

Improving and Bridging Systems Subcommittee

Minutes

Meeting Information			
Date	Thursday, February 1, 2018	Time	1:00 – 2:30 PM
Location	303 E 17 th Avenue, 7 th Floor, Room 11B	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 and discuss ACC integration of Medicare-Medicaid demonstration and sub-committee membership.		

Meeting Attendance	
Voting Members and Participants	Invited Guests
Ben Harris, Joanna Martinson, Ravenne Bye, Candy Wolfe, Louisa Wren, Katie Pachan Jacobson, Kayla Tuteur, Gary Montrose, Jenny Nate, Sophie Thomas, Carol Plock*, Harriet Hall*, Jonathan Muther*, Carol Ann Hendrikse*, Cristy Dodd*, Carol Meredith*, Jen Hale Coulson*, Terri Hurst*, Amy Yutzy*, Vicki Sanchez*	Van Wilson, Kathleen Homan

*Attended via phone.

Meeting Items					
Item No.	Time	Owner	Description	Attachment	Action No.
1	1:00 – 1:05	CP	Roll call and October and January minutes approval. Ben called the meeting to order at 1:05PM and took roll call. Minutes from October and January were subsequently approved.	1,2	
3	1:05 – 1:15	CP	January PIAC Report Out. Carol gave the report from PIAC's January meeting. This sub-committee's charter was presented and reviewed. PIAC members had concerns about a lack of a pediatric case study, adequate representation from the Medicare-Medicaid demonstration and criminal justice system, and adequate member perspectives. Some also expressed concern about whether the RAEs could make an impact on these populations and issues during implementation, but the Department gave feedback that these populations were priorities and required work regardless of vendor transition. The future of PIAC was also discussed, and it was determined that more behavioral health representation would be necessary. In light of the PIAC edits, Carol asked the sub-committee to approve the charter. Gary requested that LTSS providers be added to the list of providers under the Medicare-Medicaid demonstration language. With the additional edits, the sub-committee approved the charter.	3	
4	1:15 – 1:40	VW	Review Medicare-Medicaid demonstration progress. Van Wilson gave an overview of the Medicare-Medicaid demonstration. The intent of	4	



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			<p>the demonstration was to create a more coordinated system for highly vulnerable members who required services across different providers and payers. From Colorado’s perspective, the intent was to use the ACC as the vehicle for that systems change. The demonstration officially began in 2014 after an initial workgroup began meeting in 2011 and later submitted an official proposal to CMS. It ended in December 2017. Through the demonstration, the ACC team worked hard to create systems and assessment tools and protocols for the relevant members. However, the lack of buy-in from other systems and the clinical assessments between actual providers made the work challenging. Van said the ACC team did help improve basic coordination, but complex coordination remained challenging. Moreover, the team found that the tested assessment – the shared care plan (SCP) – was not necessary for all members. Gary wondered whether the SCP could have been done by risk level. Van said that the Department has always had a flexible policy on risk stratification among care coordination and deferred to the RCCOs. He also added there is little national consensus on the appropriate risk stratification. Carol Ann said that Rocky had tweaked the Department’s SCP and added a few more items to it to make it a holistic screener for physical health, behavioral health, and social needs. All members still receive it. Jenny asked what the SCP completion rate was. Van said they were still tabulating results, but rough estimates said nearly one-third of all members received a SCP. He felt like there was still room for improvement in regards to deciphering which members should actually be assessed and how it should be operationalized.</p>		
5	1:40 – 2:15	All	<p>Discuss and approve areas of focus for integration of Medicare-Medicaid demonstration within the ACC. Carol asked Van for other key areas and topics that required oversight of the sub-committee. Van said there were three key areas: 1) how RAEs coordinated and shared information with other providers, particularly LTSS providers; 2) how RAEs deployed the assessment; and 3) how providers could be educated on Medicare benefits and systems. Carol asked the sub-committee for feedback on the key areas that were most relevant to the sub-committee’s charge. Jenny said RAEs would need help from the Department around data sharing. She also said that understanding the practices of partners and providers was key to helping re-create a better and more competent care culture for this population. Bringing those lessons learned into the</p>		1



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			<p>behavioral health side would be pivotal moving into Phase 2. She also said that it should not be up to the RAEs to provide Medicare information and education. Joanna expressed concern that new RAEs who don't have relationships with skilled nursing facilities and other key providers would face significant challenges during their start up periods as it took a while for RCCOs to build those relationships. Ben and Van suggested that the sub-committee do an environmental scan of coordination techniques – both for provider relations and info sharing – to understand best practices moving forward. Carol said that the three key points sounded like four: 1) best coordination practices among providers; 2) best information sharing practices between providers; 3) best care assessment practices; and 4) Medicare education for providers. Gary affirmed the split of information sharing and care coordination but acknowledged that they were connected. He also said that Colorado has been a pioneer in creating educational resources for providers as evidenced by their second nation-wide webinar on this issue. Louisa added that work around the TEFT grant also applied here, and she didn't want the sub-committee to reinvent the wheel. Gary and Van agreed with that connection and added that other systems changes – the benefits utilization management system, conflict-free case management legislation – also applied. Jenny said that behavioral health needed to be explicitly called out in the coordination and information sharing elements. Carol said that they would work to flesh out each point with operational ideas and will bring them back for sub-committee discussion in April.</p>		
6	2:15 – 2:25	CP/BH	<p>Sub-committee follow-up: review current sub-committee membership and discuss recruitment strategies. Carol said that in order to achieve success in these use cases, the sub-committee needed to have representatives who were subject-matter experts, broad systems thinkers, policy experts, and members or member advocates. When it came to those categories, the sub-committee only had one criminal justice representative but not a voting member, a few behavioral health representatives, one Medicare-Medicaid representative, a few systems thinkers, and a little member representation. Terri said she was open to becoming a voting member. Harriet clarified that she was not a voting member. Katie agreed with the representation categories and said that the community health center representatives come from the behavioral health space. Carol asked Van to think about recruiting members from the</p>	5	



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			Medicare-Medicaid demonstration's sub-committee for this sub-committee. Carol also asked the sub-committee to think of other nominations to fill the needed representative categories.		
7	2:25 – 2:30	BH	Committee Housekeeping and Wrap Up. Ben reminded the sub-committee that they would continue to physically meet at the Department. The meeting was adjourned at 2:30PM.		

Meeting Action Items

Date Added	Action No.	Owner	Description	Due Date	Date Closed
02/01/2018	1	VW	Develop project statements for four key areas of Medicare-Medicaid demonstration oversight.	04/05/2018	

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