



**Accountable Care Collaborative
Program Improvement Advisory Committee**
Charter

Preface: The Program Improvement Advisory Committee (PIAC) Community is a statewide network of stakeholders who advise on the Accountable Care Collaborative (ACC) (see PIAC Community Framework). As the leaders of this Community, the State PIAC will demonstrate and adhere to the following vision, mission, purpose, and guiding principles.

PIAC Community Vision: A health care system that improves member health outcomes by supporting providers, engaging members, advancing equity, decreasing avoidable costs, and increasing overall value.

PIAC Community Mission: To assist the Department of Health Care Policy and Financing (Department) and Regional Accountable Entities (RAEs) with the implementation and execution of the ACC and its following objectives:

1. Join physical and behavioral health under one accountable entity;
2. Strengthen coordination of services by advancing team-based care and health neighborhoods;
3. Promote member choice and engagement;
4. Pay providers for the increased value they deliver; and
5. Ensure greater accountability and transparency.

PIAC Community Purpose: To leverage the experience and expertise of the broader PIAC Community to improve member health outcomes with the ACC by providing actionable and strategic feedback to the Department regarding ACC implementation and operations.

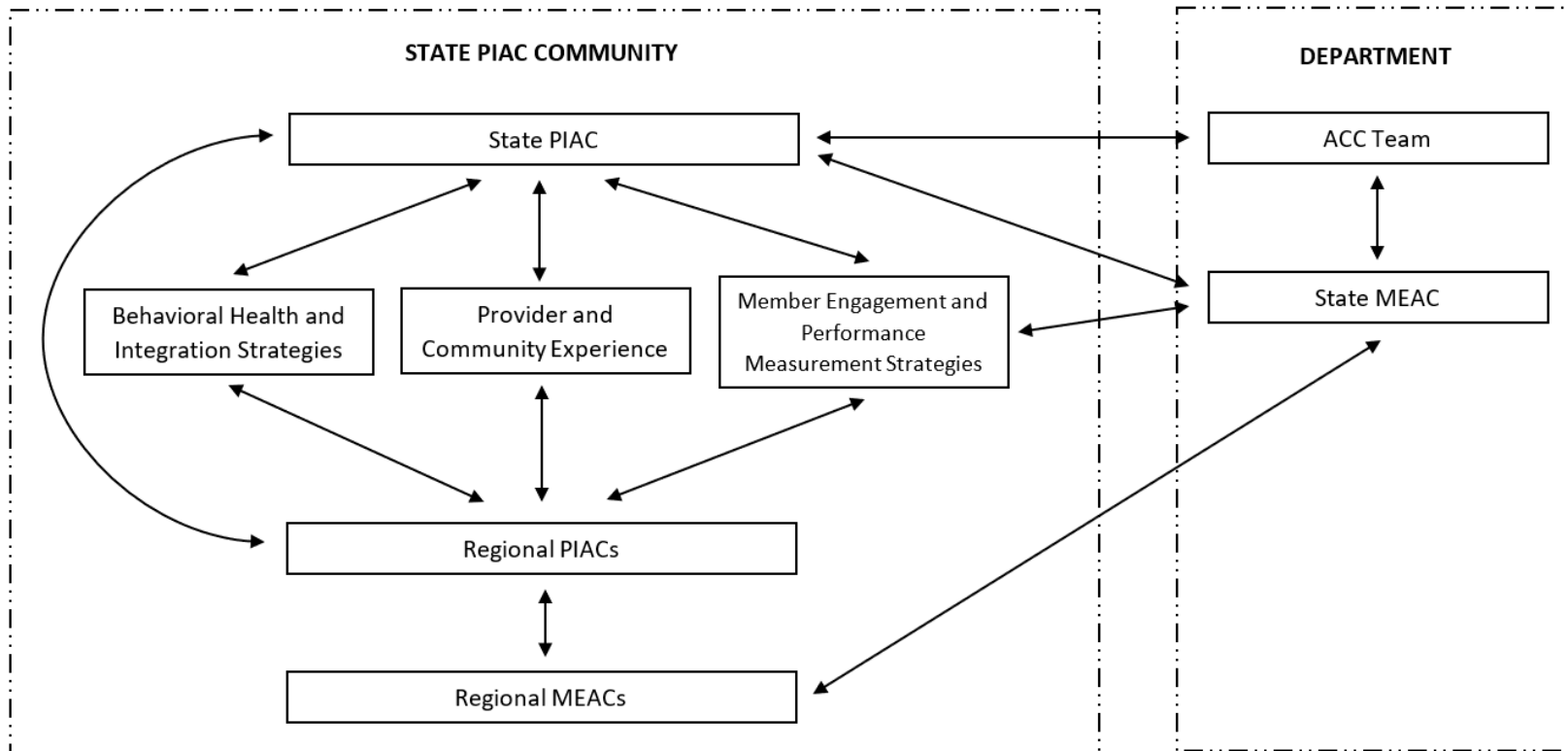
PIAC Community Guiding Principles: The following list is a set of core guiding principles that the PIAC Community embrace as keys to success. PIAC Community members will strive to promote and operate from these principles.

- Ensure the member is a part of every conversation;
- Create an inclusive and actionable conversation to discuss the diverse experience of the ACC;
- Ground every conversation in performance data related to operational and performance outcomes of the ACC;
- Identify and communicate best practices and continued challenges;
- Ensure accountability and transparency of the Department and its RAEs; and
- Align with other Department committees, initiatives, and their respective work.

Event that caused this committee to be established: The state PIAC was formed in 2012 by the Department to advise on the implementation of the ACC. Upon implementation of ACC Phase II, a new state PIAC was seated in October 2018 to reflect the evolving needs and vision of the ACC.



PIAC Community Framework: Below is a visual of the State PIAC Community and the relationships between its internal components. Each component will adhere to the vision, mission, purpose, and guiding principles of the PIAC Community and will reflect the respective communities that it serves. Components may change in response to the evolution of the ACC.





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PIAC Charge: The PIAC is the convening body of the PIAC Community and will develop and submit actionable and strategic feedback on behalf of the PIAC Community to the Department regarding ACC operations and performance. The PIAC will operate in accordance with its by-laws.

PIAC Objectives: The PIAC's objectives include but are not limited to the following:

- Review ACC operations and performance, including but not limited to:
 - Enrollment;
 - Performance outcomes; and
 - Regional developments, including:
 - Regional improvement strategies; and
 - Regional PIAC and MEAC updates.
- Consider and advise on the relevance of other Department initiatives to the ACC, and
- Develop and monitor performance improvement strategies for defined focus areas of the ACC.

PIAC Process: The PIAC will develop actionable feedback through the following steps:

- Engage in collaborative and constructive discussion regarding its aforementioned objectives;
- Develop with the Department key focus areas within the ACC that require improvement and assistance;
 - See Appendix 1 for PIAC Focus Areas
- Delegate focus areas and outstanding action items to relevant subcommittees and ad hoc work groups;
- Monitor the development of work products in the respective subcommittee or work groups through quarterly check ins and by ensuring that the work products address the following strategy screens:
 - How are members impacted?
 - How are specific member populations impacted?
 - How are providers impacted?
 - How is equity advanced?
 - How is integration addressed?
 - How is care coordination assured?
 - What are the cost, quality, and access implications?
 - How is success measured?
- Approve and submit final work products to the Department; and
- Monitor the implementation of approved work products.

PIAC Products: Final work products can include operations and performance guidance and recommendations outlining content such as but not limited to: established best practices, continued challenges, emerging areas for improvement, and opportunities for alignment. All final work products should propose solutions, next steps, measures for success, and timelines for follow-up.

The Department will provide a formal response to state PIAC work products within three months of its submission. The Department's response will define the frequency and venue of subsequent updates to PIAC.

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

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PIAC Logistics: PIAC will meet at a bare minimum on a quarterly basis, with meetings as needed. The Department, in consultation with the PIAC Chair and co-Chair, can cancel meetings as necessary. All Committee meetings are open to the public but are exempt from the Colorado Sunshine Law. Notification of meetings and meeting materials will be publicly available on the [Department's website](#).

Frequency: Quarterly, at a bare minimum, with meetings more frequently on as-needed basis

Date: Third Wednesday of the month

Time: Normally 9:30 a.m. to 12:15 p.m.

Location: Normally 303 E 17th St, 11th Floor, Room 11AB

Materials: Meeting materials, including agendas, will be posted [here](#)

Listserv: To receive for monthly alerts, complete the form [here](#) and select "Accountable Care Collaborative Program Improvement Advisory Committee"

Reasonable Accommodations: Reasonable accommodations will be provided upon request for persons with disabilities. Please notify the 504/ADA Coordinator hcpf504ada@state.co.us at least one week prior to the meeting to make arrangements.

Appendices: Appendices may change as the PIAC responds to the evolution of the ACC.

- Appendix 1. PIAC Focus Areas
- Appendix 2. State PIAC Membership

Approved October 2019



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Appendix 1. PIAC Focus Areas: Below are the three focus areas for the PIAC Community that were determined through a strategic planning process.

Focus Area 1: Behavioral Health and Integration Strategies

Charge: To assess behavioral health integration within the ACC by investigating the strategies by which RAEs and providers are joining behavioral and physical health at the practice and systems level, by improving foundational understanding of behavioral health issues, benefits, and services, including substance use disorders, by ensuring care coordination and continuity across benefits, and by identifying the barriers to accessing behavioral health including but not limited to gaps in care and stigma.

Focus Area 2: Provider and Community Experience

Charge: To assess the experience of providers and community-based organizations (CBOs) within the ACC by identifying, prioritizing, and investigating key challenges and solutions to best support and build capacity within providers and CBOs, to foster collaboration and development of a health neighborhood between providers, CBOs, and RAEs, and to leverage their collective strengths in broader regional and state improvement work.

Focus Area 3: Member Engagement and Performance Measurement Strategies

Charge: To assess the overall performance of and experience within the ACC by investigating strategies to ensure member participation in all aspects of the health care system and to provide guidance for an effective and publicly accessible performance measure set that is member and health outcomes focused and aligned with other efforts of the broader health care system.



Appendix 2. State PIAC Membership: Below is the current membership of the State PIAC.

Name	Nominated By	Title	Representing
Ian Engle	RAE 1	Executive Director, Northwest Colorado Center for Independence	Providers: Long Term Supports and Services; Providers: Independent Living; Health First Colorado Members
Joanna Martinson	RAE 2	Director of Care Coordination, North Colorado Health Allianc	Health Alliances
Shera Matthews	RAE 3	Director of Practice Management, Doctors Care	Community Providers
Dale Buterbaugh	RAE 4	Community Organizer, ADA Consultant	Health First Colorado Members
Denise (Dede) de Percin	RAE 5	Executive Director, Mile High Health Alliance	Health Alliances; Metro Area
Jeffrey Zayach	RAE 6	Executive Director, Boulder County Public Health	Local Public Health Agencies
Sara Sanderson	RAE 7	Population Health Manager	Providers: Primary Care
Arnold Salazar	CBHC	Representative, Colorado Behavioral Health Council	Providers and Networks: Behavioral Health
Donald Moore	CCHN	Chief Executive Officer, Pueblo Community Health Center	Providers: Federally Qualified Health Centers; Rural Communities
Lila Cummings	CHA	Manager of Public Policy, Colorado Hospital Association	Providers: Hospitals
Julie Reiskin	HCPF	Executive Director, Colorado Cross Disability Coalition	Health First Colorado and Medicare-Medicaid Members
VACANT	HCPF		
Bethany Pray	HCPF	Health Program Director, Colorado Center on Law and Policy	Advocate for Health First Colorado Members, PIAC Subcommittee Co-Chair
Wendy Nading	HCPF	Nurse Manager, Tri County Health Department	Healthy Communities; Regional Health Connectors; Public Health
Kiara Kuenzler	HCPF	Chief Executive Officer, Jefferson Center for Mental Health	Providers: Community Mental Health Centers, PIAC Co-Chair



Daniel Darting	HCPF	Chief Executive Officer, Signal Behavioral Health Network	Providers and Networks: Managed Service Organizations; Substance Use Disorders, PIAC Subcommittee Co-Chair
Anita Rich	HCPF	Practice Transformation Expert	Pediatrics; Practice Transformation, PIAC Subcommittee Co-Chair
Carol Plock	HCPF	Executive Director, Health District of Northern Larimer County	Oral Health; Health Alliances, PIAC Co-Chair
David Keller	HCPF	Vice Chair of Clinical Strategy and Transformation, Children's Hospital Colorado	Pediatrics; Systems Transformation, PIAC Subcommittee Co-Chair