



MINUTES

Medical Quality Improvement Committee (MQuIC)

4th fl. Conference Rm 1570 Grant St

July 11, 2013 1:30 p.m. - 3:30 p.m.

Attendees	Absent/Excused Continued
Katie Mortenson, Health Care Policy and Financing	Annie Lee, Kaiser Permanente
April Gonzales, Colorado Choice (by phone)	Colleen Moss, Rocky Mountain Health Plans
Irene Pomirchy, Colorado Access (by phone)	Alana Berrett, Health Services Advisory Group
Carrie Bandell, Colorado Access	Keechia Merriweather, Kaiser Permanente
Melisa Kulasekere, Colorado Access (by phone)	Tammy Gianfrancisco, Health Services Advisory Group
Darlene White, Rocky Mountain Health Plans (by phone)	William Heller, Health Care Policy and Financing
Rachel Henrichs, Health Services Advisory Group (HSAG) (by phone)	Kathryn Jantz, Health Care Policy and Financing
Jill Bystol, Rocky Mountain Health Plans (by phone)	Kristy Swanson, Health Services Advisory Group
Teresa Craig, Health Care Policy and Financing	Paula Davis, Colorado Community Health Network
Jackie Hudson, Rocky Mountain Health Plans (by phone)	Katie Brookler, Health Care Policy and Financing
Kate Bell, Health Services Advisory Group (by phone)	Christina Melendez, Health Services Advisory Group
Barbara McConnell, Health Services Advisory Group	Craig Gurule, Denver Health Hospital Authority
Jeremy Sax, Health Care Policy and Financing	David Klemm, Rocky Mountain Health Plans
Cynthia Lamb, Kaiser Permanente (by phone)	Russell Kennedy, Health Care Policy and Financing
Nancy Sonnenfeld, Kaiser Permanente (by phone)	MaryJo Strobel, Kaiser Permanente
Westley Reed, Denver Health Hospital Authority (by phone)	Allison Kennedy, Denver Health Hospital Authority
David Brody, Denver Health Hospital Authority (by phone)	Marilea Rose, Health Services Advisory Group
Heidi Walling, Health Care Policy and Financing	Gina Robinson, Health Care Policy and Financing
Jerry Ware, Health Care Policy and Financing	Wendy Talbot, Health Services Advisory Group
Lynn Nash, Colorado Choice (by phone)	Diane Somerville, Health Services Advisory Group
Absent/Excused	Polly Wilson, Colorado Access
Suzan Livengood, Denver Health Hospital Authority	Camille Harding, Health Care Policy and Financing
Amber Saldivar, Health Services Advisory Group	Sara Lomeli, Health Services Advisory Group
Jessica Nell, Denver Health Hospital Authority	Judy Zerzan, Health Care Policy and Financing
Bethany Himes, Colorado Access	
Manuela Heredia, Colorado Choice	
David Mabb, Health Services Advisory Group	
Meg Bayerl, Colorado Access	
Mary-Katherine Barroso, Denver Health Hospital Authority	
Shelly Siedelberg, Denver Health Hospital Authority	
Christine Tagliaferri, Denver Health Hospital Authority	
Dr. Susan Pharo, Kaiser Permanente	
Meadow Jaime, Colorado Access	
Alan Kislowitz, Health Care Policy and Financing	

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Topic	Discussion	Result
Introductions, Additions to the agenda	Jerry reviewed input about Health Services Advisory Group (HSAG) being awarded the External Quality Review Organization contract going forward. Barbara noted that HSAG was working on the next compliance site review schedule and looking for plans to volunteer to be audited in the coming months.	
Review May 2013 Minutes	Minutes were reviewed and approved with minor changes.	To view past minutes and additional information about MQuIC visit www.colorado.gov/hcpf and click on Boards and Committees.
Review draft September face to face meeting agenda & Consider adding an antipsychotic agenda topic	Group had no objections with approving the draft agenda for the September face to face meeting. Carrie requested to discuss another annual Performance Improvement Project (PIP) training and Katie noted that it can be discussed at the September meeting. Heidi asked the health plans if they would be interested in a topic about reducing antipsychotics in elderly clients. Jackie and Carrie expressed interest.	Heidi will follow up with Jerry about a future antipsychotic topic.
FY 2010 - 2012 CHP+ number of members with asthma and number with emergency room (ER) visits with primary diagnosis of asthma	Jerry opened the discussion on this topic, shared input about the CHP+ data received from Optumas, and reviewed the Department's request for plan input to clarify possible improvement activities. Cynthia presented on her plans PIP that focuses on this topic (PowerPoint passed out). Cynthia noted that her plan noticed a higher incidence of emergency utilization versus other lines of business. Three committees work on addressing this issue, a driver analysis was completed, a number of goals were set (example, increase engagement with primary care providers (PCPs), client contacts), a health registry was developed to assist with care, and some PCPs provided co visits with asthma providers during client visits. Cynthia noted that the use of electronic health records (EHR) was helpful and a decrease in emergency utilization was achieved. Carrie asked what was Kaiser's client contact rate? To address this question Cynthia discussed one nurse's goal to meet with 100 clients. Cynthia also discussed the option of using texting to follow up with clients. Carrie asked if any weekend efforts were done with clients and Cynthia concluded the discussion by stating no. Jackie then presented on her plans efforts to reduce emergency visits and noted that a population approach was used over the three year period. Her plan looked at the community level to understand impact on decreasing their utilization rates. Jackie noted that a campaign for clients to contact their PCPs first before going to the emergency room was created, brochures were distributed, and public service announcements were made. Jackie concluded the presentation by noting the effect of co-pays increases on client use of the emergency room.	
Performance Improvement Projects (PIPs)	Katie stated that the Department's goal is to align activities for plans/providers so a number of changes to the current PIP process will be made. Plans should note that they should continue their current PIP, but starting in Jan 1, 2014 a statewide PIP will be implemented. A conference where plans would present on their PIP will be planned. Katie noted that the Department is working with HSAG to complete a timeline for these changes and that she is working with contract managers to update contract language. Carrie asked what would happen to plans like hers who have a PIP ending this fall. Will they have to wait until Jan 2014 before a new PIP is required? Katie noted that one option would be to do a focused study, but that discussion would happen at a later time. Katie also noted that new PIPs would have a shorter completion time and the plans should only use the new template for new PIPs. Barbara asked if a new process for submitting PIPs (currently PIPs can be	

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	submitted on one of the 3 submission dates) is planned? Katie noted that decision is to be determined. Irene asked Katie to confirm when the new PIP Statewide process will start. Katie shared that input.	
Depression initiative measures due November 29, 2013 (follow up from the May 2013 meeting)	<p>Health plans had no objections with the new depression criteria that require plans to submit depression rates to the Department on Nov 30, 2013. But Dr. Brody would like to review the criteria before confirmation about their submission will be made.</p> <p>Jerry also shared input that the Department's Depression Initiative internal ad hoc report showed that around 6,709 depression screenings have been completed for Medicaid and CHP+ adolescents since the primary care fee for service benefit went live August 2011. Of the total 6,709 depression screenings 888 are CHP+ and came from Colorado Access and Rocky Mountain Health Plans. Jerry and Dr. Brody confirmed that other plans may be doing depression screenings, but that data may not be captured in current processes.</p>	Jerry will send Dr. Brody a copy of the criteria and note this topic at the September face to face meeting.
Healthy Living	Jerry noted that Dawn McGlasson was recently hired to coordinate dental services for the Department with Alan Kislowitz. Some health plan staff also noted that they still have healthy living projects that are due in the coming month/s.	
Plan updates	<p>Jackie noted that her plan was working on HEDIS and CAHPS, corrective actions from the last site review, and is working on NCQA accreditation.</p> <p>Carrie noted her plan is working on HEDIS and CAHPS, healthy living, PIPs, and a specific CHP+ evaluation.</p> <p>Nancy noted that her plan is preparing for a fall audit, is in the final stages with CAHPS, and looking at contract issues related to the next site audit.</p> <p>Dr. Brody noted that his plan is working on HEDIS, NCQA accreditation and the hiring of a Quality Improvement Director. Dr. Brody also shared input on a nurse that was hired (Ann) who will head up their multicultural /health disparity efforts.</p> <p>Lynn noted that her plan is looking at readmissions.</p>	
Department Updates	Jerry noted that there were no issues noted for health plans on the most recent Ombudsman report.	
Additional Comments discussions	<p>Health plans expressed concerns with their quality improvement (QI) plan submissions if the current CAHPS data was not shared with them in advance of the QI plan submission date.</p> <p>CHP+ Health plans requested an update on future CAHPS requirements.</p>	<p>Jerry will check with HSAG about when health plans will receive CAHPS data.</p> <p>Russell will follow up with health plans about CAHPS requirements.</p>
Adjourn	Meeting ended early	

Next meeting is September 26, 2013

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