



MINUTES

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

May 14, 2020, 8:00-9:30 A.M.

1. COVID-19 Update

Dr. Lisa Latts, Chief Medical Officer, HCPF, 30 minutes (8:00-8:30) - [Presentation](#)

- COVID-19 in Colorado
 - 20,475 cases
 - 3,735 hospitalized
 - 1,062 deaths
 - 60 counties
 - 206 outbreaks
 - Hospitalization surge has concluded, and deaths have doubled
- COVID-19 in US: 1.3M
- COVID-19 Worldwide: 4.3M cases
- Testing
 - Increasing availability
 - Still mainly limited to those with symptoms
 - Next phase - more widespread testing with contact tracing
- Testing strategies
 - PCR
 - Antibody Tests
 - Was not FDA approved when originally placed on the market
 - Do not know if individuals can only get the virus once. The virus in Europe is different than the virus in China. It has mutated.
 - New Rapid Tests - Saliva
- Treatment
 - Hydroxychloroquine - no benefit shown
 - Remdesivir - shortened median time to recovery and lower mortality rate than placebo individuals getting drug
 - Some promising vaccines in phase II trials, such as in England and Germany
- Overview of ADT Data for emergency department, inpatient, and outpatient visits
- HCPF Activities Over Past Month
 - Finalizing waiver plans (1115/1135)
 - Telemedicine refinements
 - Provider sustainability
 - Residential Strike Force
 - Member operations and preparations for surge
 - BUDGET, BUDGET, BUDGET



- Updated Medicaid, CHP+ Membership Surge Forecast
 - Membership surge of about 563,000 Coloradans between April 1 and December 31, reflecting a 44% increase to the 1.3M members covered in Medicaid and CHP+ as of March 2020 (OSPB adjusted assumed Emergency period).
 - The maintenance of effort ends with the public emergency period (now presumed 12/31/2020). We project an estimated disenrollment of 332,000 members who do not meet eligibility criteria 12/31/2020.
 - Net surge of 368,000 members, 29% increase, FY 2020-21 compared to March 2020.
- **Question** (Randi Addington) - Have we seen or are we monitoring any cases of pediatric multi symptom inflammatory syndrome?
- Dr. Latts -
 - Not that I know of. We have not heard of any case as of yet. We are no longer authorizing in-patient admissions. This was one of the changes due to COVID-19. It is possible we have some, but we are not longer required to authorize in-patient admissions.
- **Question** (Dede de Percin) - As you look at telehealth is there the possibility of paying for eConsult to reduce costs and face to face visits?
- Dr. Latts -
 - eConsult is defined as a consult between a PCMP and specialty. Yes, we are looking at that right now.
- **Question** (Janelle Shumaker) - Can you elaborate on the provider sustainability? What steps are being taken to help specifically Medicaid providers? Support for the additional expense of PPE?
- Dr. Latts -
 - CMS will be sending some money to Medicare providers. Asked CMS to provide additional support for many of our Medicaid providers.
 - Governor was in Washington D.C. recently to meet with the President to discuss access to PPE.
- **Question** (Donald Moore) - What are you hearing about a reliable antibody test becoming available?
- Dr. Latts -
 - Not anything good. I have not seen any studies yet regarding a reliable antibody test along with any studies that suggest having antibodies suggests an individual is immune.
- **Question** (Anita Rich) - Has HCPF been able to identify needs related to telemedicine?
- Dr. Latts -
 - Telemedicine via video is better than via phone.
 - Video creates more opportunity for a better visit.
 - Seeing a lot of telephone only for a few reasons.
 - With everyone working from home, broadband is limited, and signal is weak.
 - Some individuals do not have the devices, especially in rural areas.
 - This will greatly accelerate the future of telemedicine.

- **Question** (Jo English) - Has there been any discussion about offering behavioral health support for staff working in long-term care facilities and SNFs?
- Dr. Latts -
 - Currently do not know the answer to this. There is a real fear for individuals working with patients with COVID-19.
- **Question** (Jill Atkinson) - Any support for families to access masks and things like thermometers? We are asking all patients if they have a fever, but most don't have a thermometer. Also, many families need more affordable data packages on their cell phones
- **Question** (Jessica Zaiger) Many Medicaid members have government-issued cell phones and are limited on minutes and data.
- Dr. Latts -
 - Cell phone providers have been giving out packages during the crisis. Thermometers are currently an issue. Working on this but is a scarce resource currently.
- **Question** (Donald Moore) - With our state's budget challenges, will HCPF be able to support telehealth reimbursement in the short and/or long term?
- Dr. Latts -
 - Working on this. Cannot make long term promises but HCPF is advocating for this.

2. Introductions

Anita Rich, P&CE Chair, 5 minutes (8:30-8:35)

On the Google Meet: Anita Rich (PC&E Chair), Brooke Powers (HCPF), Matthew Jacobs (HCPF), Dr. Lisa Latts (HCPF), Dede de Percin (MHHA), Bridget Burnett (CCHAP), Elina Navarro (COA), Alyssa Rose (Beacon Health Options), Aaron Brotherton (COA), Andrea Skubal (CCHA), Diane Phifer (CCHA), Jared Bateman (SEHG), Katie Mortenson (CCHA), Ziger, Lila Cummings (CHA), Jen Hale-Coulson (Beacon Health Options), Donald Moore (PCHC RAE 4), John Salvino (COA), Julia Duffer (HCI), Jo English (COA), Beckner, Randi Addington (HCI), Jessica Zaiger (CCHA), Janelle Shumaker (Adventure Dental and Vision), Jill Atkinson (Mountainland Pediatrics), Joanna Martinson (NCHA), Nicole Konkoly (RMHP), Carrie Dutley (Denver Health), Marcy Beckner (RMHP), Jo Nausba (Denver Health), Kari Degerness (CIVHC), Tammy Arnold (NEHP), and Susan Mathieu (Farley Health Policy Center)

Voting Members: Anita Rich (PC&E Chair), Lila Cummings (CHA), and Michelle Hoye (Mindsprings Health), and Shera Matthews (Doctors Care)

3. Approval of Minutes from March Meeting (handout)

Anita Rich, P&CE Chair, 5 minutes (8:35-8:36)

- Anita Rich asked for a motion to approve the April Meeting Minutes. The meeting minutes were approved without revisions or abstentions.

4. State PIAC Update

Dede de Percin, State PIAC member, 5 minutes (8:36-8:40)

- COVID-19 updates
 - Substance Use Disorder Benefit
 - Delayed to January 1st of next year
 - Review of Committees and State PIAC application

5. RAEs COVID-19 Responses Discussion

RAEs, 30 minutes (8:40-9:20)

- Anita Rich - Asked questions about what has been successful and what are the needs of specific populations, such as high-risk individuals.
- RAE 1
 - Making sure no disruption in normal care. Pushing telehealth and supporting providers on this platform.
 - Reinforce public health messaging.
 - Focusing on individuals with 5 or more risk factors.
 - Working on barriers to managing care at home, lack of telehealth devices, and priority of housing support.
- RAE 2
 - Successful
 - Expansion of telehealth.
 - Drive thru labs for testing and home delivery services.
 - Increased communication to providers.
 - Frontier House.
 - Outreach to risk members and warm handoffs.
 - Crisis services being handled through telehealth.
 - Connecting to students and teachers via telehealth.
 - Challenges
 - Medication refills to include individuals being discharged from the justice system.
 - Care for homeless population.
 - Resources for foster care.
 - Shortages of PPE and staffing.
 - Alternative Care Site - has been approved but concerns with limited ability to go outside. If individuals do, they will not be allowed back in.
 - **Question** (Anita Rich) - How has residential facilities been impacted?
 - Working through the crisis and behavioral health system to address the impacts.
 - RAEs 3 and 5
 - Supporting telehealth and loosening restrictions on reimbursements.
 - Looking at best practices.
 - Looking to support primary care. Inputted money from performance pool.

- Conducting needs assessments such as PPE.
- COVID-19 risk scores on website.
- Outreach to members with higher risk scores.
- Population health groups - texting campaign to share resources and tucked into primary care.
- Temporary closures - assessment needs such as transportation to another care site.
- MA site established to help counties in enrolling Medicaid members.
- Providers- provider resource group meetings.
- MA site - not taking in-person members. But using over the phone or a drop box.
- **Question** (Anita Rich) How many apps are you doing day?
 - Will double check with MA but is mostly calls.
- **Question** (Anita Rich) How are you using community resources?
 - We are supporting community partners to include addressing PPE.
- **RAE 4**
 - Primary Care reporting a decrease in visits initially but now increasing.
 - Pediatrics wellness checks twice weekly.
 - Weekly provider calls - addresses both behavioral health and primary care.
 - Behavioral Health providers greatly engaged.
 - Learning Collaboratives maintained.
 - Great engagement and support from community leadership.
 - Providers would like to see patients.
 - Risk score tiers for high risk members.
 - Phased approached to member engagement.
- **RAEs 6 and 7**
 - Outreach to members while trying to ensure not overburdening members.
 - Conducting outreach campaign to include texting efforts according to high risk tiered approach.
 - Aligning communication with messaging coming from other sources such as the CDC.
 - Receiving good feedback regarding telehealth.
 - All providers are still doing in-person wellness visits but limiting hours.
 - Project Angel Heart - Philanthropy efforts to provide at risk members with resources such as food.
 - Updated care coordination work flows to better support COVID-19 and high-risk members.
 - Continually updating website to match website.
 - Challenges
 - Connectivity issues.
 - Phones have limited minutes. Members want to connect with families as opposed to providers.

- Many PCPs not approved for small business loan.
- Many providers are concerned with how COVID-19 will affect provider attribution?
- **Question** (Anita Rich) - what data are you keeping?
 - Tracking members with COVID-19 and interventions.
 - Care coordination data.
 - Looking at who is interested in crisis center and axillary services.
 - Data by county of who has COVID-19 and by demographics.
 - Interested in obtaining lab data.

6. Workgroup Updates

Anita Rich, P&CE Chair, 10 minutes (9:20-9:30)

- Care Coordination Work group - Joanna Martinson, chair
 - 1st meeting held last week. Focus on ground leveling, prioritizing work efforts, and receiving feedback.

Next meeting: June 11, 2020, 8:00-9:30 A.M.

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.