



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

Joining the Meeting:

Web: <https://us02web.zoom.us/j/82210322500?pwd=U0RvdTI0aEp6NWZXRDYyV0Z6Qlc2Zz09> à Password:  
 443365  
 By Phone: (669) 900-6833 à Meeting ID: 822 1032 2500 à Call-In Passcode: 443365

Meeting Materials

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

Voting Participants					
	Celeste Ewert/ Envision	X	Joanna Martinson/ KPJ First Services	X	Linda Thorpe/ East Morgan County Hospital
	Danny O'Canas/ Frontier House		Ginger Williams/ Hillcrest Center & The Towers (Wray)	X	Penny Stumpf/ Healthy Communities
X	Erika Greenberg/ CAHEC		Dave Madsen/ Salud Family Health Services		Sandra Hasch/ Weld LTC Program Supervisor
X	Liz Hickman, PhD/ Centennial Mental Health				
Non-Voting Participants					
	Alison Keesler/ SCL Health		Frank Merrill/ NHP		Melissa Schuchman/ Beacon
	Annie Fritz/ NCHA		Jasmine Shea/ Keefe Memorial Hospital	X	Natasha Lawless/ NHP
	Barb Kleve/ Beacon	X	Jeffrey Bacon, MD/ Banner Health	X	Nina Marinello/ SCL Health
	Bev Sandburg/ Yuma District Hospital Clinics		Jen Hale-Coulson / NHP	X	Patsy King/ Yuma District Hospital Clinics
	Brenda Rhea/ Washington County Nursing Home	X	John Mahalik, PhD/ Beacon	X	Patty Northern / Peak Vista
X	Brian Robertson, PhD/ NHP		Jordan Romero / Planned Parenthood		Rachel Shuck/ Peak Vista CHC - Limon
	Chris Ukoha/ HCPF		Kari Snelson/ NHP		Rachel Wisdom / Weld County DHS
	Cassidy Palermo/ Peak Vista CHC		Leah Agee/ Beacon		Sarony Young/ DentaQuest
	Cathy Harshbarger/ Melissa Memorial Hospital		Linda Medina/ Envision		Stella Worley/ Keefe Memorial Hospital
	Cindy Mulder/ Yuma District Hospital Clinics	X	Lynne Fabian/ Beacon		Tiffany Dilsaver/ Valley Medical Clinic
X	Crystal Asuncion/ Beacon	X	Ed Arnold/ Beacon	X	Pam Boehm/ Beacon
	Collette Martin/ Peak Vists CHC		Mary Snyder/ Sterling Living Center	X	Wayne Watkins/ NHP
	Erin Herman/ HCPF		Megan Philips/ Weld County SEP		Wilson Araque/Beacon

Voting Participants					
	Tony Wells/ Washington County		Autumn Orser/ Peak Vista		Suprina Crawford/ DentaQuest
X	Linda Messer/ Lincoln County Hospital	X	Kristen Dearborn/ NE Colorado Health Department	X	Gay Lynn McKenzie/ Keefe Memorial Hospital
X	Stephanie Brinks/ Centura	X	Summer Tungseth	X	Jenifer Krulewich / Focus Care
X	Alee LaCalamito/ NHP	X	Shanna Wisdom/ NE Colorado Health Department	X	Nicole Seward/ Focus Care
X	Beth Hampton/ Keefe Memorial Hospital	X	Ashley Clement/ NHP	X	Destrie/ Peak Vista
X	Sara Chacon/ Kit Carson County Hospital District	X	Lilly Trevino/ Keefe Memorial Hospital	X	Stella Worley/ Keefe Memorial Hospital
X	Priyanka Chandrashekar/ NE Colorado Health Department	X	Linda Medina/ Envision	X	Kellee Beckworth/ UC Health
X	Lindy Barnhill/ Judicial	X	Alex Barreras/ Banner		

Agenda Topic	Discussion	Follow-up
Digital Roll Call of voting members	<ul style="list-style-type: none"> <li>Completed roll call with attendance members listed above</li> <li>Quorum of voting members was met; 5 voting members were noted.</li> <li>Liz Hickman motioned to approve all minutes from previous meetings (July 2021, October 2021, January 2022, and April 2022). Joanna seconded. No objections were notes and approval of the minutes was passed.</li> </ul>	<ul style="list-style-type: none"> <li>Brian to post meeting minutes</li> </ul>
Voting Member Updates, Review of Bylaws, Charter, and Committee CoChair	<ul style="list-style-type: none"> <li>Brian noted that the voting membership was pared down to remove voting members who had not been present over the past year, and this was approved electronically with the voting member board.</li> <li>Penny motioned to add language in the bylaws on voting member selection and approval. This was seconded by Linda.</li> <li>Joanna motioned to add voting members who are active participants in the PIAC. The motion was seconded by Penny. No recommendations were made and no volunteers stepped forward.</li> <li>Liz motioned to add a committee co-chair to support the regional PIAC efforts. The motion was seconded by Joanna. No recommendations were made and no volunteers stepped forward.</li> </ul>	<ul style="list-style-type: none"> <li>Brian to add language on voting member selection to the bylaws and send to the voting members for approval in the October meeting.</li> <li>Brian to recruit a co-chair and voting members.</li> </ul>

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Follow-Ups	<ul style="list-style-type: none"> <li>Brian sent KPI performance results, tip sheets, and the Ride NOCO presentation from the April meeting on April 27.</li> <li>Brian looked up electronic voting in Robert's Rules of Order, but could not find any guidance.</li> <li>The Complex Care and Workforce Challenge topics were moved to October's agenda.</li> </ul>	<ul style="list-style-type: none"> <li>Complex Care and Workforce Challenge topics will be discussed in October.</li> </ul>
Member Report Out	<ul style="list-style-type: none"> <li>N/A. Mr. O'Canas was not present.</li> <li>Brian will look to find ways to connect with Danny, and Lynne noted the MEAC may be a great opportunity to help capture member voices and increase member participation.</li> </ul>	<ul style="list-style-type: none"> <li>Brian to look for alternative ways to connect with Mr. O'Canas.</li> </ul>

		<ul style="list-style-type: none"> <li>• Lynne to reach out to MEAC for member experience stories.</li> </ul>
State PIAC Updates	<ul style="list-style-type: none"> <li>• Joanna spoke about State PIAC updates to help with aligning to state initiatives. Joanna noted the need for strong regional participation at the state level and in subcommittees, the regional representative will be able to provide a strong voice.</li> <li>• ACC 3.0 <ul style="list-style-type: none"> <li>◦ ACC 3.0 is in design and development.</li> <li>◦ Member engagement is a key topic of conversation as well-engaged members have better health outcomes. How do we get members involved in the design and development of ACC 3.0.</li> <li>◦ How do we make data actionable?</li> <li>◦ CMS core measures as measures for the region.</li> <li>◦ What's going well and what needs improvement in ACC 2.0.</li> <li>◦ State plans to have a concept paper by March 23 with a draft proposal in November.</li> </ul> </li> <li>• Recent Legislative Activity <ul style="list-style-type: none"> <li>◦ Updated eligibility, hospital transparency, rate reviews, behavioral health bills, and expansion to access for women and children.</li> </ul> </li> <li>• Regional Presentations <ul style="list-style-type: none"> <li>◦ Region 4 presented at the last meeting with a focus on process improvement and making data-driven decisions</li> </ul> </li> <li>• Overview of PIAC Activities <ul style="list-style-type: none"> <li>◦ Updates on KPI data for each region</li> <li>◦ Public Health Emergency (PHE) extensions <ul style="list-style-type: none"> <li>◦ Joanna is terming-out as a voting member in October. Region 2 needs good representation at the state level.</li> </ul> </li> </ul> </li> <li>• Subcommittee Updates <ul style="list-style-type: none"> <li>◦ Each sub-committee is very participatory with the PIAC and the ACC.</li> <li>◦ Behavioral Health:</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Brian to send Joanna's slides.</li> <li>• Brian/Joanna to recruit a regional representative to be a voting member</li> </ul>

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	<ul style="list-style-type: none"> <li>○ Provider and Experience Subcommittee: Looking at best practices for care coordination. Compliance Review Audit has a large presentation on the website for the July meeting.</li> <li>○ Performance MME: Developing recommendations around well visits. Attribution and feedback for ACC 3.0.</li> </ul>	
Regional Updates	<ul style="list-style-type: none"> <li>• Specification Documents have not been finalized by the state. The Performance Pool specification document has been drafted, but not finalized. Spec documents will be sent to the group once finalized by the state.</li> <li>• The Practice Transformation program was expanded to behavioral health for this fiscal year. Five practices are participating in the pilot.</li> <li>• The PHE has been extended to October 13. August 15 is now the 60-day prior mark. Continuous coverage will continue with the PHE.</li> </ul>	<ul style="list-style-type: none"> <li>• Brian to send specification documents once finalized.</li> </ul>
Regional Performance	<ul style="list-style-type: none"> <li>• John walked through the regional performance showing March results. Results are delayed due to claims lags. Key discussion points include:</li> <li>• Performance measure updates are not final as specification documents are not released. Anticipated updates include: <ul style="list-style-type: none"> <li>○ Risk Adjusted PMPM moving from a Performance Pool measure to a KPI measure.</li> <li>○ Dental Visits are changing to a National Quality Foundation (NQF) measure</li> <li>○ Prenatal Engagement is changing to a National Quality Foundation (NQF) measure</li> </ul> </li> <li>• KPI: <ul style="list-style-type: none"> <li>○ NHP missed the Tier 1 Prenatal Engagement goal by 2 visits for Q3.</li> <li>○ Dental visits has leveled off with less than a half-percent change over months. NHP is piloting a Cavity Free at Three pilot with 5 practices to help boost dental performance.</li> </ul> </li> </ul>	

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	<ul style="list-style-type: none"> <li>○ Well Visits are only updated quarterly, and results currently run through December. Performance Improvement activities are underway with Sunrise,</li> </ul>	
	<p>Salud, and Banner as some well visits are not getting population in the DAP. ○ Member Engagement does automated outreach to help meet well visits and dental visits.</p> <ul style="list-style-type: none"> <li>• Slides are includes in the meeting materials. Committee members can reach out for additional information.</li> </ul>	

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Focus Care Presentation	<ul style="list-style-type: none"> <li>Jenny K. spoke about Focus Care; an organization that provides two Medicaid transition services in Colorado: <ul style="list-style-type: none"> <li>Transition Program provides care to Medicaid members move and transition to lower levels of care including assisted living and independent living. Anyone can make a refer residents. The first step is to make a referral to the local Options Counselor. <ul style="list-style-type: none"> <li>✦ Patient-centered approach in collaboration with skilled nursing and Single Entry Points (SEP)</li> <li>✦ Provide a stipend to help furnish the home.</li> </ul> </li> <li>Life Skills training Program helps build skills to live independently in the community. Transitioning to lower levels of care or life events (such as family death or medical health issues) are qualifiers for the program. <ul style="list-style-type: none"> <li>✦ Options counseling is the first step for receiving referrals. Referrals can be self-referrals, but referrals can also be received from family, friends, or clinicians.</li> <li>✦ The Options Counselor will work with the resident to look at the available options, and the Options Counselor will work with the transitions team.</li> </ul> </li> </ul> </li> </ul>	
HTP Presentation	<ul style="list-style-type: none"> <li>Representatives from Centura Health, UC Health, Banner Health, Lincoln Health, and Kit Carson County Hospital District presented on HTP efforts.</li> </ul>	

	<ul style="list-style-type: none"> <li>• The HTP program is a 5-year quality program focusing on transitioning patients from the hospital to the community with impacts on cost reductions and health improvements.</li> <li>• HTP timeline is entering the baseline year. First reports were due in July and the first quarterly milestone report will be due to the state in January.</li> <li>• HTP has multiple measures across a number of hospitals including hospital utilization reductions, health equity, and increasing behavioral health supports. The number of measures selected was based on the size of the hospitals.</li> <li>• HTP is a group effort requiring successful partnerships including community engagement. Engagements include connections to key stakeholders, public engagement, and state learning collaboratives. These will be ongoing activities over the next 5 years.</li> <li>• Social needs screening is a key topic of discussion and includes housing insecurity, food insecurity, and interpersonal safety. Interpersonal safety will not be shared with the RAE.</li> <li>• HTP looks at a 5% improvement year-over-year. Example includes 80% screening in Year 3, 85% in Year 4, 90% in Year 5.</li> <li>• Open questions: What needs stick out as a community need, how should hospitals address those needs, and what barriers stand out? <ul style="list-style-type: none"> <li>○ Mental health and homelessness seem to be significant issues in the region.</li> <li>○ More communication between care coordination and the provider is a key area for improvement.</li> <li>○ The healthcare system and information provided to members should be simplified.</li> </ul> </li> </ul>	
Open Discussion	<ul style="list-style-type: none"> <li>• A flyer on Integrated Health Centers is included in the meeting materials and a presentation will be provided in October.</li> </ul>	<ul style="list-style-type: none"> <li>• Include as a topic in October.</li> </ul>
Action Items	<ul style="list-style-type: none"> <li>• Integrated Health Centers, Workforce Shortage and Complex Care will be discussion topics in October.</li> <li>• Brian will send Joanna's slides</li> </ul>	



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	<ul style="list-style-type: none"><li>• The HTP program is a 5-year quality program focusing on transitioning patients from the hospital to the community with impacts on cost reductions and health improvements.</li><li>• Brian will update bylaw language for voting member selection.</li></ul>	
	<ul style="list-style-type: none"><li>• Volunteers for co-chair or voting member opportunities can reach out to Brian</li><li>• Brian to reach out to Frontier House to connect with Danny.</li><li>• Joanna and Brian to meet about a regional representative for after Joanna's term expires.</li><li>• Lynne will reach out to MEAC to increase member engagement and capture Member Experience Stories</li></ul>	