

# Performance Measurement & Member Engagement (PMME) Subcommittee Meeting

May Meeting  
5.26.2022



# Meeting Objective

The goals of this meeting are to continue discussion of well child visits and to initiate discussion about ACC 3.0.



# Colorado Department of Health Care Policy & Financing (HCPF) Mission

Improve health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

# PMME Conversation Guidelines

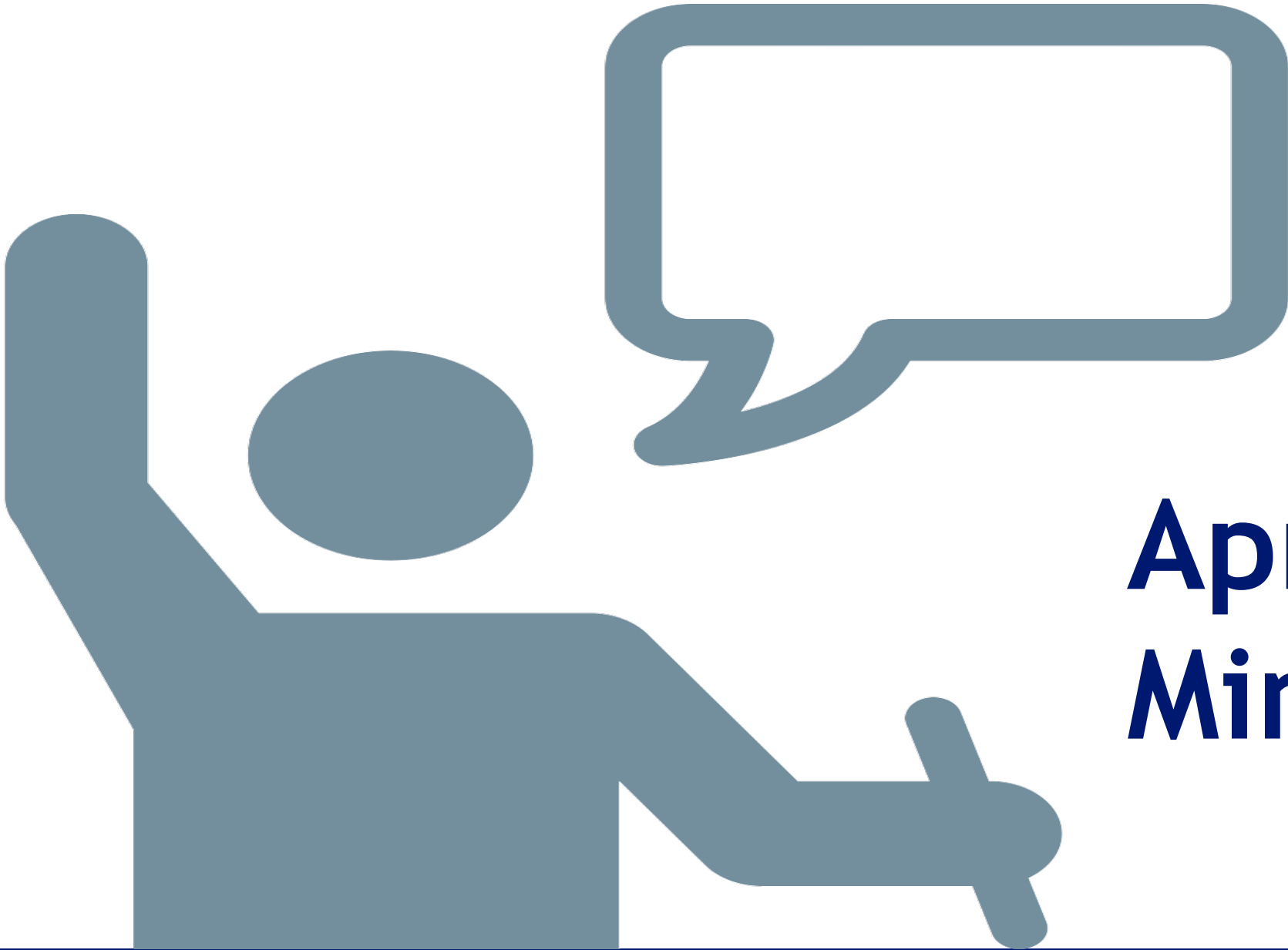
## Reminder:

Non-voting members, please  
use the chat only.

- Assume best intent.
- Be tough on issues, soft on people.
- Step forward/step backward so everyone participates.
- Avoid acronyms.
- Acknowledge what hat you're wearing.
- The answer to "but" is "yes"
- Be thoughtful and respectful.
- Mute yourself when you're not speaking and please use the chat feature when appropriate.

# Agenda

- 3:00 - 3:05: Welcome, Introductions, and approval of April Minutes
- 3:05 - 3:15: Update from *May PIAC*
- 3:15- 3:45: ACC 3.0
- 3:45 - 4:15: Well Child Visit Learnings and Recommendations
- 4:15 - 4:20: Public comment
- 4:20 - 4:30: Next Steps and Wrap Up



# April Meeting Minutes

# May ACC PIAC Update

PIAC meeting notes and slides can be found [here](#).

# Department Health Equity Plan

Department continues monthly public meetings to discuss the Department health equity plan. Two sessions in June that center on the disability community and the Spanish speaking community.

**Office of Community Living and the Disability Community June 2 11-12pm**

- Register [here](#)

**June 7th 12-1:30pm pm Spanish Speaking Public Meeting (Part 2)**

- Add to your calendar by clicking this [Direct link](#)



# ACC 3.0 Initial Discussion

**Mark Queirolo**

**Planning & Implementation Unit Supervisor,  
HCPF**

# Well Child Visits Potential Recommendations Discussion (cont.)

# Potential Recommendations

1. Increase reimbursement for well child visits \*
2. Improve education for clinic staff on well child billing practices for Medicaid Members \*
3. Improve education for Members on well child visits
4. Implement a State requirement for a well child visit at particular intervals \*
5. Clinics/RAEs to expand outreach to Members to schedule well child visits.
6. Increase efforts to address transportation issues for Members coming in for their well child visits. \*
7. RAEs to encourage practice/clinics to increase hours offered for well child visits. \*
8. RAEs to partner with schools, school districts, and school-based clinics to educate on the availability and importance/value of well child visits.
9. Member Attribution: Review process for clinics and RAEs to address their "unreachable" attributed population
10. Department to explore billing codes data to ensure that all appropriate well child visits are being properly captured in the measured data.
11. Department to require the 0-30 Month Well Child Visit Measure AND the Child and Adolescent Visit Measure for APM practices.

# Potential Recommendation #8

RAEs to partner with schools, school districts, and school-based clinics (where available) to educate on the availability and importance/value of well child visits.

Examples include:

- RAEs to provide financial and technical support for outreach and education by schools and school-based clinics on the availability and importance/value of well child visits.
  - Educational materials can be sent home in backpacks, in newsletters, etc.
- Partner to set up well child visit clinics (e.g., pop up clinics at school, on weekends. (Consider partnering with medical schools).

# Potential Recommendation #9

Member Attribution: Review process for clinics and RAEs to address their "unreachable" attributed population so that there is a streamlined process for RAEs and HCPF to identify and resolve attribution and address problems.

- The attribution lists require a significant amount of administrative time from clinic staff.

# Potential Recommendation #10

Department to explore billing codes data to ensure that all appropriate well child visits are being properly captured in the measured data.

# Potential Recommendation #11

Department to require both the 0-30 Month Well Child Visit Measure AND the Child and Adolescent Visit Measure for the APM practices (APM practices can currently choose between these two measures).

# Additional Potential Recommendations

- Do committee members have any additional potential recommendations that have not been suggested or discussed?



# Potential Recommendations

Voting committee members to review the recommendations list sent out by email and select their three top choices.

- Email Erin Herman ([erin.herman@state.co.us](mailto:erin.herman@state.co.us)) by June 3, 2022

# Public Comment

# Next Steps and Wrap Up

## Next Steps:

- Currently recruiting 2 new voting committee members
  - Access the application [here](#)
- Voting committee members to send in their top three well child visit recommendations to Erin Herman by email

## Next PMME Meeting:

June 23, 2022 from 3:00 - 4:30 PM

- Review Key Performance Indicator (KPI) Data
- Explore Member attribution