

Improving and Bridging Systems Subcommittee

Minutes

Meeting Information			
Date	Thursday, August 2, 2018	Time	1:00 – 2:30 PM
Location	303 E 17 th Avenue, 11 th Floor, Room 11C	Call-in Number	1-877-820-7831 // 946029#
Committee Purpose	Serve as a laboratory for strategic innovations and guidance that bridge and integrate systems for Health First Colorado members, particularly those with complex needs and who require services and care coordination across systems.		
Meeting Purpose	Review Department of Corrections recommendation revisions and finalize statements of work for Medicare-Medicaid.		

Meeting Attendance	
Voting Members and Participants	Invited Guests
Abe Lahr, Candy Wolfe, Bryan Standley, Heather Piernik, Van Wilson, Gary Montrose, Joanna Martinson, Sophie Thomas, Stephanie Farrell, Terri Hurst, Ben Harris, Francine Haber, Mary Kay Kisseberth, Krista Fuentes, Carol Ann Hendrikse*, Joseph Anderson*, Clara Cabanis*, Abigail Tucker*, Matthew Wilkins*, Vicki Sanchez*, Louisa Wren*, Carol Plock*	

*Attended via phone.

Meeting Items					
Item No.	Time	Owner	Description	Attachment	Action No.
1	1:00 – 1:05	CP	Roll call and June minutes' approval. Ben called the meeting to order at 1:03 PM. Minutes for June were subsequently approved with no corrections.	1	
2	1:05 – 1:20	ST	PIAC Transition Update. Sophie gave the report out from PIAC. The last official meeting was in June, but the Department held a listening session in July to field concerns and issues regarding the implementation of Phase II. The session provided an overview of the triage process, which entailed daily calls with vendors to assess and troubleshoot various challenges, as well as the questions and issues form on the Department's external-facing website. The main issues had been misattribution and panel sizes, particularly for Medicare-Medicaid eligible members, misunderstanding of Denver Health enrollments in the provider portal, and provider and site billing IDs. Bryan asked how providers could get attribution by location IDs. Ben said it was a known issue, and RAEs are working to outreach specific provider in order to correct attributions. Joanna asked if providers could get access to the passively enrolled list. Sophie said to consult with specific RAEs as they would be able to cross reference previous roster reports with current 834 files. Ben and Sophie also reiterated that questions should be channeled through the RAE or the external issues form.		



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3	1:20 – 1:30	BH	<p>Sub-committee Review Process. Ben gave an overview of how sub-committees conduct deep dives in specific areas. Typically, projects and areas are work are discussed initially at the larger PIAC and then delegated to the sub-committees. After the respective sub-committee has completed its deep dive into the subject matter, they develop and present policy recommendations and guidance to the PIAC for approval. Approved work products are then sent to the Department for implementation. The Department and PIAC have been trying to get into a rhythm where sub-committees follow up on the progress of their developed recommendations. Bryan asked what the typical timeframe was for this process. Ben said the average duration for other sub-committees was nine months. However, Ben felt that the process could be tightened to six months. Stephanie echoed the need for follow up on the progress and implementation of recommendations. Van added that public measures would be good accountability mechanisms. Ben said that having discrete scopes of work would make it easier to assess and measure progress across the delivery systems.</p>	2	
4	1:30 – 1:55	BH/KH	<p>Review and finalize Medicare-Medicaid statements of work. Ben reminded the sub-committee that the document had been developed and revised over that past four months. Ben had incorporated the final edits but had an outstanding question regarding provider education. Kathleen said that one of the outstanding challenges from the demonstration was providers’ understanding of Medicare coverage of certain benefits, including oxygen and durable medical equipment as well as critical access hospital swing beds. Van added that the sub-committee should look into how behavioral health is covered across the two payers. Francine added that there are a lot of existing Medicare training and information resources out there for providers. She suggested creating a compilation of those resources so the sub-committee didn’t recreate the wheel. She also asked to the see the final report of findings from the Demonstration. Ben said he would investigate its status. Gary suggested including a statement of work around risk stratification. Ben applauded the suggestion but said the Department deferred to our contractors and local partners to develop risk stratifications that were specific to their communities. Gary inquired about the timelines of each statement of work and suggested that in terms of process it came down to identifying what has already been done and then developing new resources to fill in the gaps. Carol reminded the sub-</p>	3	1



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			committee that the intention of today's conversation was to finalize the topics. The next steps would be to operationalize them. To that point, Ben asked the sub-committee to rank the four scopes of work via a quick online survey. That survey would come in the next week.		
5	1:55 – 2:20	KF/TH	Review draft criminal justice recommendations. Krista said that Terri and she had incorporated comments and tried to tighten the language. Terri said they specifically rewrote recommendation five to look at the broader effectiveness and impact of increased coverage. Abigail wondered whether community mental health centers and federally qualified health centers should be listed as community partners in recommendation four. Terri said that the specific recommendation was written to reference those organizations that could connect members to providers. Carol said that every community is different, and those providers may be the connecting points themselves, so it would be helpful to include them. Terri and Krista both said that members specifically called out these organizations as the key connecting points. Abigail wondering about developing a metric for the fifth recommendation. Ben said the Department was reviewing historic data and was interested in developed appropriate metrics for this population. Van said that creating metrics connected to basic operations was key. Terri suggested that defining metrics should be a part of the recommendation itself. Many people agreed. Carol also requested that the executive summary be split into two paragraphs. Ben said they would work quickly to make the revisions in order to get them ready for September's initial PIAC meeting.	4	2
6	2:20 – 2:30	CP/BH	Sub-committee housekeeping. Ben reminded the sub-committee that September's meeting would be the beginning of the every other month cycle. September would be devoted to the Medicare-Medicaid Demonstration. SME's for that area were expected to attend, while criminal justice SME's were optional.		

Meeting Action Items

Date Added	Action No.	Owner	Description	Due Date	Date Closed
8/2/2018	1	BH	Develop MMP statement of work priority survey.	8/9/2018	
8/2/2018	2	TH/KF/BH	Revise criminal justice recommendations.	9/6/2018	

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