



MINUTES
Accountable Care Collaborative (ACC)
Provider and Community Experience (P&CE) Subcommittee

April 14, 2022, 8:00-9:30 A.M.

1. Introductions & Approval of February Minutes (handout)

Joanna Martinson, P&CE Co-Chair, called the meeting to order and Brooke Powers, Health Care Policy and Financing Department (HCPF) took attendance. The following people were in attendance:

- A. Voting members:** Joanna Martinson (P&CE Co-Chair, KPJ First Services), Anita Rich (Retired/Community Member), Jennie Munthali (Colorado Department of Public Health and Environment (CDPHE), Pat Cook (CO Gerontological Society (CGS)), and Andrea Loasby (CU School of Medicine & Children's Hospital Colorado). A quorum was not established, the minutes will be reviewed at the next meeting.
- B. Non-Voting Members:** Brooke Powers (HCPF, liaison to P&CE), Callie Kerr (HCPF), Emily Woessner (HCPF), Nikole Mateyka (Colorado Community Health Alliance (CCHA) Regional Accountable Entity 6 (RAE 6)), Jen Hale-Coulson (NHP/RAE2), Donald Moore (Pueblo Community Health Center), Audrey Oldright (Rocky Mountain Health Plans (RMHP/RAE1), Nicole Konkoly (RMHP/RAE1), Matthew Lanphier (HCPF), Matthew Wilkins (Health Solutions/Health Colorado/RAE4), Tina Gonzales (Health Colorado/RAE4), Katie Mortenson (CCHA, RAE 6&7), Ashley Clement (NHP/RAE2), Diane Seifert (CCHA/RAE7), Brittany Hampton (CCHA/RAE7), Brandon Arnold (CAHP), Emily DeFrancia (COA), Megan Comer (HCPF), Brittany Deyoe (HCPF).

2. P&CE Follow-up Items and Housekeeping

Joanna Martinson, P&CE Co-Chair

- Reminder: 2 open voting member seats, 1 for a hospital representative and 1 for behavioral health. The P&CE subcommittee follows HCPF's PIAC membership/procedures. The application has been posted. The committee encourages, all of those who currently participate in the P&CE meetings to apply for both of the open voting member seats. The application can be found [here](#). Please reach out with any questions.

3. STATE ACC PIAC-UPDATE

Joanna Martinson, State ACC Program Improvement Advisory Committee (PIAC) member.

- As always, please visit the ACC PIAC [Website](#); there is a lot of valuable information located on the website, including the minutes from the PIAC



meetings as well as handouts. A reminder: PIAC meetings are always held from 9:30 AM- 12:15PM, usually the third Wednesday of the month, please visit the site for the date of the next meeting.

- Joanna gave the highlights from the February 16 and March 16 PIAC meeting:
- February 16th Meeting highlights:
 - Topics included looking at more information in the RAE investments and community grants. Long discussion on the “Update Your Address Campaign.” Looking at COVID and PHE emergency coverage. How do we ensure that our Health First Members and CHP+ members continue to be enrolled and get the benefit help they need? How do we get the message out? How do we meet the diversity needs? How do we ensure that members get their medication and do not miss appointments? Additionally, the “returned mail” numbers were staggering...the problem of not having the correct address is a very large issue and big problem. How do we give a better and clearer message to people? Tracy Johnson presented at the meeting. She informed the group that the PHE would be extended to the 16th of April. Some changes she addressed were the end of COVID testing coverage. She talked to the enrollment for children had a 30% growth and adult enrollment growth was over 50%. A discussion on communication strategies—Suggestions are needed and welcomed. Informed the group that funds in the form of grants were recently released from CMS in order to connect pregnant women and children to Medicare and Medicaid.
 - Visit [here](#) for all PHE information from the Department.
 - The members of the PIAC requested to have the enrollment data broken down further to show the different RAEs, ages of members, race of members, pediatric providers. The other request from the members of the PIAC was to look at how each of the RAEs spends their incentive dollars. The PIAC looked at the DOC metrics and the data sharing agreement with the DOC and the RAEs—looking at the performance pool and incentive dollars and how they get the money from the percentage of discharged from the DOC that have one at least one BH visit. Overall good work between the DOC and the RAEs.
- March 16th Meeting highlights:
 - Aaron Green, the EDI Officer presented again on the Health Equity Plan, at the PIAC meeting and it was extremely informative and helpful. Joanna encourages everyone to look at his presentation on the PIAC Website.
 - Aaron Green completed the March 22, 2022 town hall and the remaining dates, which all are encouraged to attend are: **May 3 (3-4 p.m. MDT) - [Registration Link](#) May 17 (12-1 p.m.MDT) - [Registration Link \(Spanish Speaking Session\)](#) June 2 (12-1 p.m. MDT) - [Registration Link](#)**

- Please look into the townhalls and give input and feedback. Joanna encourages feedback and comments from the highlights of the PIAC meetings.

4. **eConsults update:** Emily Woessner, eConsult Contract Administrator- HCPF

- **eConsult Program Goals:**

- Improve member/provider experience and satisfaction
- Support earlier diagnosis and health management chronic conditions
- Accelerate turnaround time with care management guidance.
- Reduce unnecessary or inappropriate referrals to specialists
- Decrease health care expenditures

- **Prior Meeting Updates:**

December 2021 P&CE meeting:

- Centers for Medicare and Medicaid Services (CMS) delayed the timeline

February 2022 P&CE meeting:

- CMS approved program design
- Innovation to Negotiate (ITN) being reviewed internally
- CMS review of ITN for the funding and solicitation

- **Current Updates**

- CMS reviewed and approved the ITN late March 2022
- Timeline has moved up
- Vendors may submit their proposals to the ITN 4/1/22 to 5/18/22 on the Vendor Self Service (VSS) website

- **What is an ITN?**

Invitation to Negotiate (ITN):

- Alternative to the Request for Proposal (RFP) process since 2018.
- Intended to solicit responses from potential Vendors to determine the best method for achieving a specific goal/solve a particular problem (innovative solutions)

- Flexibility in program design
- Not as a prescriptive as RFP

Foundational program requirements remain non-negotiable

- **Evaluation & Negotiation Process**

- 5-6-month process
 - Multiple internal teams across several departments
- Evaluation process
- Negotiation process
- Awarding the Vendor
- Department is limited in its ability to discuss specifics
 - Procurement Code: 24-101-401-01: In no event shall a solicitation response be made available publicly prior to award.
 - Internal members must sign non-conflict/confidentiality agreements

- **Timeline** (please note the timeline is proposed and is subject to change without prior notice and is only provided as a reference)

- Mid-Spring/Summer 2022—Invitation to Negotiate (ITN) posted and Vendor Selection
- Fall/Winter 2022—Contract Negotiations
- Winter 2023—Centers for Medicare and Medicaid Services (CMS) Review of Contract
- Spring/Summer 2023—Implementation Activities
- Summer/Fall 2023—Go Live!

- Any questions can be emailed to: hcpf_econsult@state.co.us You can also visit the Departments [Telemedicine & eConsults webpage](#) for more information.

- Open discussion:

- Joanna wanted to know how many Vendors does HCPF anticipate that will complete the process? Emily clarified that ONE vendor will be selected for the whole state; vendors can submit their proposals now through May 18th. HCPF expects many vendors to submit proposals.

- Dede de Percin asked how HCPF is approaching the conversion from eConsult to Face-to-Face interactions? Emily is hopeful that the vendors can bring their solutions to HCPF, ITN information is posted on the Website.
- Joanna asked to hear from Dr. Walsh and if he had any opinions on the eConsult program/process. Dr. Walsh expresses the real opportunity for our members. And he has high hopes for this program to flourish and hoping that providers participate, because it depends on their participation. To help with the hurdles of limitations that members and providers currently experience.
- Dede de Percin spoke to past struggles with getting specialists involvement. Matt Lamphier (HCPF) spoke to the design of the eConsult program and how it is different than it was previously due to CMS regulations and requirements. The vendor will have to hire the specialists themselves directly, to provide an adequate group of providers. One of the requirements of the vendor is to have an adequate network of Specialists. Dr. Walsh expressed that the Department is sensitive to the concern that Dede de Percin brought up. It will require effort to get participants in the program.
 - Pat Cook asked for clarifying questions. In this process will the doors be opened up for Physician Assistants (PAs) and Nurse Practitioners (NPs) to participate in an active way? HCPF thinks that PAs and NPs should be involved in the eConsult program. The groups that Pat Cook primarily works with, especially psychiatry, is often reluctant around using providers that aren't Medical Doctors.

5. Care Coordination

Kidron Backes, Management Care Coordination Specialist Case, OCL, HCPF (Unable to attend because she was out sick for the meeting, will hopefully be at the next meeting in May 2022)

Brooke was able to speak on some employment positions have been posted to the State website to help leverage this important work.

Informative American Rescue Plan Act Information links to visit: [ARPA MEMO](#), [ARPA Newsletter](#), [ARPA Press Release](#)

6. Open Discussion

Joanna Martinson, P&CE Co-Chair

Encourages the SEPs/CCBs- to join our group, because of the projects that this subcommittee group are involved with correlates to the work that the PC&E hopes to provide to the members.

- About a year and half ago, the PC&E presented a formal recommendation to the PIAC regarding use by the RAEs of a [Member Transition of Care Coordination \(RAE-to-RAE\)](#)

[Form so](#) as members are moving to a new community (different RAE) this form was made to help make the transition smoother and use of the form was adopted by the RAEs.

- Brooke suggests that Joanna bring the request of data from the form, to the next PIAC meeting. Anita would like each RAE to submit a data report on the form.
- Matthew Wilkins (RAE4) spoke on the form and how it is very helpful with identifying the needs that the member needs from the current RAE to the receiving RAE. Some of the issues: Anecdotally it has worked, but there needs to be some updates to the form. Complex member definition needs to remove the 25K out-it is outdated. He does not have any data to share today. It has helped build relationships with care coordinators in different RAEs. Qualitative and quantitative data would both be helpful.
- Pat Cook: Loves the form and she was thinking that in the next generation, in the EHR- it should be able help contact the member's last provider and use a tablet to coordinate.
- Audrey Oldright (RAE1): Helpful for all of care coordination. It can be challenging if the form is not completely filled out. Agreed with Matthew said they are helpful, and they do get them pretty frequently.
- Joanna said that not only from RAE to RAE but also provider to provider, using it in different compacity than originally intended.
- Brittany Hampton (CCHA/RAE6/RAE7): Uses this form even though they are not the lead care coordinator, maybe change the language on the form to help with that confusion. Current RAE helpful, Current care coordinator-change. Add a section for the person filling out the forms, their role in the members life? A checkbox? Or other functionality to the form?
- Pat Cook: What would be helping in reframing that top area as Brittany Hampton suggested.

Please join us at the next meeting: **May 12, 2022 8-9:30am**

Reasonable accommodations will be provided upon request for persons with disabilities. Please notify Brooke Powers at 303-866-2184 or brooke.powers@state.co.us or the 504/ADA Coordinator hcpf504ada@state.co.us at least one week prior to the meeting to make arrangements.