

Region 3		Region 5	
x	Alisia Moreno, International Rescue Committee		Ana Vizoso, Servicios de La Raza
	Angela Wilson, Adams County Government	x	Anthony Moreno, Health First Colorado
	Antonia Casler, Creative Treatment Options		<i>Ashleigh Phillips, CommonSpirit Health</i>
x	Ashleigh Phillips, CommonSpirit (v)		Candy Wolfe, Creative Treatment Options
	Ashley Scollard, Douglas County Health Department		Carolyn Hall, RM Crisis Centers, CHARG Drop-In Center
	Bipin Kumar, Himalaya Family Clinic		Damian Rosenberg, Personal Assistance Serv of Colorado
x	Bob Conkey, Health First Colorado	x	Heather Schenkel, DentaQuest (v)
	Carol Tumaylle, Refugee Health Advocate	x	Helen Pattou, International Rescue Committee
	Christina Redwine-Stimson, Aurora Interfaith	x	Jacquie Stanton, State of Colorado Dept of Local Affairs
	Daniel Darting, Signal Behavioral Health Network		Jeremy Sax, Denver Health
x	Elizabeth Snow, Health First Colorado	x	Jim Garcia, Tepeyac Community Health Center (v)
x	Emilie Van Haecke, City of Englewood Police Dept (v)	x	Judy Shlay, Public Health Institute at Denver Health
x	Jamie Rodriguez, Adams County Health Department		Kraig Burleson, Inner City Health Center
x	Jessica Courtney, Mile High Behavioral Healthcare (v)		Matthew Pfeifer, HCPF
	Jessica Prosser, City of Aurora, Housing & Comm Services	x	Nina Marinello, Intermountain Healthcare (v)
	Kadi Kouyate, Migrant Response		Pamela Bynog, Health First Colorado-ON LEAVE
x	Laura Ciancone, Douglas County Public Health	x	Paula Gallegos, Health First Colorado (v)
x	Laura Larson, Douglas County Public Health Dpt (v)	x	Rachelle Bachran, Caregiver (v)
x	Marc Ogonosky, Health First Colorado		Ty Smith, Consumer, Health First Colorado
	Matthew Pfeifer, HCPF		
x	Meredith Velasquez, Juvenile Assessment Center (v)		
	Mike Marsico, Behavioral Health Provider		
	Nancy Greene, DentaQuest		
	Patty Ann Fontenot, Elbert Cnty Collaborative Mgmt Prgm		
	Princess Mack, Health First Colorado		
x	Wendy Nading, Arapahoe County Public Health Dpt		
x	Whitney Gustin Connor, Kids First Health Care		
			<b>Guests</b>
	<b>COA Staff</b>		Antjuan Bouldin, MAC Member
	Becky Selig		Emily Parkey, The Civic Canopy (v)
	Casey Thomas		
	Eileen Forlenza		
	Janine Durant		
	Jo Glaviano		
	Joy Twesigye		
	Julia Mecklenburg		
	Kelly Shanahan		
	Leah Pryor-Lease		
	Luci Hunter		
	Stephanie Glover		
	Theresa Dinh		
	Wivine Ngongo		
			(v) – Virtual attendee

Agenda Items	
<b>Welcome, Intros</b>	
<b>State PIAC Update</b>	<p>Wendy Nading, Arapahoe County Public Health, PIAC Region 3 Co-Chair</p> <ul style="list-style-type: none"> <li>• November: In person retreat</li> <li>• December <ul style="list-style-type: none"> <li>○ PIAC Subcommittees Updates</li> <li>○ Debrief of November PIAC Strategy Retreat</li> <li>○ <a href="#">ACC III Payment Structures</a></li> </ul> </li> <li>• January <ul style="list-style-type: none"> <li>○ <a href="#">Cover All Coloradans Implementation</a> and ACC III Updates</li> <li>○ Discuss <a href="#">network adequacy</a> and how it is monitored</li> <li>○ Continued discussion of payment structure for primary care medical providers (PCMP) in ACC III</li> </ul> </li> <li>• State PIAC Website: <a href="https://hcpf.colorado.gov/accountable-care-collaborative-program-improvement-advisory-committee">https://hcpf.colorado.gov/accountable-care-collaborative-program-improvement-advisory-committee</a></li> </ul> <p><b>Questions &amp; Discussion</b></p> <p>Q: Regarding the robust conversation about PCMP payment, can you provide an example of a reemergent issue?</p> <p>A: It was very complex, high-level information around provider reimbursement.</p> <p>Q: When does HCPF expect to tell providers and community what the network looks like?</p> <p>A: The information in the slides and the presenter of the information is a good place to find those answers, however we can certainly raise that question at a future meeting; they have a dashboard, but it is vague in terms of timeline and specifics right now.</p>
<b>Government Relations Updates</b>	<p>Stephanie Glover, Manager of Health Policy, Colorado Access</p> <ul style="list-style-type: none"> <li>• COA's Legislative Policy Priorities <ul style="list-style-type: none"> <li>○ Promote policies to make Medicaid equitable, accessible, &amp; inclusive for members</li> <li>○ Advance policies that promote health equity</li> <li>○ Improve outcomes by supporting policies that approach whole-person health</li> </ul> </li> <li>• Review of Federal Landscape and Latest Federal News</li> <li>• <a href="#">HCPF factsheet with district level data</a></li> <li>• COA Statement on <a href="#">Medicaid Cuts &amp; Caps</a></li> <li>• Contact Stephanie: <a href="mailto:Stephanie.Glover@coaccess.com">Stephanie.Glover@coaccess.com</a></li> </ul> <p><b>Questions &amp; Discussion</b></p> <p>Q: Who are the legislators in COA areas? We need to ensure they know the importance of Medicaid in rural and frontier areas and how cutting Medicaid will affect those members</p> <p>A: Our area includes Gabe Evans, but we also have yearly statewide coverage for the CHP plan, which includes many other representatives; we are advocating for Medicaid and CHP in all areas</p> <p>Q: Concerned about the vulnerability of COA and HCPF to federal changes beyond just Medicaid. Does COA receive federal dollars directly?</p> <p>A: No, we do not.</p> <p>Q: Are there other vulnerabilities for HCPF with cuts outside of Medicaid? What are other ways that the feds can impact us in the administration of Medicaid?</p> <p>A: HCPF also administers the Children's Health Insurance Plan (CHP+); we're hearing less about cuts to CHP, though still a possibility.</p> <p>Q: Were you able to meet with Representative Boebert from district 4?</p> <p>A: No, we were not able to meet with her when our leadership was in D.C.</p>

	<p>Q: Do you have any stats around job loss, etc.; there are fact sheets on the HCPF website that shows the numbers of Medicaid members in different counties, but would be helpful to have additional information when I meet with the individual from Rep Boebert's office.</p> <p>A: HCPF has a fact sheet with aggregated data from the congressional districts, linked above.</p> <p>Q: I was in D.C. with National Association of Community Health Centers and had a chance to meet with Representative Evans and staff, provided a tour of Tepeyac and talked extensively about the effect that Medicaid cuts would have on community health centers; he seemed well informed about the issue</p> <p>We're hosting a roundtable discussion with Representative DeGette's office in March to discuss the impact of cuts to Medicaid.</p> <p>Q: Would like to know where to find information about when and where to show up to advocate?</p> <p>A: One place to look is <a href="#">Protect our Care</a>, but I can see if there are other places to find the best information and get back to you.</p> <p>Q: Considering strategic advocacy, how do I advocate without creating a vulnerability to my organization or the people we serve?</p> <p>A: It's tricky and how you evaluate organizational risk is based on your own calculations and comforts; we've debated sending Rep. Evans' staff a factual email about Cover All Coloradans because there was inaccurate information put out about Medicaid coverage of individuals without documentation, we're looking for the best way to inform without creating more issues; they are eager to hear from their constituents and employers in their district; the voices of those impacted are the most powerful way to reach Congress members.</p> <p>It was a calculated risk that we took to invite Rep Evans to our organization, but ultimately decided it was important to have a direct line of communication to our representative, but something that we're mindful of and the people we serve.</p> <p>Senator Hickenlooper is hosting a virtual town hall on Wednesday, March 12<sup>th</sup> at 5:00pm.</p>
<b>Advisory Committees Overview</b>	<p>Becky Selig, Senior Community Engagement Liaison, Colorado Access  Eileen Forlenza, Director of DEI Program Integration, Colorado Access  Kelly Shanahan, Director of Member Experience, Colorado Access  Luci Hunter, Manager of Practice Supports, Colorado Access</p> <ul style="list-style-type: none"> <li>• Overview of COA Advisory Groups for ACC III <ul style="list-style-type: none"> <li>○ PIAC Children/Youth; PIAC Adults</li> <li>○ MAC Children/Youth; MAC Adults</li> <li>○ Regional Health Equity Committee (RHEC): COA has internal health equity task force, plan, strategy, data</li> <li>○ Integrated Network Provider Advisory Council (INPAC): 17 organizations representing physical and behavioral health</li> </ul> </li> <li>• First time RAE contract includes specific deliverables for children and youth</li> <li>• Review of Community Feedback Loop</li> </ul> <p><b>Questions &amp; Discussion</b></p> <p>Q: How many departments are included in Cross Department Collective Impact Team?</p> <p>A: Not sure exactly, but we will be as inclusive as we can and will ensure centralized group; know that it will include Population Health, Quality Improvement, Community Engagement, Member Experience, Provider Resources, DEI, etc.</p> <p>Q: Is there an effort to include accessibility with regard to the disability community?</p> <p>A: Our Population Health team is working with the Quality Improvement team and others to better understand our membership and populations through data, including a huge overall around data processes, tools, resources, risk scores; part of that is actively seeking to improve and grow data of members with disabilities; once we have more comprehensive data on the regional level around disability, it will be a meaningful step forward.</p> <p>Contract language specifically includes members with disabilities and accessibility.</p>

	<p>Q: Where is it in the plan to include organizations like Rocky Mountain Human Services, Development Pathways, and other related organizations?</p> <p>A: COA recently met together with Developmental Pathways and Signal to discuss strategy around how we can better work together, including data exchange and how we can work together to be better service providers for our shared members.</p> <p>Q: Regarding language access, how will this affect funding for interpreters, translation, etc.?</p> <p>A: COA provides language services to any provider who does not have it in their practice; I have not heard that any providers are planning to discontinue this service.</p> <p>A: We're adding a lot of language options to our digital programming to increase accessibility.</p> <p>A: Joint Commission also requires that people have access to the language they need.</p>
<b>Future of PIAC and MAC</b>	<p>Kelly Shanahan, Director of Member Experience, Colorado Access</p> <p>Becky Selig, Senior Community Engagement Liaison, Colorado Access</p> <ul style="list-style-type: none"> <li>• Who is the PIAC and MAC advising in COA, and on what</li> <li>• COA currently holding initial conversations about PIAC and MAC</li> <li>• Review of Proposed Areas of Focus</li> <li>• Review of draft annual plan and shared structural proposal ideas</li> <li>• Review of Health Strategy Plan</li> </ul> <p><b>Questions &amp; Discussion</b></p> <p>Q: So the PIACs and MACs would meet in parallel? Would they ever meet together?</p> <p>A: We are still in conversation about what the meetings would look like, perhaps an annual meeting with all the committees, as well as other opportunities to share.</p> <p>Combining meetings regularly would be helpful.</p> <p>Consider pregnant women, WIC program, and other areas where there is cross over that includes both youth and adults.</p> <p>Medicaid Systems of Care information: <a href="https://speakourminds.org/colorado-settles-lawsuit/">https://speakourminds.org/colorado-settles-lawsuit/</a></p> <p><b><i>I like, I wish, I wonder Activity</i></b></p> <p>I love how collaborative and open to suggestions the group is; love hearing different perspectives. Consider complex care patient different to include SDOH, not separately from each other.</p> <p>I wonder if COA is looking at involving community groups, Food Bank of the Rockies, those that can address the SDOH given that RAEs need to focus on that; where would someone like that fit it – would it be the PIAC, MAC...?</p> <p>That is what we're building out with our Community Based Organization (CBO) Network – what do partnerships look like, how can we put structures and processes in place to make partnerships more beneficial.</p> <p>Can COA pressure providers who are restrictive about Medicaid coverage to be more inclusive of the Medicaid population?</p> <p>The lack of Medicaid providers is part of network adequacy. For example, there are no endodontists in the area who accept Medicaid, so I had to get other dental insurance in order to get dental care; how can we incorporate that into increasing access.</p> <p>There are many small practices that cannot afford to take on more Medicaid patients, so they are limited financially; there's no incentive for these providers to take more Medicaid patients or to start taking Medicaid.</p> <p>Need a united front to build a better infrastructure before setting all of the policies.</p> <p>Tools are unreliable, wish the Medicaid website was more accurate of available providers.</p>
<b>ACC III Update</b>	<p>Liz Owens, Senior Director of Government Relations, Colorado Access</p> <ul style="list-style-type: none"> <li>• Annie will sign the contract on March 11<sup>th</sup></li> <li>• Key Contract Changes:</li> </ul>

	<ul style="list-style-type: none"> <li>○ Member Attribution</li> <li>○ Medicaid Systems of Care for Children &amp; Youth</li> <li>○ Outcomes, Quality Assessment, &amp; Performance Improvement Program</li> <li>○ Health Neighborhood</li> <li>○ Care Coordination</li> </ul>
<b>Additional Comments, Survey</b>	<ul style="list-style-type: none"> <li>● <a href="#">Medical Services Board</a> is reviewing a proposal to change the grievance timeline from 15 days to 90 days; please review the information and help advocate.</li> <li>● Regarding outdated resources pages, and as COA is revamping our data systems and networks, we're participating in a vendor conference that includes technology and tools catering to organizations and Medicaid systems as a way to look at improvements to the resources that are used.</li> <li>● CommonSpirit Health is hosting annual <a href="#">Community Benefit and HTP Forums</a> - April 7th to May 7th. You can go to this link to register to attend any or all of them!</li> <li>● Statewide level health equity task force, discussed different challenges, like reimbursement, policy, improving member materials, these challenges have been brought to HCPF leadership, they are aware; your issues are shared.</li> </ul>
<b>Next Meeting</b>	Monday, June 9, 2025