



To: Program Improvement Advisory Committee
Cc: Kiara Kuenzler and Carol Plock
From: Dr. David Keller and Bethany Pray, Esq.
Subject: Program Improvement Advisory Committee Subcommittee At A Glance

Below outlines the subcommittees of the Program Improvement Advisory Committee (PIAC) and their respective charges, objectives, leadership, and staff.

Program Improvement Advisory Committee		
Charge: 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 objectives		
Performance Measurement and Member Engagement	Provider and Community Experience	Behavioral Health and Integration Strategies
Charge: To assess the overall performance of and experience within the ACC by investigating strategies to ensure robust member participation in all aspects of the health care system and to provide guidance for a robust, 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.	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.	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.
Objectives: <ul style="list-style-type: none"> • ACC Program Measures and Best Practices • Member Engagement and Activation • Alignment and Data Utilization • Performance Data Transparency and Utilization 	Objectives: <ul style="list-style-type: none"> • Health Neighborhood Development • Practice Support and Transformation • Care Coordination and Condition Management 	Objectives: <ul style="list-style-type: none"> • Behavioral Health Care Coordination for Corrections-involved Members • System Alignment between Crisis Services and RAEs • Other behavioral health concerns: Continuously track and monitor potential behavioral health concerns within the ACC
Co-Chairs: Bethany Pray and David Keller	Co-Chairs: Anita Rich	Co-Chairs: Daniel Darting and Sue Williamson
Staff: Liana Major	Staff: Brooke Powers	Staff: Jeff Appleman



COLORADO

Department of Health Care
Policy & Financing

Subcommittee: Performance Measurement and Member Engagement

Meetings Held:

- 10/24/2019
- 12/12/2020
- 1/23/2020
- 2/27/2020
- 3/26/2020
- 4/23/2020

Objectives Discussed:

- Voting membership finalized late 2019 and voted to add up to 4 additional Medicaid members at April 2020 meeting (new total = 15 members)
- Reviewed RAE approaches to informing members about RAEs and Health First Colorado, supporting engagement, and soliciting member feedback (October 2019)
- Focused on Key Performance Indicators (specifically Q3FY18-19 data) to include discussion with RAEs on KPIs in their respective regions (December 2019, February 2020)
- Provided feedback and recommendations on revised Prevention Support and Member Engagement RAE deliverables (January 2020)
- Discussed RAE COVID-related efforts (March 2020)
- Reviewed SFY18-19 Behavioral Health Incentive performance data (March 2020)
- Informed COVID-related RAE incentive measures (April 2020)

Progress Achieved:

- Voting membership for the subcommittee was finalized.
- Subcommittee provided feedback on SFY19 KPIs and BHIP measures as well as revised RAE deliverables that impact population health and member engagement and experience.
- Subcommittee provided input on COVID-related measures the Department is developing.
- Subcommittee agreed to work on the prenatal KPI measure to provide ideas and feedback on how to improve it.

Barriers Encountered:

- Ensuring that the committee retains a focus on member goals and interests while engaging in the technical work of understanding and analyzing performance measurement.
- Developing an action plan for review of performance measures that accounts for lags in data analytics and uncertainty about the appropriate timing of recommendations.
- Prioritizing more limited but actionable topics for discussion given the multiple sets of performance measures under ACC 2.0.
- Lack of support for Medicaid members on the subcommittee. As of the April meeting, the committee had only Medicaid member on the roster.

Next Steps:

- Recruit and engage additional Health First Colorado voting members to increase member representation. Continue to pursue Department-wide funding to support their engagement, consistent with earlier recommendations on member engagement.
- Continue to monitor and inform Key Performance Indicator, BHIP, APM and Performance Pool measures.
- Provide targeted feedback or formal recommendations for new measures of prenatal care and health

neighborhood.

- Partner with the Department to identify the optimal timing for formal recommendations to ensure that work is effective.
- Continue to weigh in on performance related to COVID-19 as requested, including adjustments in performance measurement required due to special cause variation.
- Identify specific member engagement and experience topics based on input from committee members and recommend evaluation methods to show impact on program performance.

Recommendations

- Continue to prioritize member engagement in planning and implementation of the Accountable Care Collaborative
- Continue efforts to assess the utility of various measure sets; are we measuring quality and outcomes that matter to members and other stakeholders
- Consider a rubric that aligns measure sets with goals of the Accountable Care collaborative; high value, coordinated care, superior member experience and excellent health outcomes.