



COLORADO

Department of Health Care
Policy & Financing

Person- and Family-Centered Approach: Final Update

March 2019

Department Accomplishments,

In March 2016, the Department received a second grant from The Colorado Health Foundation to continue our work improving member and family engagement and collaborate with external partners on person- and family-centered practices and projects. This funding also supports the continued work of our Strategic Plan for person- and family-centeredness developed in the first phase of this effort.

The funding for the grant ended on March 31, 2019. However, the Department will continue to align its person- and family-centeredness work with that of the [Institute for Patient- and Family-Centered Care](#), who provided the initial [recommendations](#), and build on the successful projects funded by the grant to carry on sustainable culture change in the Department.

Successes

Along with the Member Experience Advisory Council work described later in this report, the Department had success with the following work:

Completion of County Member Experience Project

Based on county research conducted in 2016, we engaged consultants to conduct additional research with our members and county workers around the member experience with counties through the eligibility processing. This research commenced in July 2017 and is concluded in May 2018. The consultant conducted workshops providing education around the person-centered approach along with research with more than 200 Health First Colorado or CHP+ members in five volunteer counties.

A summary report, delivered in May 2018, is posted [here](#). Based on that report, the PFC Core Team determined to develop and execute the County MEAC Development project.

County MEAC Development Project

The purpose of the County MEAC Development project was to extend the Department's person-centered work by sustainably establishing county-based Member Experience Advisory Councils which could further bring member voices and person-centered thinking to county's operational improvement efforts, thereby improving member experience.



The Department engaged a consultant to conduct a training workshop, attended by three counties and four RAE organizations, and then work with participating counties to develop, recruit, and conduct MEACs aimed at local improvement efforts. Two counties were provided with funding to establish councils and cover associated expenses such as travel, food, and incentives. Staff in those counties also received coaching and development of facilitation skills. The participating counties achieved the goals they set and have become evangelists for the MEAC model of engagement. A summary report can be found [here](#).

Stakeholder Engagement Project

Consultants were engaged to help us establish a more consistent and person-centered stakeholder engagement experience for Department staff and partners. The Department has several types of stakeholder groups. They differ in their purpose, size, level of formality, complexity of rules/agreements, and level of external communications about their meetings. Department staff have varying levels of expertise for working with stakeholders. As a result, the experience of stakeholder engagement varies widely across the department for both staff and our external partners. The goals of the project are threefold:

- Consistent buy-in and support from Department leadership
- A definitive guide for stakeholder engagement for the Department staff
- Enhanced training and education for successful and person-centered stakeholder engagement

The consultant group finished its work

in June 2018. Since that time, Department staff have been engaged in improving the tools and implementation plans. This work will continue beyond the term of the grant.

Communications projects

Two communications projects were established in this reporting period. Grant-funded, foundational components of the projects were completed by March 31, 2019. Both projects will continue utilizing Department funds for implementation and operations.

Member Email Communications

Campaign Strategy: Consultants were engaged to develop an email marketing campaign strategy for member outreach. The goal is to develop a consistent approach to communicate with Health First Colorado members in a person-centered manner via email utilizing the Salesforce Marketing Cloud platform.

Member Contact Center Improvement

Strategy: A contractor was engaged to conduct research into the contact center agents' processes and tools, identifying gaps and solutions to improve the agent's ability to better serve incoming callers.

Continued work with internal processes

The Core Team that provided oversight and direction for grant activities will continue its work based on the successful foundations provided by grant funding. Beyond the ongoing work described above, two additional areas of focus for on-going work will include the following.



HR processes: The team will work with representatives of the Human Resources team to codify the culture of person-centeredness through hiring practices, orientation and on-boarding, and performance management.

Contracting processes: Ensuring that the Department's vendors and contractors who provide much of the direct service of Medicaid and CHP+ have the requirements of person-centered activities in contracts and accountability will continue to be a focus.

The Department is grateful for the support provided by The Colorado Health Foundation to create the first governmental agencies in the nation to codify person- and family-centered values in the creation and execution of its policies, programs, and processes. The effort has a significantly positive effect for our members and Departmental colleagues.

Member Experience Advisory Councils

Purpose

The Department's goal is that all employees, providers, and members and their families experience person-centered policies, practices, and partnerships that respect and value individual preferences, strengths, and contributions. The Advisory Councils provide the Department with a better understanding of how to achieve this goal by proactively offering input on business practices, policies, and partnerships.

In-Person Advisory Council

The In-Person Council has grown to [17 Medicaid and Child Health Plan Plus \(CHP+\) members or family members and/or caretakers](#) .

From April 2018 through March 2019, the Councils provided input on 54 topics including Department communications and program benefits. MEAC members met with Executive Director Kim Bimestefer and Cost Containment and Quality Improvement Director, Stephanie Ziegler, demonstrating their value to the mission of the organization.

Virtual Advisory Council

To broaden the scope of participation we implemented a Virtual Advisory Council in October 2015. Surveys are being sent monthly to nearly 1000 members. Our response rate has been high with an approximate average of 1 completions per survey.

Recruitment

Our goal is for the Advisory Councils to be ethnically, racially and geographically diverse and representative of the demographic profile of the Health First Colorado and CHP+ population. For program demographics, please see the HCPF [2017-18 Annual Report](#).

- [Member Responsibilities and Application](#)
- [2018 Year End Report](#)

More info: colorado.gov/hcpf/meac

**For more information contact
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