Northeast Health Partners'
Performance Improvement Advisory Committee (PIAC)
Wednesday, July 26, 2023 | 10:00-11:30 AM

Joining the Meeting:
Web: https://us02web.zoom.us/j/83043861092?pwd=aFQwRGRiMC9aTmpDR3RIKzI4ZDJWZz09
Password: 027950
By Phone: (669) 900-6833 | Meeting ID: 830 4386 1092 | Call-In Passcode: 027950

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

Voting Participants					
X	**Celeste Ewert/** Envision	X	**Linda Thorpe/** East Morgan County Hospital		**Penny Stumpf/** Healthy Communities
	Danny O'Canas/ Frontier House		**Ginger Williams/** Hillcrest Center & The Towers (Wray)	X	**Sandra Hasch/** Weld LTC Program Supervisor
X	**Erika Greenberg/** CAHEC	X	**Sam Herbert/** The Wray Clinic		

Non-Voting Participants					
X	**Alee LaCalamito/** NHP	X	**Ed Arnold/** Beacon		**Linda Messer/** Lincoln County Hospital
	Alex Barreras/ Banner		**Erin Herman/** HCPF	X	**Lindy Barnhill/** Judicial
	Alison Keesler/ SCL Health	X	**Gay Lynn McKenzie/** Keefe Memorial Hospital	X	**Lynne Fabian/** Carelon
	Andrea Calhoon		**Jasmine Shea/** Keefe Memorial Hospital		**Mary Snyder/** Sterling Living Center
	Ashley Clement / NHP		**Jeffrey Bacon, MD/** Banner Health	X	**Natasha Lawless/** NHP
	Autumn Orser/ Peak Vista		**Jen Hale-Coulson /** NHP		**Melissa Schuchman/** Carelon
	Barb Kleve/ Carelon		**Jenifer Krulewich /** Focus Care		**Megan Philips/** Weld County SEP
	Bev Sandburg/ Yuma District Hospital Clinics	X	**Jessica Jensen /** DentaQuest		**Nicole Seward/** Focus Care
	Brenda Rhea/ Washington County Nursing Home	X	**John Mahalik, PhD/** Carelon	X	**Nina Marinello/** SCL Health
X	**Brian Robertson, PhD/** NHP		**Kari Snelson/** NHP	X	**Pam Boehm/** Carelon
	Chris Ukoha/ HCPF		**Kellee Beckworth/** UC Health	X	**Patsy King/** Yuma District Hospital Clinics
	Cassidy Palermo/ Peak Vista CHC		**Kendra Neuman /** Health Colorado Institute		**Patty Northern /** Peak Vista
	Cathy Harshbarger/ Melissa Memorial Hospital		**Kori Walsh/** CACEH		**Rachel Shuck/** Peak Vista CHC - Limon
X	**Cindy Mulder/** Yuma District Hospital Clinics		**Kristen Dearborn/** NE Colorado Health Department		**Rachel Wisdom /** Weld County DHS
	Crystal Asuncion/ Carelon		**Leah Agee/** Carelon		**Rey Davis/** Banner
	Collette Martin/ Peak Vista CHC		**Lilly Trevino/** Keefe Memorial Hospital	X	**Sarah Chacon**
	Destrie/ Peak Vista		**Linda Medina/** Envision		**Sarony Young/** DentaQuest

	Sara Chacon/ Kit Carson County Hospital District		Summer Tungseth	X	Wayne Watkins/ NHP
	Shanna Wisdom/ NE Colorado Health Department		Suprina Crawford/ DentaQuest		Wilson Araque/ Carelon
	Simone Hall / Planned Parenthood		Tiffany Dilsaver/ Valley Medical Clinic		Max Peck/ Johnstown Heights
	Stella Worley/ Keefe Memorial Hospital	X	Tom Grimmer / NHP	X	Raina Ali/ NHP
	Stephanie Brinks/ Centura		Tony Wells/ Washington County	X	Anna Pittar-Moreno/ Carelon
X	Emily Rollins/ Intermountain Health	X	Jennefer Rolf	X	Kelly Snyder/ Peak Vista
X	Laura Cornell	X	Marissa Martinez	X	Michaela Smyth/ Carelon
X	Paula Stock	X	Kristy Penk/ Peak Vista		

	Agenda Topic	Discussion	Presenter/Follow-Up
1	Digital Roll Call of voting members	• Completed role call with attendance members listed above.	Brian Robertson, PhD

2	Follow-Ups	• October January and April minutes reviewed in July (provided with meeting materials).
		  o Approved collectively by Linda Thorpe and seconded by Samuel Herbert.
		  o Motion passed to approve all minutes.
		• Sam Herbert will be added as a voting member in April.
		  o Samuel Hebert was added as a voting member, first by Linda Thorpe and seconded by Celeste Ewert. Approved by group.
		• Brian will continue to look for alternative ways to connect with Mr. O'Canas.
		• Coding Resources to help our practices to meet KPIs.
		  o Currently creating tip sheets and looking at processes and quick decision trees to see if there are better ways to catch some of the codes to better meet KPIs.
		  o Will be included for feedback/comments.
		  o Well visit tip sheets are being created and other measures are to come.
		• First Fridays-KPI topic
		  o July presentation was on performance measures for this fiscal year.
		• Coding training opportunities are still pending.
		  o Diving into spec documents as these have been updated.
		  o Includes coding specification changes for new measures.
			Brian Robertson, PhD
			• Minutes will be posted to the website.
			• All historical PIAC notes can be located on the NHP PIAC website
			• Follow-up to see if Centennial would like to become a voting member again. Laura will pass on information to them.

		• Visuals for KPI calculations are still pending.
		  o We have added visuals to our balanced scorecard to see historical performance as things move forward.
		• Updated PowerPoint with incentives is still pending.
		  o Need to fold in dollar amounts of what we will be earning. Still working on this component.
		• Sent HTP presentation slides to attendees and attached today's notes along with the performance slides.	

3	State PIAC Updates	No current state updates to add.	Sam Herbert

4	Regional Updates	• Specification Documents included in today's meeting invite.
		  o All three spec measures for performance pool, KPI and BHIP measures.
		  o Also have specification documents for health equity, which is a plan that will be developing in December.
		  o Outreach to look at data and strategies on how we can better shape this with a targeted approach.
		• Care on Location
		  o Telemedicine company contracted with us, came to speak at one of our meetings.
		  o Looking to see how they can support both depression screening and asthma medication management which would impact our performance pool performance.
		  o They are looking for open partnerships. Brian can help make the connection.
		  o Opportunity to see how we can leverage this organization to help improve KPIs.
		• ACC Phase III Map
		  o Proposal will be released in April. A new map has been produced as of June 21st.
		  o The state is gathering feedback on this version of the map and has been listening to feedback on it.
		  o State released new document that has rational with the map/summary of why the state is moving this direction. Will be posted on the website.
		• BHIP Performance-
		  o On the upswing and showing a lot of growth in measures.
		  o Discussion with the state over performance measures and why they are not being met.
			Brian Robertson, PhD
			• Meet with state next week, more conversation over goal structures regarding BHIP.
			• Brian can set up some meeting if additional information is needed on the new specification documents.
			• Connect with Brian for Care on Location Information
			• Will continue to update on ACC Phase III Map as more information becomes available.
			• Lynne Sending membership renewal flyers out to be distributed to group to hand out/be posted wherever available.

- Region 2 has had the highest follow-up rate after a positive depression screen yet did not meet the goal measure and did not receive a payment. - Conversation we continue to have with the state. - Conversation should continue, especially for Phase 3 on how some of these goals can change to lead to better rewarding performance. - The structure for context is based on who the top performer is, the states goal, and the gap closure against who the regional performer is. These can change based on who the top performer is in a region. - Structured different that other performance measures. - BHIP performance overall is doing very well. • Continuous Coverage Updates - The state looked at renewal rates pre pandemic and the number of people returning eligibility packets and the number of people that were re-enrolled based on the return of the renewal packet. - Pre-pandemic 41% of members lost coverage. Post-Pandemic is 42%. The State is concerned with he reasons members lost coverage for procedural renewals i.e., member did not return their packet or did not return verification docs or unknown whereabouts. - Pre-Pandemic 12% of members were not renewed due to procedural reasons, it is now at 26% - The state is asking all RAEs to look at ways to reduce 14% gap. - For NHP, 2000 members lost coverage for being over income or procedural reasons. - For the state as a whole: 36% whereabouts unknown despite ongoing address renewals, 53%mfailure to complete renewal process, may have received updated insurance and just ignored renewal packets. 7% failed to provide verification. 3% voluntary withdrawal. 1% other/procedural. - The state has half page flyers and keep Colorado covered flyers which are great resources to be in communities. • Benefit Updates: - The state has eliminated co-pays for all services for Health First Colorado members. The only co-pay that has not been eliminated is members who use the	- Lynne will send out the Dental benefit expansion sheet to Brian to be forwarded to the group. - Email northeasthealthpartners@carelon.com for invites to any member engagement meetings.

		emergency department, and it is not a true emergency. - Provider offices are very happy about this. It eliminates many barriers for members to get care. • Dental Benefit Expansion: - Dental benefits have been expanded for adults. - Cap used to be $1,500. This has been waived. - NHPs dental benefit sheet is currently being updated. - DentaQuest representative will be presenting at the getting started webinar in September to update families about this expansion. • Language Services: - Tied closely to our health equity plan, ensuring members have access to their language within the state. - Stet wants to know percentage of non-English speakers in your region. 14.6% of RAE2 members are non-English speaking. - Members can ask for language assistance by contacting NHP at the toll-free number. - We are keeping track of all these requests and reporting them to the state. • Member Engagement Activities: - Getting started webinar August 3rd, 11-11:30. - Member Experience Advisory Council on August 16th 11-12:30. - Advance Directives July 27th, 11:30—1:00. - Bi-Annual health equity/cultural competency roundtable, November 6, 11:00-12:00. - Member materials are reviewed with member experience advisory council and will be having a separate advisory council to look at websites, social media, and other materials to help look at what works and what doesn't work.	
5	Spec Documents and Changes	• Specification Changes from 22/23 to 23/23 3 KPI Measure Changes: - Behavioral Health Engagement Measure has been discontinued. - Prenatal Engagement (22/23): looked at members who received a prenatal visit during any part of pregnancy. For 23/24 it will look at members who received a prenatal visit within the first trimester and include postpartum care,	Michaela Smyth • Have had follow up questions from the state, will update as responses on these are received.

| | | which is a postpartum visit within 84 days after delivery. | • Depression screening and follow-up plan is under further review and will provide updates once there is clarification from the state. |

- which is a postpartum visit within 84 days after delivery.
  - Screening for Depression and Follow-Up Plan: new measure. Looks at members 12 and older who were screened for depression, and if positive there was a documented follow-up plan such as a referral to mental health provider or medication prescription.
  - BHIP Measure Changes:
    - Gate measure for Follow-Up after a Positive Depression Screen:
    - 22/23 only included codes G8431 and G8510 in the numerator and excluded members under the age of 11 in the denominator.
    - 23/24 will G8432 and G8511 will also be included in the numerator this year and will be excluded codes G9717 and G8433 from the denominator. This allows exclusions for members who already have a diagnosis of depression and bi-polar or any other medical reasons.
    - BHIP Follow Up After a Positive Depression Screen: previously only included G8431 in the denominator, it now will include both code G8431 and adding G8511 code.
    - Questions have been submitted on these measures. Updates will come as clarification becomes available from the state.
    - BHIP Behavioral Health Screening or Assessment for Children in the Foster Care System: 22/23 excluded aid codes 30 and 70. 23/24 aid code 70 is now included.
  - Comparing overlap between KPI measure: screening for depression and follow-up plan vs. BHIP measure: follow-up after positive depression screen
    - The KPI goal is focusing on primary care, increasing the number of screenings for depression for members 12 and older. Providers are then documenting a follow-up plan if the screening is positive.
    - BHIP is getting behavioral health provider involved to get a follow up encounter. Increasing the rate of follow-up encounters for those 12 and older.
    - Codes G8431 and G8510 meet both KPI and BHIP measure.
  - SUD engagement has changed to Initiation and engagement of SUD treatment 23/24.

- 23/24 measure looks at members 13 years and older, who have a new SUD episode, that start treatment within 14 days of that episode and are engaged with treatment 34 days after initial event.
- Excludes members if they had a previous SUD treatment in the past 194 days or if they are in hospice at any point in the year.
- Members must be enrolled 194 days to the SUD episode date through 47 days after.
    - o Inpatient Mental health follow-up changed to follow-up after hospitalization for mental illness 23/24:
        - Core measure reports two rates: 7 day follow up and 30 day follow up.
        - HCPF will only be incentivizing a 7-day follow-up rate.
        - Members must be enrolled for 30 days from date of discharge to be included.
        - Will be excluded if they are admitted into a nonacute inpatient care setting within the 30-day period.
    - o ED SUD follow-up has changed to follow up after an ED visit for substance use 23/24:
        - Two rates reported, 7-day follow up and 30-day follow up.
        - HCPF will only incentivize 7-day follow up.
        - Only one trigger episode within a 30-day period is eligible.
        - A more comprehensive list of MAT services is now included as a follow-up.
        - Follow-up will count if the diagnosis is different than initial event per current spec document.
- Goals for 23/24
    - o KPI goals are quarterly goals except for ED visits and risk adjust PMPM goals.
        - The baseline used is from year 21/22.
        - Prenatal care measure Q4 goal is 59.82% by end of this year.
        - Postpartum care measure is 45.72%.
    - o BHIP and PPM Goals:
    - o Annual goals need to be met by the end of the year.
        - Depression screening gate goal 45.5%
        - Follow-up encounters after positive depression screening goal 84.83%

		▪ Follow-up after hospitalization for mental illness goal 24.93%	

6	Regional KPI Performance	**Regional KPI Performance**
		• Current performance as the end of March 2023.
		    o Currently meeting 2 BHIPs and 2 KPIs
		    o Prenatal engagement, our performance was 63.9% and our goal was 64.8% for tier 1 and 67.4% for tier 2. The gap is 17 members for tier 1 and 62 for tier 2.
		    o Well child visits for 0-15 months, performance was 57.2% and the goal was 59.3%.
		    o Well child visits for 15-30 months, performance was 56.8% and the goal was 56.2%. We met this goal.
		    o Well child visits for 3-21 years, performance was 35.1% and the goal was 39.3%. gap of 1,781 members.
		    o Depression screen gate, performance was 22.2%, goal was 35.2%.
		    o Depression screen follow-up, perfomance was 84.3%, goal was 88%.
		    o Acute antidepressant performance was 65.6%, goal was 67.1%. gap of only 21 members.
		    o Asthma medication ratio performance was 44.3%, goal was 49%.
		• Reason goals are not being met?
		    o depends on specific measures. Some trends are within coding and applying incorrect codes to claims although work was being done. Access is another barrier, along with member engagement to get members to follow-up appointments.
			Michaela Smyth

7	Member Involvement in PIAC	**Member Involvement in PIAC**
		• Challenges trying to reach members.
		    o Danny who is a voting member had his phone disconnected a year ago. He has a new one now. Brian has reached out to him to get him involved again with PIAC meetings.
		    o How can get members involved again?
		        ▪ Lynne- personal invitation seems to work the best and gives the member perspective. Also offering letters of recommendation, gift cards for participation or any way to get them to want to stay involved.
		        ▪ What avenues can we use outside of the PIAC?
		        ▪ Pam offered to do outreach in her practice meetings.
			Brian Robertson, PhD
			• Brainstorm ways to do member outreach.

8	Open Discussion	• Celeste Ewert- conflict free case management and case management redesign where Envision can no longer provide direct services or case management. • Formal notification was received last week that the area agency through Weld County DHS will be the new case management agency for the four Medicaid waiver programs. • Members will move from Envision to the county November 1st through Mach 1st. • Envision received a community investment grant through NHP, to hire a community navigator to make this process easier.	• Additional information will be available in stakeholder meetings hosted jointly by the County and Envision, both in person and virtually.
9	Follow-up / Action Items	No Follow-up / Action Items. Meeting Adjourned at 11:19 AM.	Brian Robertson, PhD