

## Improving and Bridging Systems Subcommittee

### Minutes

Meeting Information			
<b>Date</b>	Thursday, June 7, 2018	<b>Time</b>	1:00 – 2:30 PM
<b>Location</b>	303 E 17 <sup>th</sup> Avenue, 11 <sup>th</sup> Floor, Room 11B	<b>Call-in Number</b>	1-877-820-7831 // 946029#
<b>Committee Purpose</b>	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.		
<b>Meeting Purpose</b>	Discuss HCFP's corrections approach and historic member experience with Medicaid.		

Meeting Attendance	
Voting Members and Participants	Invited Guests
Terri Hurst, Katherine Collins, Sharon Adams, Carol Plock, Candy Wolfe, Joanna Martinson, Francine Huber, Mary Kay Kisseberth, Gary Montrose, Abe Lahr, Sophie Thomas, Emily Berry, Ben Harris, Stephanie Farrell, Kayla Tuteur, Aubrey Kirgan*, Christy Dodd*, Andrea Kedley*, Colby Connally*, Jamie Zias*, Joseph Hankerton*	Krista Fuentes

\*Attended via phone.

Meeting Items					
Item No.	Time	Owner	Description	Attachment	Action No.
1	1:00 – 1:05	CP	<b>Roll call and May minutes' approval.</b> Carol called the meeting to order at 1:03PM. Minutes from May were subsequently approved.	1	
2	1:05 – 1:10	BH	<b>May PIAC Report Out.</b> Ben gave the May PIAC report out. Ben and Patrick Gordon, Vice President of Rocky Mountain Health Plans, gave a presentation and update on the managed care pilot, Rocky Prime, within region 1. The pilot covers six counties and provides full-risk capitated benefit for physical services for certain member populations within the area. The pilot is in its fourth year of operations and has afforded the Department the opportunity to test and develop delivery system innovations. Anita Rich also presented recommendations regarding a no show investigation that Provider and Community Issues had conducted. Many members had questions about the root causes for no shows, but overall, PIAC approved the recommendations. The Department also gave updated regarding ACC Phase II. The Department has created a member resources center specific for issues and concerns from members. The Department has also issue a call for new PIAC members. So far, they have received over 100 applications. The Department expects to full transition to the new PIAC by this Fall.		
3	1:10 – 1:40	KF/TH/CP	<b>Discuss member experience with justice system and Medicaid.</b> Terri gave a recap of the previous meeting's conversation. The Department had partnered with the Colorado Criminal Justice Reform Coalition (CCJRC)	2	1



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		<p>to conduct four focus groups with justice-involved members who been released onto Medicaid coverage. Staff coalesced the findings from the groups and proposed initial recommendations. Krista added that each focus group was recorded and used semi-structured questions. Ben said that because this a new population for Medicaid, it was important that the Department take a member-driven approach to developing delivery system strategies for this population. Carol said this type of work was within the scope of the subcommittee's charter. Stephanie asked whether these recommendations could go beyond Department of Corrections into other areas of the justice system. Ben agreed and said the Department hoped to use and apply these recommendations with jails, community corrections, and courts. Carol requested that explicit language be written that these recommendations be for Department of Corrections but that the broader vision applied to other areas and could be used as tools to provoke conversations in other arenas. Joanna noted that these recommendations have already served as a starting point and tool to illicit conversations within localities about this work.</p> <p>Carol asked for comments and questions for each specific finding and set of potential recommendations.</p> <p>For the first, Joanna asked how members would be enrolled into a RAE and noted that there was a lag between eligibility and enrollment. Ben said that the 1915b waiver grants the Department authority to automatically enroll members into specific health plans. Thus, it reduces the lag to accessing care coordination services. In terms of attributing members to a RAE, the Department will need to investigate previous utilization but will rely on county of release. Terri commented that Department of Corrections has done an excellent job of enrolling members before release. The follow up mechanism of confirming that the member is enrolled was still a challenge.</p> <p>For the second, Jamie raised the concern that many members were given a limited supply of medications upon release but were running out before accessing a provider. Terri said that was Department of Corrections policy. There still were areas for improvement around bridging medications for serious issues as well as accessing medical records for members. Carol suggested adding specific topics and issues that the recommendations</p>		
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		<p>didn't touch on at the end of the document. Krista said the Department was working with the Department of Corrections to create a cross agency care transitions plan. Candy and Sharon also mentioned possibilities to share medical records electronically. Candy also suggested potentially having a floating prescription upon release. Terri asked if the Department was going to create specific appointment timeliness standards for this population. Ben said the Department was going to look at historic data before establishing concrete metrics. Sophie added that there are appointment standards but not for special populations. Carol suggested that even within special populations, the Department needed to use risk stratification when establishing these criteria.</p> <p>For the third, Ben said this made the most sense but was the hardest as much of this work was outside the control of the Department. Candy asked whether member handbooks and education materials were going to be updated in light of the program changes. Sophie said yes. Terri added that CCJRC was also in the process for updating their materials. They were also developing a member-facing video that would be implemented at the end of the summer.</p> <p>For the fourth, Carol said they needed to identify the people and agencies down the road that members would most likely interact with. Terri suggested parole offices as well as community based re-entry organizations across the state. The latter are used consistently because they are trusted, community-based partners. Ben asked that the recommendations be explicit about those partners. That way contract managers can coach RAEs to collaborate with them. He also asked whether there were any other partners that should be added to the list. Stephanie said TASC services should be there as it was based on a national transitions model. However, that contract was currently in flux.</p> <p>For the fifth recommendation, Carol wondered why there were no recommendations put forth. Krista said it was more about telling the narrative of the impact of Medicaid. Stephanie said this was a good opportunity to develop recommendations that encompassed the broader systems and resources beyond Medicaid. Candy asked whether RAEs could ask simple questions of whether the member's health care needs are being</p>		
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			<p>met. Carol said that the care coordinators will know the available resources within their communities. Sophie suggested coaching RAEs to provide information for post-Medicaid options. Joanna said there were issues of identifying members whose Medicaid was ending and connecting them to subsequent resources. Sophie and Ben said they would dig into systems options. Sharon said there were plenty of coverage education materials. Carol said these members were too high risk to fall through the cracks. Gary wondered if a care plan like the MMP service coordination plan could help notify the necessary providers and players. Terri said that when member engagement was there, members take initiative to resolve these issues. The central issue was whether there were trusted resources to effectively engage members. Stephanie also added that there are often multiple care plans being implemented. Mary Kay asked about the overlap and issues with Medicare. Ben said that roughly 15-20 members are released who are dually eligible for Medicare and Medicaid. These were particularly challenges members because Medicaid eligibility was contingent on Medicare eligibility processes, which were not sensitive to the incarcerated members' challenges.</p> <p>Terri said she would incorporate the edits into other recommendations for the fifth finding. Carol said adding a vision state at the beginning to help scope and contextualize the document. Stephanie asked about incorporating an evaluation component to the recommendations. Krista agreed and suggested language around qualitative and quantitative assessments.</p>		
4	1:40 – 2:00	CP	<p><b>Review and finalize Medicare-Medicaid statements of work.</b> Carol welcome the two new Medicare-Medicaid subject matter experts, Mary Kay Kisseberth and Francine Huber. She also said that the Department staff had taken the comments from previous meetings and incorporated them into a revised statement of work. It became apparent that Mary Kay and Francine had not seen the document, so Ben said he would send out the document after the meeting. Kathleen gave a high level overview of the document. The three main areas were identification of collaboration points between LTSS providers and RAEs, improvement of the shared service plan, and development of a shared measurement set. Gary said the document was well crafted and added the following edits: language around investigating what's working and what's not, including community based</p>	3	2



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			organizations with LTSS providers, standardizing the service coordination plan, developing guidance for data sharing agreements, and aligning KPIs with quality of care metrics for LTSS providers. Ben said he would send out the document for further subcommittee review before the August meeting.		
5	2:00 – 2:30	CP/BH	<b>Sub-committee housekeeping and celebration.</b> Carol said they were going to take a summer break and cancel the August meeting. They would do an initial review of the criminal justice recommendations and the MMP statements of work. Ben said the Department was very thankful for the members' participation and, especially, Carol's leadership in this work. The meeting was adjourned for cake at 2:23 PM.	4	

#### Meeting Action Items

Date Added	Action No.	Owner	Description	Due Date	Date Closed
6/7/2018	1	TH/KF/BH	Revise findings into draft recommendations.	8/2/2018	
6/7/2018	2	All	Review MMP statements of work.	8/2/2018	

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