## Regional PIAC Meeting Minutes

### MEETING DESCRIPTION

<table>
<thead>
<tr>
<th>Meeting Name:</th>
<th>Regional PIAC Meeting</th>
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<tbody>
<tr>
<td>Date &amp; Time:</td>
<td>Wednesday, February 13, 2019, 10 am - 2 pm</td>
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<tr>
<td>Location:</td>
<td>Rocky Mountain Health Plans (RMHP) Denver office, 6251 Greenwood Plaza Blvd., Suite 300, Greenwood Village, CO 80111</td>
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### AGENDA

<table>
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<tr>
<th>Topic</th>
<th>Description</th>
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<tr>
<td>Introductions/Roll Call</td>
<td>The meeting was called to order at approximately 10 am.</td>
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<tr>
<td>Review / Discussion of Draft Charter</td>
<td>Meg Taylor, RAE Program Officer with RMHP, gave an overview of the draft PIAC charter, which was shared as an attachment for review. Any feedback on the charter can be provided to Nicole Konkoly, RAE Network Relations Manager with RMHP. Meg discussed the nomination process for the formal voting membership as outlined in the charter. Nominations can be sent via email to Nicole Konkoly by March 29, 2019. Self-nominations are permissible.</td>
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<tr>
<td>Prometheus and Avoidable Costs</td>
<td>Patrick Gordon with RMHP explained that Prometheus is a tool used by the Department of Health Care Policy and Financing (Department) and the Regional Accountable Entities (RAEs) to look at how the health plan/RAE is performing at providing necessary services and reducing potentially avoidable costs (PACs). Reducing potentially avoidable costs is a state priority. There is approximately $1.5 billion in avoidable costs in the Medicaid system. Ross Brooks with Mountain Family Health Centers asked how savings can be re-invested into the communities. Patrick Gordon explained that RMHP Prime is a full-risk contract, and we retain a portion of shared savings for community re-investment. KPI incentive payments for the RAE are another avenue for re-investment. UnitedHealth Group (UHG) has invested in supportive housing in the Globeville neighborhood of Denver for people with developmental disabilities.</td>
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Potentially Avoidable Cost (PAC) Plan Discussion

David Mok-Lamme, RAE Health Information and Data Analytics Director with RMHP, explained that the PAC Plan is a deliverable that the RAES submit to the Department.

We are looking at what is in the data and what is missing. Based on the data we’ve received to-date, we’ve set the following priorities / focus areas:

- Anxiety and depression
- Substance Use Disorder (SUD)
- Diabetes

Region 1 is large and geographically diverse. We look at “bite size” data chunks and see very different patterns of care. We take a whole person approach.

Related to the SUD focus area, Chris Montera with the Eagle County Community Paramedic Program shared that they have a 6-week program with detox services through West Slope CASA that has a 6-month sobriety rate of 50%. The program involves connecting people with their Primary Care Provider (PCP) and programs such as Project Angel Heart for meals and Alcoholics Anonymous (AA). The key is to keep people engaged. Chris explained that the program is easily replicable, and there are 4-5 programs getting ready to start in the region.

The group discussed that screening and alerts are helpful – but then what?

Meg shared that RMHP is working with PCPs to increase availability and comfort with Medication Assisted Therapy (MAT) through the hub and spoke model. We are also focusing on provider contracting – specifically with those not previously in network and those located outside of our region.

Carol Plock with the Health District of Northern Larimer County asked what evidence-based programs we are looking at. David shared that PCPs are not always well trained on MAT and SBIRT so that is a focus area. There is an opportunity for stigma reduction at the PCP office. RMHP is developing a provider toolkit, and people interested in reviewing it can contact him. It was also pointed out that most mental health providers are not trained in SUD.

A question was asked of how PAC fits into RMHP’s tiering model for
Primary Care Medical Providers (PCMPs). Patrick explained that Tier 1 and 2 (the highest tiers) practices account for approximately 40% of practices, and serve approximately 60% of the RAE population (based on attribution). We need to look at / compare higher and lower tier practices. Lower tier practices are less engaged, so that is a tougher nut to crack. We need to examine where the affected patients are being served.

Strategy:

1) Leverage top tier practices
2) Look for gaps in lower tiers
3) Re-double efforts to grow attribution in the auto-assigned population (the harder to find population)

David explained that the depression and anxiety PAC data uses the “6 visit” codes (short-term behavioral health services in the primary care setting that are reimbursed fee-for-service) but is not limited to the primary care setting.

The group discussed that engaging members in therapy is an important intervention.

**Voice of the Consumer: Latino Initiatives**

Julissa Soto and Shawn Davis gave a presentation on the Familias Unidas curriculum. Familias Unidas is an evidence-based preventive intervention for Hispanic youth and their families. The goal is to implement this curriculum throughout the region. A number of people expressed an interest in exploring the use of the curriculum in their community, and Julissa and Shawn will follow up with them.

**Region 1 Oversight Structure**

Patrick Gordon explained how the RAE Region 1 oversight / governance structure is organized and how we are held accountable. Reunion Health is a partnership of the Community Mental Health Centers (CMHCs) and Federally Qualified Health Centers (FQHCs) operating in Region 1 that provides strategic oversight.

Oversight structures include:

- Regional PIAC
- An executive channel made up of RMHP staff and CEO-level leaders of CMHCs and FQHCs
- Executive Partner Board that meets at least quarterly to tackle fundamental issues such as suicide prevention, access to care, and whether the program is meeting the needs of the community. There are 6 seats, which are currently filled by Jeff Kuhr, Chris Lindley, Matt Dodson, Sarah Vaine and Jessie Neitzer. The Board sets self-directed agendas, via a transparent process that is solutions-focused. Meeting minutes will be shared with the PIAC. The two major issues the Board is currently tackling are access to care and mental health financing.
### HCPF PIAC Priorities

Ben Harris, Team Lead, Accountable Care Collaborative Program Management Section with the Department of Health Care Policy and Financing, shared that the State Performance Improvement Advisory Committee (PIAC) is currently in onboarding mode. There are 19 voting members. Half of the members are from the Accountable Care Collaborative (ACC) Phase 1 and half are new. For Phase II, the PIAC is focusing on more connection between the regional and state levels. There are liaisons from each region who serve on both the State and Regional PIACs. For Region 1, that person is Ian Engle.

Subcommittees are a great opportunity for stakeholders to get involved and tackle operational issues. Current subcommittees are:

- Provider and Community Issues
- Health Impact on Lives
- Improving and Bridging Systems

State PIAC meetings are open to the public. Meetings are typically held on the third Wednesday of the month from 9:30 a.m. - 12:15 p.m. The January and February meetings were strategic planning retreats for PIAC voting members only.

### Regional PIAC Priorities

Meg Taylor shared that we will be diving deeper into our regional PIAC priorities at the next meeting. The key areas the Regional PIAC is focusing on are:

- *Provider experience*: what do they need in order to be successful? An independent behavioral health council in Larimer County is currently meeting and there are plans to expand to the West Slope.
- *Child welfare*: children in foster care needing behavioral health access; working with parents and guardians.
- *Access to care*: addressing barriers to care including transportation, workforce and provider contracting.

### Parking Lot Items

None

### Action Items

Submit nominations for voting membership on the Regional PIAC to Nicole Konkoly by March 29, 2019.

### Upcoming Meeting Reminder

TBD – May 2019