



COLORADO

Department of Health Care
Policy & Financing

Minutes Of The Meeting Of The Provider and Community Experience (P&CE) Committee

May 8, 2025, 8:00-9:30 AM

Participant Video/Audio:

meet.google.com/tmh-hyaa-xvd
724-740-8075 PIN: 587 524 192#

1. Welcome, Introductions and Housekeeping

The following people were in attendance:

- A. **Voting Members Present:** Mark Levine, MD (P&CE Co-Chair; State PIAC Member), David Keller, MD (State PIAC Member; Children's Hospital Colorado), Karma Wilson (Southeast Colorado District Hospital), Sabrina May (PASCO Home Health), Andrea Loasby (CU School of Medicine), Angie Goodger (CDPHE), Pat Cook (Colorado Gerontological Society), Theresa Anselmo (Director of La Plata County Public Health), Jeffrey Johnson (Imagine!), and Gail Nehls (Envida).
- B. **Voting Members Absent:** Marc Ogonosky (Member), Kathie Snell (P&CE Co-Chair; Aurora Mental Health & Recovery).
- C. **HCPF Staff:** Lindsey Folkerth, Callie Kerr, Erin Herman, Andi Bradley, Matt Pfeifer
- D. **Others in Attendance:** Schivonne Keller (Clinica Family Health), Dennis Roy (Colorado Family Caregivers), Terri McCraney-Powell (Denver Indian Health and Family Services), Laurel Karabatsos, Joanna Martinson (NHP), Jeff Johnson, Ashleigh Phillips, ReNae Anderson, Carolyn Quick (COA), Casey Thomas (COA), Courtney Bishop, Janet Rasmussen (Clinica Family Health), Michelle Lackore (Kaiser Permanente), Tina Gonzales (HCI), Jen DeBrito (RAE 2/4), Jessica Zaiger (CCHA), Nikole Mateyka (CCHA), Lisa Romero (Kaiser Permanente), Marissa Kaesemeyer (Colorado Access), Hannah Gall (Family & Intercultural Resource Center), Theresa Lin (SNC), George Roupas (Colorado Access), Chris Fellenz (Kaiser Permanente), Sophie Thomas (CCHA), Tina Gage (RAE 4), Saskia Young (Colorado Association of Health Plans), Nate Koller (RAE 4), Katie DeFord (CCHA), Elizabeth Freudenthal (Children's Hospital Colorado) and Emilee Sheridan (CHCO & CU Department of Pediatrics).



A quorum was established and the voting members approved the April meeting minutes.

2. P&CE Follow-Up Items and Housekeeping

Mark Levine, P&CE CO-Chair

PIAC Meeting Summary: Mark Levine provided an update from the last PIAC meeting, highlighting discussions on **ACC Phase 3 preparations** by different RAEs (Regional Accountable Entities). A key focus was how RAEs are segmenting their populations (e.g., Rocky Mountain Health Plan's member advisory councils for specific groups like the deaf/hard of hearing, Spanish speakers, or youth). This led to a broader discussion about how these segmentation strategies relate to the subcommittee's charter, particularly regarding the concepts of health neighborhood and population management.

Medicaid System of Care Presentation: Matthew Pfeifer from HCPF added to the PIAC summary, mentioning a presentation on the Medicaid system of care, primarily concerning pediatric services and the state's plan to implement services in community settings rather than institutions, in response to a settlement agreement. Slides for this topic will be available on the PIAC website.

3. Housekeeping Items

- **Charter review**

Charter Review and Approval: The subcommittee reviewed an updated version of its charter, which consolidates various descriptions of its purpose, strategy, and objectives. Andrea Loasby specifically appreciated the updated language around "eConsult" and the continued emphasis on care coordination and targeted areas. The updated charter was approved by motion and second, with no objections.

Consideration of future work

Common themes and interests emerged:

- **Health Neighborhood:** Mark Levine emphasized the importance of understanding and systematizing the concept of "health neighborhood" across all RAEs, especially in rural areas.



- **Non-Emergency Medical Transportation (NEMT):** Mark Ogonosky, Sabrina May, Bryan Erickson, and Gail Nehls all highlighted significant ongoing issues with NEMT, including confusion about the model, access barriers, and the need for greater accountability from HCPF and the RAEs.
- **Rural Care Challenges:** Jeff Johnson and Bryan Erickson, both from rural areas, stressed the unique challenges of providing care in geographically vast regions with sparse populations, including provider shortages (primary care and specialists), long travel times, and limited financial resources for RAEs in these areas.
- **Information Access & Administrative Burden:** Participants pointed out the overwhelming amount of information providers receive from HCPF and RAEs, coupled with fragmented data systems and difficulties in accessing timely eligibility information (e.g., coverage end dates), making it hard to support clients and maintain services.
- **Voice of Stakeholders:** Several participants emphasized the need for HCPF and RAEs to truly listen to and incorporate feedback from providers, people with disabilities, and older adults, rather than simply "checking boxes" on public comment meetings.
- **Special Populations:** Discussions around long waitlists for specialized doctors for youth transitioning to long-term care, and the unique needs of people in long-term care and those with dementia, questioning why they aren't included in ACC.
- **Systemic Coordination:** There was discussion for the need for better communication and collaboration across different groups and systems (health, jail, court) to provide cohesive care, particularly for the severely mentally ill.

4. Next Steps & Action Items:

- **Review Health Neighborhood Definition:** Matthew Pfeifer provided a link to the ACC Phase 3 contract on the HCPF website (<https://hcpf.colorado.gov/accphaseIII>), specifically recommending that members review Section 6 which defines "health neighborhood."
- **Dedicated Discussion Time:** Mark Levine suggested reserving at least 30 minutes in future meetings for subcommittee-led discussions and work on identified issues, supplementing time allocated for HCPF presentations.
- **Continuing the Conversation:** The committee will continue to prioritize and refine the list of issues for deeper exploration, with a focus on where the
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subcommittee can have the most impact.

Next meeting: June 12, 2025 8:00-9:30am

Acronym Key:

ACC-Accountable Care Collaborative
 ARPA- American Rescue Plan Act
 BHA-Behavioral Health Administration
 BH-Behavioral Health
 BHASO-Behavioral Health Administrative Service Organization
 BHE-Behavioral Health Entities
 BIPOC-Black, Indigenous, and People of Color
 BUS-Binary Unit System
 CANS-Child and Adolescent Needs and Strengths (assessment)
 CBO-Community Based Organizations
 CCHA-Colorado Community Health Alliance
 CC-Care Coordination
 CDHS-Colorado Department of Human Services
 CDPHE-Colorado Department of Public Health & Environment
 CHCO-Children's Hospital of Colorado
 CHI-Colorado Health Institute
 CHRP-Children's Habilitation Residential Program
 CJ-Criminal Justice
 CJJC- Criminal and Juvenile Justice Collaborative
 CMA-Case Management Agency
 CMHC-Community Mental Health Center
 CMS- Centers for Medicare & Medicaid Services
 COA-Colorado Access
 CSA- Community Service Agencies
 CYCHCN-Children and Youth with Special Health Care Needs
 DHMP-Denver Health Medical Plan
 D-SNP-Dual Eligible Special Needs Program
 DM-ID-2: Diagnostic Manual-Intellectual Disability 2
 DOC-Department of Corrections
 DOI-Division of Insurance
 DYS-Department of Youth Services
 FFS-Fee-For-Service
 FQHC-Federally Qualified Health Centers
 HCBS-Home and Community Based Services
 HCPF- Department of Health Care Policy and Finance
 HIEs- Health Information Exchanges
 HTP-Hospital Transformation Program

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HQIIP-Healthcare Quality Improvement Platform
IDD- Intellectual/Developmental Disability
ICB-Integrated Care Benefit
IPN-Independent Provider Network
LTSS-Long Term Supported Services
KPI-Key Performance Indicators
MAT-Medication Assisted Treatment
MCE-Managed Care Entity
MCO-Managed Care Organization
MIEP- Medicaid Inmate Exclusive Policy
MPH-master's in public health
NEMT-Non-Emergency Medical Transportation
NHP-Northeast Health Partners
OCL-Office of Community Living
OeHI-Office of eHealth Innovation
OOS-Out of State
P&CE-Provider and Community Experience Subcommittee
PCP-Primary Care Physician
PCMP-Patient Centered Medical Home
PMME-Performance Measurement and Membership Engagement Subcommittee
PMPM-Per Member Per Month
PHE-Public Health Emergency
PH-Physical Health
PHQ-9-Patient Health Questionnaire
PIAC-Program Improvement Advisory Committee
PRTF- Psych Residential Treatment Facility,
QRTP-Qualified Residential Treatment Program
RAE-Regional Accountable Entity
RFP-Request For Proposal
RMHP-Rocky Mountain Health Plans
SNC-Safety Net Connect, eConsult.
SDoH-Social Determinants of Health
SHIE- Social Health Information Exchange
SIM- State Innovation Model
STBH-Short-Term Behavioral Health benefit
SUD-Substance Use Disorder

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



