



PIAC Members		Colorado Access Staff	
	Andy Wallick, Durable Medical Equipment	x	Eileen Forlenza
x	Bipin Kumar, Himalaya Family Clinic	x	George Roupas
x	Bob Conkey, Health First Colorado	x	Jo Glaviano
	Carol Meredith, The Arc Arapahoe & Douglas	x	Julia Mecklenburg
	Carol Tumaylle, Office of Refugee Resettlement, Refugee Health Division	x	Kellen Roth
	Courtney Phillips, HCPF	x	Marty Janssen
x	Daniel Darting, Signal Behavioral Health Network	x	Molly Markert
x	Erin Metz, Kids in Need of Dentistry	x	Nancy Viera
	Genevieve Fraser, HealthOne	x	Nicki Howey
	Gina Brackett, Parent to Parent		
	Harry Budisidharta, Asian Pacific Development Center		
x	Ingrid Kolstoe, Parent, Health First Colorado		
	John Douglas, Tri County Health Department		
	Joseph Prezioso, Health First Colorado		
x	Juan Marcano, Aurora City Councilmember		
x	Marc Ogonosky, Health First Colorado		
x	Maria Zubia, Adelante Community		
	Matthew Pfeifer, HCPF		
x	Natalie Archuletta, DentaQuest		<b>Guests</b>
	Patty Ann Maher, Elbert Cnty Collaborative Mgmt Program	x	Anna Rasmussen, Health One
	Ruby Arias, Aurora Public Schools	x	Cathi Redmond, Sky Ridge Medical Center
	Tara Miller, Juvenile Assessment Center	x	Jessica Jensen, DentaQuest
x	Wendy Nading, Tri County Health Department	x	Leah May, Rose Medical Center
x	Whitney Gustin Connor, Kids First Health Care	x	Maureen McDonald, Health One
		x	Sara Schmitt, Colorado Health Institute

Agenda Items	
<b>Welcome, Introductions &amp; Committee Business (Slide 4)</b>	<p><i>Approval of September Minutes:</i> The September meeting Minutes were presented for approval. The September meeting Minutes are approved unanimously.</p> <p>Member Advisory Committee (MAC) Update            Marc Ogonosky</p> <ul style="list-style-type: none"> <li>- MAC welcomed 4 new members this quarter: 3 for Region 5, 1 for Region 3</li> <li>- Departments, Materials reviewed: Quality Department (Provider Network Adequacy, Member Satisfaction Survey), Marketing (Regions Newsletter, Health in holiday mailer).</li> <li>- Always looking for new MAC members</li> <li>- Colorado Access Caring Heart Award: Created to honor past MAC members and thank COA members for their work in the community               <ul style="list-style-type: none"> <li>o Award recognizes a Health First Colorado member who embodies dedication to their community, and advocates for the health care system, Health First Colorado members at large, and their communities</li> <li>o Choosing 3 recipients this year, can be self-nominated</li> <li>o Nomination forms due January 6, 2023</li> </ul> </li> </ul> <p>Q: Will there be a recognition event?</p>

	<p>A: That is the plan, depends on the comfort of being in person, but would love to have a volunteer recognition event too</p> <p>Q: Maybe that person could attend a PIAC event?</p> <p>A: Good idea, we can ask the recipients</p>
<p><b>Telehealth</b></p>	<p>George Roupas</p> <ul style="list-style-type: none"> <li>• Telehealth is legislated and defined differently in each state</li> <li>• Telehealth: Using technology to improve health outcomes</li> <li>• Four modalities of telehealth: <ul style="list-style-type: none"> <li>○ Live video, store &amp; forward, remote patient monitoring, mobile health</li> </ul> </li> <li>• State licensure: Licensed where patient is located, where services rendered to patient</li> <li>• Ryan Haight Act: Pre-COVID, in-person exam required before prescribing controlled substances, during COVID, in-person exam requirement waived</li> <li>• Prior to PHE, many limitations on billing for telehealth, all discontinued through PHE; once PHE ends, reversion to reimbursement prior to PHE</li> <li>• More lenient with HIPPA during PHE, but will change once PHE ends</li> <li>• CMS will extend coverage of temporary telehealth codes 151 days after PHE ends</li> <li>• AccessCare Services is a subsidiary of Colorado Access, the largest nonprofit health plan in the state of Colorado</li> <li>• Virtual Care Collaboration &amp; Integration Program (VCCI): A virtual, integrated, team-based care model designed to support PCMPs with addressing and managing behavioral health in the medical home; offers rapid response to virtual psychiatrists and licensed mental health counselors; emphasis on collaborative and team-based care, available to all Primary Care Medical Providers in Regions 3 and 5.</li> <li>• In response to the COVID-19 pandemic, COA and AccessCare Services created the VCCI DC Program that enables COA Care Managers to refer members in need of behavioral health or psychiatric services to be seen over telehealth by VCCI providers.</li> </ul> <p><b>Questions &amp; Discussion</b></p> <p>Q: If person must be licensed in state where services rendered, what if someone gets injured on vacation in another state, but want own doctor in home state to telehealth with vacation doctor, how does that work? Who's providing care in that scenario?</p> <p>A: Depends on what that vacation state's laws are, also consider liability, look at licensure laws.</p> <p>Q: Is reimbursement only for rural and federal qualified clinics? What about private practices?</p> <p>A: Those are already covered for telehealth; this act specifically includes physical, speech, occupational therapies.</p> <p>Q: In our clinic, we have many that use telehealth; about 90% can use video call, but 10% only use telephone, is that considered telehealth too?</p> <p>A: During PHE, audio only or using the phone can still be billed during the PHE, it is unclear if that will still be reimbursed after PHE ends</p> <p>There is room for improvement, it was not what I expected; depends on who you are talking to and can vary on how much time is spent with the patient, what questions are asked, doesn't seem like there's a set protocol; varies between physical and mental health; the lack of providers, especially with specialty care, affects telehealth too; still lacking culturally relevant providers; sometimes it feels like it's more of a convenience for the provider than for the patient</p>

	<p>Yes, can depend on the practice and the doctors; important to emphasize the psychological safety of the patient, for example, offering a young patient a telehealth appointment at school if home is not a safe place to talk about health concerns</p> <p>Important to remember cultural relevancy</p>
<p><b>Accountable Care Collaborative (ACC) Phase III</b></p>	<p>Sara Schmitt, Colorado Health Institute</p> <ul style="list-style-type: none"> <li>• ACC: Delivers cost-effective, quality health care services to Colorado Medicaid members to improve the health of Coloradans; Coordinates regional physical and behavioral health care services to ensure member access to appropriate care</li> <li>• Creating ACC Phase III: Build on strengths from Phase II; align with advances made by other agencies, incorporate input received over past years, identify opportunities for improvement with focus on priority initiatives</li> <li>• ACC Phase III Goals: <ul style="list-style-type: none"> <li>○ Improve quality care for members</li> <li>○ Close health disparities and promote health equity</li> <li>○ Improve care access</li> <li>○ Improve member and provider service experience</li> <li>○ Manage costs to protect member coverage, benefits, provider reimbursements</li> </ul> </li> <li>• Priority Initiatives: Member Communication &amp; Support, Accountability for Equity &amp; Quality, Improving Referrals to Community Partners, Alternative Payment Methodologies, Care Coordination, Children &amp; Youth, Behavioral Health Transformation, Technology &amp; Data</li> <li>• <a href="#">ACC III Priorities Link</a></li> <li>• Upcoming Stakeholder Activities: December 20, January 10</li> </ul> <p><b>Questions &amp; Discussion</b></p> <p>Q: When the time is right tonight, can we hear how ACC 3.0 and APM intersect?</p> <p>A: I can share a little through the priorities, but we'll get into a more detailed discussion with facilitated activities next time we meet</p> <p>When ACC 2.0 request for info came out years ago, Tri-County Health Department gathered a group together to review documents to submit feedback, it was a valuable use of time because we saw those recommendations show up in the ACC contract; it is an opportunity to influence the design of the ACC and encourage folks to attend a session</p>
<p><b>2023 Topic Survey Results</b></p>	<p>Jo Glaviano</p> <ul style="list-style-type: none"> <li>• 23 Respondents</li> <li>• Top 2: COA SDOH Member Data and Beh Health Workforce Development Progress</li> <li>• Next top ranked: Care Mgmt re: Chronic and Specialty Care, SDOH, Co-Occurring Disabilities, Black Birthing Health</li> </ul>
<p><b>Additional Discussion, Public Comment</b></p>	<p>No comments.</p>
	<p>Meeting adjourned at 5:37 pm.</p>