



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

**February 11, 2021, 8:00-9:30 A.M.**

## **1. Introductions & Approval of January Minutes (handout)**

Kathie Snell, P&CE Co-Chair, called the meeting to order. The following people were in attendance:

**Voting members:** Kathie Snell (P&CE Co-Chair), Joanna Martinson (P&CE Co-Chair), Jennie Munthali (Colorado Department of Public Health and Environment), Shera Matthews (Doctors Care), Michelle Hoy (MindSprings Health), Andrea Loasby (Children's Hospital), Carolyn Green (retired provider), Pat Cook (Colorado Gerontological Society), Jamie Haney (Developmental Disabilities Resource Center). A quorum was established.

**Non-Voting Members:** Matthew Jacobs, Angela Goodger, Jen Hale-Coulson, Jared Bateman, Katie Mortenson, Dede de Percin, Vicente Cardona, Donald Moore, Diane Seifert, Julia Duffer, Elise Cooper, Joseph Anderson, John Salvino, Jessica Zaiger, Barbara Rhodes, Tina Gage, Nikole Ordway, Kellie Jackson, Stephanie Brooks

Kathie Snell asked for a motion to approve the January 2021 Meeting Minutes. The meeting minutes were approved without any additional revisions or abstentions.

## **2. P&CE Follow-up Items & Housekeeping**

Kathie Snell, P&CE Co-Chair

- Open voting member seat for Medicaid member (or their family member)
- [Member Care Coordination Transition Regional Accountable Entity \(RAE\) to RAE Recommendation](#) Update - Jen Hale-Coulson
  - Member Transition form on the last leg of review. Reviewed one last time as a group (8 February 2021) at last care coordination workgroup meeting. Brooke provided some recommendations and changes, all which were accepted. These changes were not significant changes but helped to clarify language and definitions. Each RAE member is taking the form back to their management teams for final review and will provide final feedback to Brooke Powers (HCPF) by 22 February 2021.

## **3. [State Accountable Care Collaborative \(ACC\) Program Improvement Advisory Committee \(PIAC\) Update](#)**

Dede de Percin, State ACC PIAC member

- Executive planning sessions for the upcoming year, January to March.
- January meeting - Two meetings will not be enough. 3<sup>rd</sup> meeting in March will be open to the public.



- Looking at structural changes and nominating a new Co-Chair.

## 4. Workgroup Updates & Discussion

Joanna Martinson, P&CE Co-Chair

- Access to Specialty Care Workgroup - Vicente Cardona, Chair
  - Focus of last meeting includes two areas - 1. eConsults and 2. Care Compacts.
  - Care Compacts - Not trying to change the KPI measures but better understand what the best practices are and what is hindering RAE efforts.
  - Establishing a commitment letter for workgroup members that is planned to send out later in the week.
  - Shera Matthews shares concerns from the provider perspective on achieving care compacts and the impact of sharing provider relationship information.
  - Julia Duffer recommends that this workgroup may be a good place to discuss improvements to the care compact measurements and calculations.
  - Donald Moore asks clarification on if Care Compacts are a part of CMS requirements.
    - Ben Harris provides feedback that this is not a federal requirement and feedback on improving the evaluation of access to specialty care is encouraged. We want to understand what is occurring and how to build an effective performance evaluation approach.
  - Julia Duffer asks clarification on if the metric aims to evaluate access to specialty care or the quality of care.
    - Ben Harris shares how initial efforts are groundwork to understanding the existing provider relationships.
  - Carolyn Green asks if Chris Stille from Children's Hospital is involved in any of these discussions because he was conducting a study on provider relationships. He is not.
  - Carolyn Green asked if members need to share more of a voice for eConsults. Ben Harris agrees that more member voices are helpful.
  - Shera Matthews shares how barriers of access to specialty care may be limited to a few adult specialties while the Colorado Health Institute (CHI) is also studying the access to specialty care. Shera shares that this area may be lower priority from a provider experience perspective due to feeling pressure from potentially avoidable costs (PAC) and the alternative payment model (APM). Shera also shares concerns with the expense of specific EMR software on individual practices to effectively conduct eConsults.
  - Dede de Percin shares details on the university pilot program for eConsults. The benefits from a provider perspective may be different from how the community may benefit from eConsults.
  - Julia Duffer shares that connection costs for eConsults may be covered for specific providers if approved by a university grant.
  - Pat Cook shares concerns with expensive medications being denied and

the possible role of PharmD eConsults helping to reduce the costs.

- Care Coordination Workgroup - Jen Hale-Coulson, Chair
  - Productive meeting on 8 February 2021. In addition to finalizing the RAE-to-RAE Member Transitions of Care Process/Care Coordination Form, Ben Harris and Brooke Powers led the group and discussed defining extended care coordination (ECC). Evaluating survey responses from the RAEs to find common ground, language, and expectations. Goal is to provide recommendations on key ECC components and best practices to P&CE by April 2021.
  - Discussed hard to reach members and how member engagement efforts are defined within ECC.
  - Discussion on adequate representation in the ECC discussions. The workgroup is an open, but consistency is helpful. Additional attendees are welcome, and the workgroup products are available for review.

## 5. [Social Health Information Exchange/Care Coordination](#)

Stephanie Bennet, [Office of eHealth Innovation](#) - [Presentation](#)

- OeHI and eHealth Commission Background
  - FY21 Goals: Advancing Colorado's, Health IT Roadmap, Telemedicine, and Health Equity
- Care Coordination Workgroup Background
- Social-Health Information Exchange (S-HIE)
  - An interoperable and customizable infrastructure that allows multiple entities to screen and assess the needs of individuals and families, refer to clinical and non-clinical resources, and confirm whether services are accessed - optimizing care coordination across clinical and non-clinical teams.
- Visual of S-HIE Model through the lens of the patient (see presentation)
- What does success look like?
  - Integrated activities around a shared vision.
  - A regional approach for building towards a statewide infrastructure.
  - Common data standards and a centralized community resource inventory.
  - A process for leveraging funding resources and public/private partners.
- Recent and Upcoming Publications
  - Advancing a Coordinated Ecosystem for a Social Health Information Exchange (S-HIE) in Colorado
  - Implementation Guidance: For Screening for Social Determinants of Health in an Electronic Health Record
  - Coming Soon - S-HIE Interoperability Guidance
- Feedback:
  - From Stephanie Brooks - this is very exciting work. Does OeHI have thoughts about how this information could or will integrate with PEAK or some of the ideas around building out a "PEAKPro" product for community-based orgs? PEAK is the online version of CBMS for people to apply.
    - One of OeHI projects includes identify resolution projects and PEAK has been identified as an area to be included in S-HIE.
  - Michelle Hoy asks if OeHI is working with Health Information Exchanges (HIEs) and how they are going to be involved. Also, is OeHI looking at 42CFR

- Part 2 - Substance Use Confidentially Issues in sharing.
- Yes, we are working with Colorado State Health Information Exchange (CORIO) and Quality Health Network (QHN) as partners.
  - Yes, 42CFR Part 2 is a consideration but also waiting further federal guidance.
- Michelle Hoy also shares how MindSpings Health has done groundbreaking work with QHN in getting information into the HIEs and is willing to assist OeHI. Michelle also recommends revisiting how Behavioral Health fits into the S-HIE model.
  - Jessica Zaiger shares how provider and hospital systems have partnered with Aunt Bertha to connect to electronic health records (EHRs) for the purposes of conducting social determinant screenings and sending indirect referrals to community partners. Does S-HIE align with this or is there a partnership?
    - The goal of S-HIE is to connect and build bridges with current efforts where possible.
  - Dede de Percin is happy to share a provider screening tool that addresses how providers approach their work.
  - Currently, there is not a clear end date to this project.
  - Dede de Percin stresses the importance of planning for the Public Emergency end date and how it impacts this work.

**Next meeting: March 11, 2021, 8:00-9:30 A.M.**