



Improving and Bridging Systems Subcommittee *Charter*

Vision: An integrated system¹ that holistically addresses the needs and improves health care access and outcomes of Health First Colorado (Colorado's Medicaid Program) members, particularly those with complex needs and who require services and care coordination across systems.

Mission: To improve health care access and outcomes for Health First Colorado members, particularly those with complex needs and who require services and care coordination across systems, by bridging relevant systems with the Accountable Care Collaborative (ACC).

Purpose: The Improving and Bridging Systems (I&BS) subcommittee serves as a laboratory for strategic innovations that bridge and integrate systems for Health First Colorado members, particularly those with complex needs and who require services and care coordination across systems. I&BS convenes various systems and partners, including the Colorado Department of Health Care Policy and Financing (Department), other state agencies, providers (behavioral health, physical health, substance use order, and social services), and Health First Colorado members to develop and advise on best practices and strategies that foster system integration. Furthermore, the sub-committee monitors performance and implementation of these best practices and strategies to ensure the success and effectiveness of integration efforts. Based on performance and implementation, the sub-committee develops recommendations for broader system and infrastructure re-design. See Figure 1.

Person, issue, or event that caused the subcommittee to be established: I&BS was formed by the Accountable Care Collaborative Program Improvement Advisory Committee (PIAC) in 2012.

Objectives: I&BS has the following objectives:

- Convene the necessary subject-matter experts (SMEs) as well as broad, systems-level thinkers and Health First Colorado members to advise on and develop best practices, challenges, and strategies for system integration that improve health outcomes for Health First Colorado members, particularly those with complex needs and who require services and care coordination across systems;
- Advise and make recommendations to PIAC and the Department regarding the best practices that bridge and integrate systems for members, particularly those with complex needs and who require services and care coordination across systems;
- Ground the re-design of the relevant systems in the member experience by incorporating member feedback and perspective in this sub-committee and other meetings; and
- Respond to requests from PIAC and the Department to investigate topics and strategies related to focus areas.

Focus Areas: In SFY 2017, I&BS will focus on cross-system care models, specifically (see Figure 2):

- Corrections-involved Members: In April 2017, the Department released a strategic plan to improve the re-entry care model, including substance use integration and pain

¹ Improving and Bridging Systems defines system as a delivery mechanism and network that coordinates personnel, technology and financial resources to meet the needs of its relevant membership. This definitions applies throughout the document.





management, for those Health First Colorado members releasing from the Department of Corrections (DOC) facilities. As part of that work, the Department convened an operational taskforce, Health Care and Justice Transitions (HCJT), to develop and implement the care model outlined in the strategic plan. The Department and PIAC delegated strategic oversight of HCJT to I&BS in order to understand how justice systems were being integrated in the ACC. I&BS will monitor the progress of HCJT's care coordination work, including inter-agency process improvements, performance metrics, and delivery system challenges that can be addressed through program re-design.

- **Medicare-Medicaid Members:** After a three-year demonstration to help improve care coordination for Health First Colorado members eligible for Medicare, the Department fully integrated the work into the ACC. I&BS will continue to monitor the partnerships and care models for members with Medicare and Medicaid, specifically those developed between single-entry points (SEPs), community-centered boards (CCBs), LTSS providers, and the ACC.

Process: In SFY 2017, I&BS will accomplish its objectives within its focus areas through the following activities:

- Discuss, monitor, and recommend program re-design strategies regarding system integration;
 - Analyze the experience and outcomes of Health First Colorado members involved in the aforementioned use-cases;
 - Identify and recommend innovative strategies positively impacting performance to be scaled across the ACC;
- Discuss and advise on inter-agency and cross-system information sharing and communication;
 - Research and develop guidance on legal barriers to information sharing;
 - Advise on inter-agency and cross-systems technical platform development.

Outcomes: I&BS will develop recommendations, as appropriate, for the Department regarding cross-systems care models as it relates to care for Health First Colorado members, particularly those with complex needs and who require services and care coordination across systems. Outcomes of the subcommittee will be reported to PIAC and the Department.

Subcommittee Operations: The sub-committee will comply with the [ACC PIAC by-laws](#). All specific assignments and schedules subject to change over time.

Meeting Schedule: Monthly, 1st Thursday from 1:00 - 2:30PM at the Department and via telephone.

Voting Membership: The subcommittee will discuss areas of representation needed for voting membership during its restructuring discussion. Based on the discussion, subcommittee chairs will subsequently determine existing members' interest and commitment and will recruit additional voting members as necessary. In the event that a voting member can no longer serve or is temporarily unable to serve on the subcommittee, the chairs will appoint a replacement voting member with feedback from both subcommittee participants and voting membership.

Attendance: While official decision-making responsibilities are delegated to voting members, all meetings and discussions are open to the public.





Quorum: A quorum for the subcommittee is a simple majority of voting members present or attending by phone.

Charter revised January 2018





Figure 1. IBS Membership and Reporting Structure

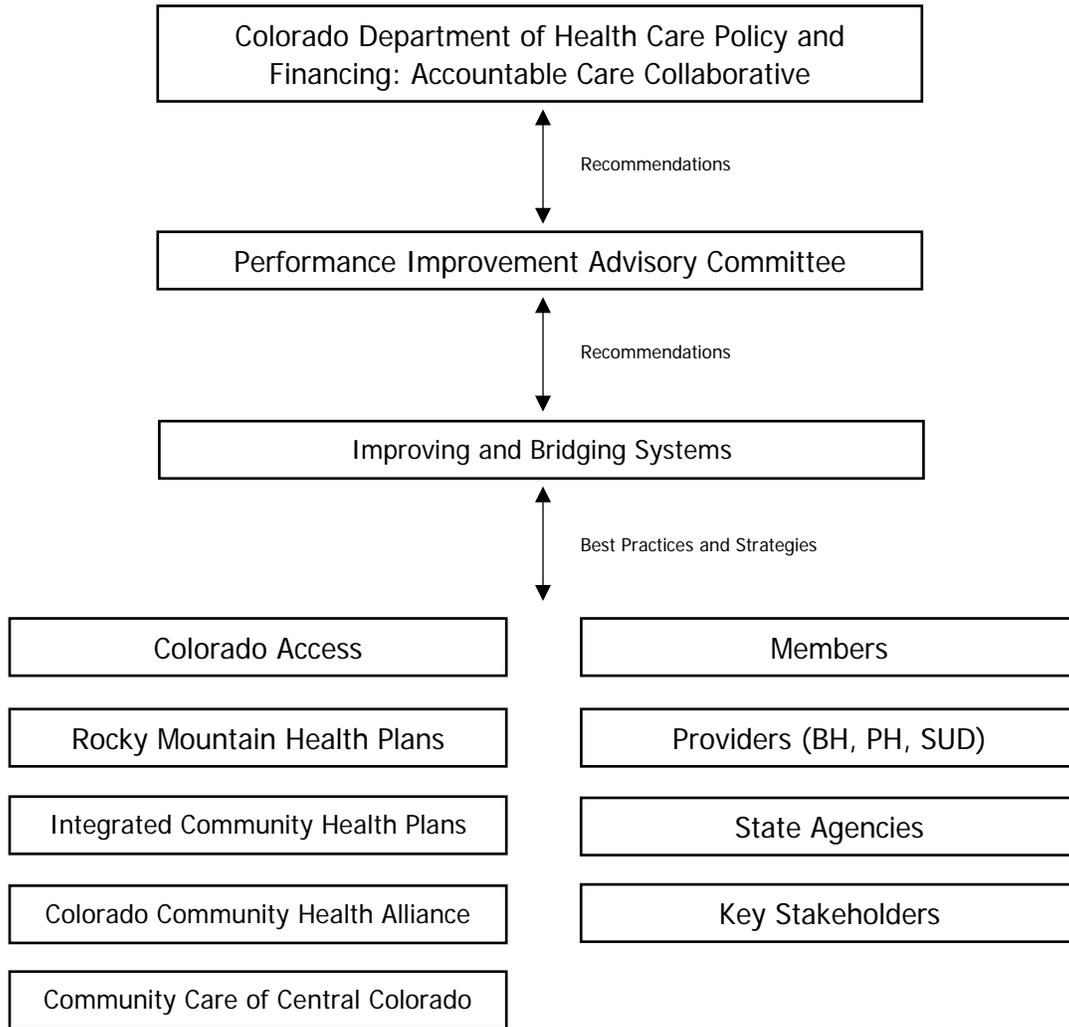




Figure 2. IBS Focus Areas

