care are the potential health status and the pace at which it is being achieved, and the type of car reflects the member's lifestyle. Members will be asked to describe each element of this analogy to assess their overall engagement in their care.

David asked whether TriWest will know if the members have a chronic condition because this will likely affect the degree to which they utilize care. Erin said that TriWest will look at utilization frequency as a proxy, and Tonya mentioned that TriWest could do a retro-active split of the interviews based on health assessments. David suggested using CRG score and re-iterated that low utilizers of the systems would not provide as useful of feedback as other groups.

Tonya said that TriWest was hoping to use their findings from this next round to not only shed light on the decisions that support better health outcomes but also to inform the development of a consumer experience survey that the Department could use long-term. David concluded that the committee will be interested in following the evaluation's implementation and the potential development of the survey. Elizabeth praised the TriWest team for the comprehensiveness of its evaluation.

- C. Subcommittee Housekeeping:** David commented that the committee needs to review the statuses of its voting members as some members are no longer involved with the committee. He requested that the Department provide a membership update at the committee's August meeting. David also mentioned that Elisabeth Arenales has expressed interest in becoming a co-chair of the committee. He will put forth her nomination at the August PIAC. Ben briefly reviewed the committee's anticipated August agenda. Jeff Helm and Gina Robinson from the Department will attend to discuss the current work of Healthy Communities related to EPSDT. The committee may also discuss current RCCO strategies used to improve EPSDT performance.

Wrap-up

Decision Items: Please send any remaining comments on the TriWest materials to Ben.

Action Items: Ben will pass along the Colorado School of Public Health's evaluation presentation from the June 2016 PIAC to committee members. He will also conduct an analysis of the committee's current voting membership and present it at the August meeting.

Next Meeting Topic(s): The committee will discuss collaboration opportunities between RCCOs and Health Communities regarding EPSDT performance.



Parking Lot: None.

Adjourn

The meeting was adjourned at 4:12 PM.

Reasonable accommodations will be provided upon request for persons with disabilities. Please notify Ben Harris at 303-866-2399 or benjamin.harris@state.co.us or the 504/ADA Coordinator hcpf504ada@state.co.us at least one week prior to the meeting to make arrangements.

