

Performance Measurement & Member Engagement (PMME) Subcommittee Meeting

February Meeting
2.24.2022



Meeting Objective

The goal of this meeting is to follow up on PMME's ongoing well child visit work, discuss the Department's Health Equity Strategic Plan, and review the Department's response to PMME's recommendations.

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 January Minutes

3:05 - 3:15: Update from PIAC

3:15- 3:30: PMME Follow Up Items

3:30 - 4:00: Health Equity Strategic Plan

4:00 - 4:20: Department Response to PMME's Recommendations

4:20 - 4:25: Public comment

4:25 - 4:30: Wrap Up



January Meeting Minutes

February ACC PIAC Update

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

February PIAC

1. Update your Address Campaign

- Shoshi Preuss, Covering Kids and Families- project of Colorado Community Health Network

2. Medicaid Director update

- Public Health Emergency end planning → Effects on Medicaid enrollment
- Grants for Medicaid enrollment and renewal assistance available
 - **Due date: March 28, 2022.**
 - **Contact: Rachel.Reiter@state.co.us**
- Topics deferred to next meeting:
 - ACC 3.0
 - Complex Care definition

February PIAC

PHE End Planning: Keeping Informed & Engaged

PHE End Planning Stakeholder Online Resource Center -
[Colorado.gov/hcpf/phe-planning](https://colorado.gov/hcpf/phe-planning)

- Latest Updates on Federal Guidance
- Frequently Asked Questions
- Member, Provider, County & Eligibility Partner content

COVID Resource Center -
[Colorado.gov/hcpf/COVID](https://colorado.gov/hcpf/COVID)

- Provider Guidance
- County and Case Manager Memos, recordings of webinars, etc.
- Links to member COVID resources

February PIAC (cont.)

3. ACC Operations Update

- Slight decline in number of Child PCMPs - Department to analyze
- Slight decline in number of Women Only providers - some consolidation of providers

4. Dept. of Corrections (DOC) Metric & Data Sharing Agreement Update

- Report out on behavioral health engagement for members releasing from state prisons metric
- Data sharing-DOC → HCPF → RAEs → Community collaboration

PMME Follow Up Items

Well Child Visit Data Updates

- Updated Data Request
- Member survey
- Research regarding state requirements for well child checks

PMME Follow Up Items

- How does the committee feel about what we have learned so far about well child checks?
- Is there anything else you want to explore as part of the conversation about well child checks?

PMME Follow Up Items

Committee Recommendation Categories

- 1) Recommendations to encourage primary care providers to do more well child visits.
- 2) Recommendations to encourage parents to bring children in for well child visits.
- 3) Recommendation to decrease barriers for parents to bring in their child for well child visit.

Health Equity Strategic Plan

Aaron R. Green

Health Disparities and Equity, Diversity & Inclusion
Officer, HCPF

HCPF Department Response to PMME's Recommendations

Matt Sundeen, HCPF

Department Response to PMME Recommendations

Recommendation 1

Disaggregate all performance measures by demographics by January 1, 2022. At a minimum, disaggregate each measure by race/ethnicity, language, disability status, age, gender, and geography (rural, frontier, urban). Baseline data should also be disaggregated so that the equity implications are clear from the start.

Department Response to PMME Recommendations

Recommendation 1 Department Response

- The Department data team is already working to disaggregate data by different demographic categories.
- The earliest the Department would be able to implement final changes is July 1, 2022 because it requires system changes and coordination with multiple state offices.
- In 2021, the Department hired a new Health Disparities and Equity, Diversity & Inclusion (EDI) Officer. In his role he will be providing regular feedback on performance metrics and processes.
- The Department will provide an update on status by March 2022.
- The Department would like to continue to work with PIAC to determine the best and most appropriate demographics for measurement.

Department Response to PMME Recommendations

Recommendation 2

Before selecting new measures or modifying existing measures, the Department should analyze whether specific groups of members are excluded from the base population and what impact that could have on health equity. The Department should also conduct a one-time analysis of members who do not meet continuous eligibility requirements to identify the demographics and health needs of these members and the equity implications of their exclusion.

Department Response to PMME Recommendations

Recommendation 2 Department Response

- The Department regularly analyzes potential impacts of changes to performance metrics including the potential impact on health equity.
- The Department's new EDI Officer, housed in both the Executive Director's office and Cost Control and Quality Improvement (CCQI) office, is tasked with providing regular feedback to the ACC program about performance measures. The Department is already working with the EDI Officer to assess the equity implications of potential metric changes.
- The Department would be interested in learning more from PIAC about the one-time analysis of members not meeting continuous eligibility requirements. Under the current public health emergency, most members are locked in to enrollment. Until the end date for the PHE is determined, it may be difficult to define the exact population that could be in jeopardy upon redetermination.

Department Response to PMME Recommendations

Recommendation 3

The Department should evaluate the health equity implications for each performance measure, ideally in advance of implementing a measure. This information should be made available in the annual quality report that will be public-facing.

Department Response to PMME Recommendations

Recommendation 3 Department Response

The Department already assesses the potential implications of all performance measures before implementing the measure. The Department considers multiple factors including alignment with other measure sets such as HEDIS, program goals and objectives, health care implications and health equity implications. Health equity was the prime focus of the Department's vaccine outreach metric implemented in 2021 and will continue to be a significant consideration for future metrics. The Department's new EDI officer will continue to focus on equity and disparity in his work.

Department Response to PMME Recommendations

Recommendation 4

If one RAE is a high performer and rigorous evidence is available for their intervention, then the Department should require that other RAEs implement the intervention under the premise that there is sufficient reason to believe it may lead to better health outcomes for Health First Colorado members.

Department Response to PMME Recommendations

Recommendation 4 Department Response

- One of the core principles for the Accountable Care Collaborative (ACC) is regional flexibility to allow for interventions based on specific populations. An intervention that works well in one region may not work in another. However, when appropriate, the Department often includes minimum requirements or standards for different RAE and MCO activities. For example, the Department worked with PIAC to develop minimum standards for Extended Care Coordination for use with complex members.
- RAEs already share effective interventions with each other at Department facilitated meetings and forums.
- It can often be difficult to determine what is meant by “high performer” or “rigorous evidence” or “intervention.” The challenge has become significantly more complicated during the pandemic.
- The Department will continue to work with RAEs and MCOs to incentivize the use of programs and practices that optimize outcomes for Health First Colorado members.

Department Response to PMME Recommendations

Recommendation 5

Tie performance dollars to disparity reduction in the future.

Department Response to PMME Recommendations

Recommendation 5 Department Response

The Department already takes disparities into consideration when determining metrics. As a current example, in 2021 the Department used funding to incentivize reductions in disparities in vaccine rates between BIPOC Medicaid members and non-BIPOC members. The Department will continue to assess health disparities and explore opportunities to reduce disparities through performance incentives.

Department Response to PMME Recommendations

Recommendation 6

All RAEs should be required to actively support providers to ensure that 100% of providers screen for suicidality and have the training and tools necessary to engage in safety planning for members who screen positive.

Department Response to PMME Recommendations

Recommendation 6 Department Response

This work is already being conducted at the Colorado Department of Public Health and Environment.

Questions?

Public Comment

Wrap Up

Next Meeting:

March 24, 2022 from 3:00 – 4:30 PM

