



HEALTH FIRST COLORADO
 REGION 3 PROGRAM IMPROVEMENT ADVISORY COMMITTEE (PIAC)
 DECEMBER 4, 2018 MEETING MINUTES

PIAC Members		Colorado Access Staff	
X	Bipin Kumar, Himalaya Family Clinic	X	Claudine McDonald, Director of Member Engagement & Inclusion
	Brain Gablehouse, Peak Pediatrics absent	X	Kelly Marshall, Director of Community Engagement
X	Carol Meredith, The Arc Arapahoe & Douglas	X	Marty Janssen, Senior Program Director
X	Carol Tumaylle, Colorado Department of Human Services	X	Molly Markert, Senior Community Engagement Liaison
X	Cindy Meyer, HealthOne Behavioral Health Services	X	Nancy Viera, External Relations Coordinator
X	Dana Held, Health First Colorado	X	Rene Gonzalez, Community Engagement Liaison
X	Daniel Darting, Signal Behavioral Health Network	X	Rob Bremer, Vice President of Integration
X	Denise Denton, Aurora Health Alliance		
X	Ellie Burbee, Kids in Need of Dentistry		
X	Harry Budisiharta, Asian Pacific Development Center	Guests	
X	Isabella Geyer, Liberty Counseling	X	Addison McGill, HealthOne Behavioral Services
X	John Douglas, Tri County Health Department	X	Christine Lanham, HealthOne
	Kirk Manzanares, Health First Colorado	X	Jamie Haney, MCPN
X	Marc Ogonosky, Health First Colorado		
	Patty Ann Maher, Elbert County Collaborative Management Program Absent		
X	Tabatha Hansen, Health First Colorado		
X	Tara Miller, Juvenile Assessment Center		
X	Terri Hurst, Colorado Criminal Justice Reform Coalition		

Welcome to Meeting #2, Introductions, and review today's agenda	Kelly Marshall welcomed everyone to the second meeting of the Region 3 Program Improvement Advisory Committee (PIAC). The group went around the table and introduced themselves. Kelly welcomed and acknowledged new members for whom this is their first meeting, and reviewed the meeting agenda. There were no changes to the agenda as presented.
Digging Deeper on Committee Responsibilities/Tasks (Slides 4-12)	Kelly Marshall and the group reviewed the committee's responsibilities and dug deeper into priority areas for engagement. The purpose of the PIAC is to: Engage stakeholders and provide guidance on how to improve health, access, cost, and

satisfaction of members and providers in the program.

The contractual responsibilities include:

1. Provide representatives for the statewide PIAC, this group would choose representative for this committee. Currently, Shera Matthews is the state representative for this committee, as the state request for representative came before the Region 5 PIAC was formed. Colorado Access staff recommend this topic be discussed in July, aligning with the Regional Accountable Entity Contract year.
2. Review Member materials and provide feedback. The purpose of the Member Advisory Council (MAC) is to ensure members, their family members, and caregivers have a voice in the projects and programs at Colorado Access. These council members represent a variety of communities and provide insightful feedback in to how Colorado Access can improve the way we serve the consumers. As the MAC has been in existence for over a year, staff recommends that the current MAC assume this contractual responsibility for the PIAC, with shared members or designated overlap.
3. Review the Contractor's (Colorado Access) deliverables, including 67 deliverables of varying frequency and magnitude, and 40 notifications. Report templates are still being developed, some are going to have templates, and some are going to constantly be changing. Deliverables are pretty much a baseline and take large amount of staff resources to write. The role of the PIAC will have in prioritizing, reviewing, or contributing to the deliverables is a topic for future conversation

These were added as to how the state aligned them for all regions

4. How to best address and Discuss program policy changes and provide feedback in the future.
5. Review the Contractor's (Colorado Access) Program performance data. Since the program is just launched, it is too soon to have performance data available; the PIAC will determine how it wants to fulfil this obligation at a future meeting.

Q&A Discussion Highlights:

Contract Deliverables:

- Denise is excited to help; these deliverables come with a lot of money. Transportation is the biggest issue, specialty care is a huge issue, and Denise is excited to start helping.
- Terri: To have some transparency, the network adequacy report needs more work to make it useful and timely. Partners need to know how providers are available to our members. Terri is jazzed to be able to collaborate.
- Tabatha: very blessed to get on Medicaid in the window for Kaiser. Some of her friends find the process to find specialist very hard, access to care is a huge issue, and what they see on website is not always the same in reality. She would also like to suggest that there be more fitness and physical activities, as they are very important and can help some of the consumers get off their medications.

Member Engagement:

- Bipin suggests the group work together on educating patients who have never had access to health care before, to teach them how to navigate the care system. The group also suggests a real time Provider Directory and a more condensed member handbook so that both are more useful and functional. .

	<p>Marty expanded on the current State PIAC Sub-committees which include:</p> <ol style="list-style-type: none"> 1. Improving and Bridging Systems 2. Provider and Community Issues 3. Health Impact on Lives: Health Improvement
<p>Discussion regarding Development of a Committee Onboarding/Education Plan</p>	<p>Rene Gonzalez led the group in an activity. Members of the PIAC were asked to complete an interactive educational survey process to support their general knowledge on various health related topics. The feedback from this activity will inform COA on content and delivery methods based on their responses as a support mechanism for their role(s) on the PIAC.</p> <p><i>In no particular order topics to be addressed are:</i></p> <ul style="list-style-type: none"> • Attribution / Provider Assignment • Pay for Performance Measures • Population Health Management • Care Management / Care Coordination • Member Engagement activities • Provider Relations & Engagement activities • Colorado Access, the organization • Colorado Health Care Policy and Financing (HCPF) and the Health First Colorado Program (Medicaid) • State Program Improvement Advisory Committee and subcommittees • Collective Impact – the application of this methodology to our work <p>The group wrote down their proposed ideas, These were captured in several poster boards.</p>
<p>Meeting Structure and Cadence</p>	<p>Notes</p> <p>Colorado Access would like to establish meeting structure and cadence to accommodate the group.</p> <p>Ideas for Feedback:</p> <ol style="list-style-type: none"> 1. Quarterly for two hours, with sub-committee/workgroup options in between meetings 2. Quarterly with a longer meeting time. 3. Bi-monthly 4. Monthly <p>The group agreed to a quarterly meeting with sub-committee/workgroup options in between meetings.</p>
	<p>Action Items/Responsible Party</p>

	<p><u>Next meeting:</u></p> <ul style="list-style-type: none">• Leadership Selection: a process to select Committee co-chairs• Charter development: Recommend the creation of a workgroup to draft a charter for committee adoption. <i>Volunteers?</i>• <u>By end of year 1 (June 30, 2019):</u>• Elect two representatives to sit on the Region 3 Governing Council.• Select State PIAC representative from this Committee.• Create liaison with MAC members
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New Business: SharePoint site will be used to share meeting materials. Paper materials are also available for those who prefer the method.

Next Meeting: March 6, 2018 at Colorado Access, 11100 East Bethany Drive.