

## Northeast Health Partners' Performance Improvement Advisory Committee (PIAC) Wednesday, April 27, 2022 | 10:00-11:30 AM

### Joining the Meeting:

Web: https://us02web.zoom.us/j/84792974410?pwd=Z1R6VDl3S2IxUFpDbS90Y0Y4SDBuQT09

Password: 820739

By Phone: (669) 900-6833 | Meeting ID: 847 9297 4410 | Call-In Passcode: 820739

#### **Meeting Materials**

1) Agenda; 2) Draft minutes (need approval); 3) PowerPoint slides; 4) Other Attachments

			Voting Participants		
	Reid Bryan/ Cavity Free @3	х	<b>Joanna Martinson/</b> North Colorado Health Alliance	х	<b>Linda Thorpe/</b> East Morgan County Hospital
	Tanya Geiser/ Healthy Communities (Weld)		Kelly Kading/ WIC (Weld)		Renee Schell/ Frontier House
х	Celeste Ewert/ Envision		<b>Dave Madsen/</b> Salud Family Health Services		Sandra Hasch/ Weld LTC Program Supervisor
	Dana Garvey/ NFP (Weld)	х	<b>Liz Hickman, PhD/</b> Centennial Mental Health		<b>Tanya Unrein/</b> North Colorado Family Medicine-Banner
	Danny O'Canas/ Frontier House		Maureen Huff/ North Range Behavioral Health		Penny Stumpf/ Healthy Communities
Х	Erika Greenberg/ CAHEC		<b>Ginger Williams/</b> Hillcrest Center & The Towers (Wray)		
			Non-Voting Participants		
х	Alee LaCalamito/ NHP	х	Ed Arnold/ Beacon	х	Melissa Schuchman/ Beacon
	Alex Barreras/ Banner		Erin Herman/ HCPF	х	Natasha Lawless/ NHP
	Alison Keesler/ SCL Health		Frank Merrill/ NHP	х	Nina Marinello/ SCL Health
Х	Annie Fritz/ NCHA		Jasmine Shea/ Keefe Memorial Hospital	х	Pam Boehm / Beacon
х	Ashley Clement/ NHP	х	Jeffrey Bacon, MD/ Banner Health	х	Patsy King/ Yuma District Hospital Clinics
	Barb Kleve/ Beacon	х	Jen Hale-Coulson / NHP	х	Patty Northern / Peak Vista
Х	<b>Bev Sandburg/</b> Yuma District Hospital Clinics		John Mahalik, PhD/ Beacon		Rachel Wisdom / Weld County DHS
	<b>Brenda Rhea/</b> Washington County Nursing Home	Х	Kari Snelson/ NHP		Rey Davis / Banner
Х	Brian Robertson, PhD/ NHP		Leah Agee/ Beacon		Sarony Young/ DentaQuest
	Brooke Powers/ HCPF		<b>Linda Medina/</b> Envision		Stella Worley/ Keefe Memorial Hospital
	Cassidy Palermo/ Peak Vista CHC	х	Lynne Bakalyan/ Beacon		Tiffany Dilsaver/ Valley Medical Clinic
	Cathy Harshbarger/ Melissa Memorial Hospital	х	Mandi Strickland/ NHP		Tina Gage/ Beacon
	Cindy Mulder/ Yuma District Hospital Clinics		Mary Snyder/ Sterling Living Center	х	Wayne Watkins/ NHP
	Crystal Asuncion/ Beacon		Megan Philips/ Weld County SEP		Wilson Araque/ Beacon

### Additional attendees:

X Linda Barnhill

X S. Worley

X Hannah Johnson

Agenda Topic	Discussion	Follow-up
Digital Roll Call of voting members	<ul> <li>Completed roll call with attendance members listed above</li> <li>Quorum of voting members was not met at the meeting start; 6 voting members were noted.</li> </ul>	<ul> <li>July, October, January, and April Minutes will be approved at the July meeting</li> <li>Brian to look at remote voting and back-up voters</li> </ul>
Review Charter and Bylaws	<ul> <li>No quorum was noted. This will be pushed to a future meeting.</li> </ul>	Revisit in a future meeting.
Follow-Ups	<ul> <li>Complex Care is tentatively pegged for the July PIAC Meeting</li> <li>Workforce Challenges Discussion is tentatively pegged for the July PIAC Meeting</li> <li>SFY 2021 Performance will be discussed today in the Performance Measures Section</li> <li>Covid-19 Link (completed on 1/27)</li> </ul>	<ul> <li>Complex Care is tentatively pegged for the July PIAC Meeting</li> <li>Workforce Challenges Discussion is tentatively pegged for the July PIAC Meeting</li> </ul>
Regional Updates	<ul> <li>State PIAC Updates:         <ul> <li>Looking at current performance measures. May and June meetings went into deeper dives to make recommendations.</li> <li>Medicaid Director, Stacy Johnson, is leaving in May. Stacy has been a great executive to work with.</li> <li>Stakeholder meetings are underway for the Health Equity Plan. The presentation is included in the state PIAC website. The state is doing a SWOT analysis and looking at health equity in performance measures.</li> <li>HCPF is hiring a behavioral health advisor to the executive level. This move is aligned to ACC 3.0 in how to better integrate behavioral health.</li> <li>E-consults has been on the docket, but is moving forward now that it has a program lead. The Provider and Community Experience Subcommittee makes recommendations on this measure. The last meeting explored recommendations and the tools that will be used.</li> <li>Public Health Emergency (PHE) Unwind: The state is giving 14 months to "return to normal." Goals are continuity of coverage and a smooth transition with minimal impact. Changes include 65 and older buy-in and post-partum for 12-months. The PHE unwind also looks at renewal materials to make sure they are clear and easy, and enhancing on-line tools. A signature is now required, and PIAC is looking at how that will work. Also included in the PHE unwind is the "update your address campaign."</li> </ul> </li> </ul>	Brian to send out Lynne's Tip Sheet (completed on 4/27)      Sheet (see the second out Lynne's Tip Sheet (completed on 4/27)      Sheet (see the second out Lynne's Tip Sheet (see



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	<ul> <li>DOC and looking at data sharing agreement that was put in place in 2018 has been positive. How we are connecting to members being released is part of Performance Pool.</li> <li>Open invitation to attend PIAC meetings including the Performance Measurement and Member Engagement and the Provider and Community Experience Subcommittee.</li> </ul>	•	=
	NHP Updates: Two new staff members were added: Ashley Clement (Regional Care Coordination Manager) and Alee LaCalamito (Population Health Program Coordinator).		
	PHE Unwind:  NHP developed a one-page tip sheet that aligns to three things communication focal points:  Updating your address Checking your mail Completing the Renewal Form		
	The goal is to reduce the amount of information for members and to keep information around "the basics" The Update Your Address campaign allows members to update their address for Medicaid renewal and communications. Updating an address does not impact attribution even if the address change is to another region. Attribution is based on a brick-and-mortar building, and a member must change their PCMP to change the attribution.  If a member only receives e-mail, does the system allow for an electronic signature? The state is currently working through the kinks to allow for electronic signature.		
	First Friday's Quality Forum:  NHP Established a monthly opportunity to connect with regional stakeholders to discuss important issues.  Meetings will occur on the first Friday of every month starting in May. The first meeting will be about the DAP, KPIs, and performance incentives.		
	Prescriber Tool: HCPF is implementing a new Alternative Payment Model program with the prescriber tool (electronic medication		

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	prescribing) to help reduce medication costs. NHP started assessing practices last year for this work. The state created an attestation form that is available on-line to assess whether practices have access to the formulary, that it is returning appropriate alternative medications.	
Regional KPI Performance	<ul> <li>FY21 Performance was not included; Q1 SFY 22 was included instead. The only KPI that was met in Q1 was ED visits, but those visits have been rising.</li> <li>Q2 SFY 22 performance also saw ED visits as the only performance measure that met the goal, but at the Tier 1 level; further noting that ED visits are rising and are on trajectory to not meet the goal.</li> <li>A question was raised in Behavioral Engagement. The measure is related to a behavioral health engagement in a year. The DAP pulls Fee-For-Service (FFS) data only, and shows a number that is not reflective of the regional performance or the regional goal. The regional Tier goals are around 16%, and performance is around 15% vs. 1.32% performance in the DAP.</li> <li>Regional performance has migrated to Power BI for a more dynamic analysis. The Executive Summary now reflects change between months, performance against a goal, and the gap level for KPIs, BHIP, and Performance Pool at a glance.</li> <li>Key performance notes include:         <ul> <li>Well Child Visits are being met for 0-15 months, but not 0-30 months or 3-21 years, or other KPI measures</li> <li>SUD Follow-Up is not meeting the goal</li> <li>Foster Care Screening is not meeting the goal, but denominators are very low causing fluctuation across months.</li> <li>ECC is not yet reflective of the new definition.</li> <li>Goals met for: Preterm birth rate, DOC Behavioral Health Engagement, Asthma Medication Ratio.</li> </ul> </li> <li>Prenatal Engagement, Dental Visits, and ED Visit trends were also explored to show consistent performance for prenatal engagement and dental visits, but rising ED Visits.</li> <li>Brian offered the opportunity to work with clinics to explore codes to help boost performance and learn about things working well for regional performance improvement.</li> <li>Sam Herbert Discussed Wray Community District</li> </ul>	Brian to share SFY 21 KPI performance
	Hospital's activity around proactively identifying	



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	members to conduct outreach for well child visits.  The Worksheet he created is integrated into the clinical space.  Sam also holds a weekly tech training meeting for	
Ride North Colorado	<ul> <li>Salif also folds a Weekly tech training fleeting for Excel and Access</li> <li>The North Front Range Metropolitan Planning Organization (NFRMPO) is a regional transportation planning agency that typically serves urban portions Larimer and Weld counties, but the mobility program serves all of Weld and Larimer counties.</li> <li>The slogan of the NFRMPO is to "Connecting you and Northern Colorado." The goals are to improve individual mobility for older adults, people with disabilities, low-income individuals and non-English speakers, and improving regional mobility through enhances coordination and collaboration with regional public and private transportation providers.</li> <li>The mobility program is a hub to discuss mobility across disciplines. NFRMPO has collaborations with CDOT, regional planning, and local government planning in addition to partnerships with public, private, and volunteer transportation services. The goals are to connect to human service providers and non-profits to those services to better improve mobility in the region.</li> <li>The NFRMPO Mobility Program Includes:         <ul> <li>Ride NOCO: One-Call/One-Click service as an information hub to discover all the transportation providers in Larimer and Weld Counties.</li> <li>Open M-F, 8am to 5pm with callbacks within 1 business day.</li> <li>Mobility Committees: A platform to coordinate transportation providers and human service to identify mobility gaps.</li> <li>Two Major Committees: Weld County Mobility Committee</li> <li>Guide mobility program and enhanced transportation coordination efforts</li> <li>Transportation Planning Activities: Updated Coordinated Human Service Public Transportation Plan, and provide feedback to other transportation planning processes</li> </ul> </li> </ul>	Brian to share Hanna's presentation to the group (completed on 4/27)      Completed on 4/27)

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	<ul> <li>include insight from other groups who would not ordinarily be included in transportation planning.</li> <li>Technical assistance to connect partners to state and federal funding opportunities.</li> </ul>	
	<ul> <li>Website Features</li> <li>Find, plan, and book a ride in one place</li> <li>Currently working on a Trip Discovery Tool for the Website</li> </ul>	
Health Equity	<ul> <li>The state is really focusing on Health Equity and has a new group Health Equity, Diversity, Inclusion, and Accessibility for Members.</li> <li>Aaron Green, HCPF Chief Equity, Diversity, and Inclusion officer heads this effort and is looking for regional volunteers to represent RAEs and participate in a workgroup to help drive and influence this effort.</li> <li>Aaron's presentation will give an idea of the state's direction, and the idea of accessibility is a key feature.         <ul> <li>Website accessibility was a critical issue in a recent audit noting color contrast as a key feature of visual accessibility.</li> </ul> </li> <li>Health Equity Conference and a Peer Specialist training is May 9-13<sup>th</sup> with 40 hours of training offered. Eight spaces are left for members to become peer specialists at no cost to the members.</li> </ul>	
Open Discussion	No open topics or future agenda items were discussed.	
Next Steps	<ul> <li>B. Robertson noted the action items:</li> <li>Brian to send out the SFY21 KPI performance results (completed on 4/27)</li> <li>Brian to send out Lynne's Tip Sheet (completed on 4/27)</li> <li>Brian to share Hanna's presentation to the group (completed on 4/27)</li> <li>Brian to look up Robert's Rules of Order with remove voting since a quorum has not been attained in the past 4 meetings.</li> <li>Complex Care is tentatively pegged for the July PIAC Meeting</li> <li>Workforce Challenges Discussion is tentatively pegged for the July PIAC Meeting</li> </ul>	