State Agency Collaboration to Improve Access to Care

CASCHEW Conference

2024
Conflict of Interest

I have no relevant financial relationships with any commercial interests.
Learning Objectives

• Describe how partnerships with state agencies can improve health equity
• Summarize examples of successful state agency partnerships
• Identify ways to connect organizational partnerships post-conference
Presenters

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*Colorado Department of Public Health and the Environment*

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*Peer Mentored Care Collaborative/ECHO Colorado*

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*Colorado Department of Health Care Policy and Financing*
ECHO

- ECHO (Extension for Community Health Outcomes)
- Originally developed in 2003 in New Mexico to improve primary care provider’s treatment of Hepatitis C, ECHO has evolved to an international model used to transform healthcare by enhancing patients’ access to high-quality care that is tailored to their unique needs and provided in their local community.
- The ECHO model is a healthcare delivery and knowledge-sharing program designed to democratize knowledge and improve healthcare access, especially in under resourced or remote areas.
ECHO Colorado’s mission is to leverage the knowledge and experience of geographically-diverse communities for workforce development and improved health for all.

Using the zoom platform, ECHO create an “all teach, all learn” collaborative where specialists and frontline clinicians focus on a particular clinical or public health-related topic.
**2023 STATISTICS**

- **SERIES**: 39
- **SESSIONS**: 282
- **PARTICIPANTS**: 2,953
- **AVG PARTICIPANTS/SESSION**: ~29.5
- **SESSIONS ATTENDED**: 8,308

**POPULATIONS SERVED**

% of participants who worked in underserved and rural communities

<table>
<thead>
<tr>
<th></th>
<th>2022</th>
<th>2023</th>
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<tbody>
<tr>
<td>Medically underserved</td>
<td>37%</td>
<td>54%</td>
</tr>
<tr>
<td>Rural or frontier communities</td>
<td>18%</td>
<td>20%</td>
</tr>
<tr>
<td>Medicaid population</td>
<td>57%</td>
<td>61%</td>
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</tbody>
</table>

*Data not captured for all series*

**A SAMPLE OF FY 2023 ECHO SERIES**

- Transgender Health: Comprehensive Approaches in Primary Care
- Autism: Core Concepts for Primary Care
- Pediatric Psychiatry in Primary Care
- Pediatric Suicide Prevention: A Practical Care Pathway for Primary Care
- Perinatal Mental Health: An Interdisciplinary Approach
- Past the Pandemic: Individual Wellbeing, Connection and Support
- Long COVID and Fatiguing Illness Recovery Program
- Monkey Pox Boot Camp
- Rheumatology in Primary Care
- Adult Urology in Primary Care
- Improving Equity in Menopause Care
- Addressing Health Literacy in Diabetes Care and Prevention
- Innovative Practices for Management of Cardiovascular Disease
- Identifying and Treating Tremor Parkinson's and Chorea
FY 2023 REACH

2,223 participants came from 59 of Colorado’s 64 counties

Colorado participation was up 56% over 2022
COVID-19 Just-in-Time ECHO for Primary Care is a statewide partnership bringing up-to-the-minute information and answering questions about COVID-19 for PCPs in Colorado.

**Format**
- One-hour long, high value sessions
- Regular epidemiologic, pharmacy updates, and unique focus topics
- Active engagement of the audience to represent the “community voice”
- A robust Q&A with a commitment to answer all questions
- Regular targeted polling of participating PCPs regarding needs and experiences within their practice settings
- A living Resource Website that concisely summarized session materials

**Statistics**
- 105 unique one-hour ECHO sessions since 3/28/20 through 3/29/21
- 3x per week until June 2020, then 2x per week and then 1x/week
- ~700 total registered PCPs, staff, and Primary Care leaders
- Majority of participants were physicians (31%) or APPs (32%)
- Averaged 134 participants per session (ranging from 100-300)
- Participants in 42 out of 62 counties in Colorado
Public Health Partnered Topics Covered in 2020 through Now

COVID-focused Programming
- COVID Just-in-Time ECHO for Primary Care
- COVID Just-in-Time ECHO for Schools
- COVID Care in the Ambulatory Setting
- AHRQ National Nursing Home COVID Action Network (CAN)
- COVID Therapeutics in the Ambulatory Setting
- COVID Monoclonal Antibodies

Non-COVID Programming
- Per- and polyfluoroalkyl substances (PFAS) Webinars
- Mpox Webinar
- Mpox for Primary Care Series
- Respiratory Season Vaccine Updates
- Colorado Updates in Public Health (CUPH): COVID & Beyond
- Cancer Survivorship
- Breastfeeding Provider Training
- Lead Screening in children*
- Syphilis*
- Peer Education Program (PEP)*

*In development
CUPH 2022 in review

• January – COVID Therapeutics
• February – Bebtelovimab & Distribution
• March – Long COVID
• April – MIS-C
• May - Hantavirus & Mpox
• June – Mpox & Tickborne Illnesses
• July – Foodborne Investigations
• August - AFM
• September - Syphilis & STIs
• October – Flu & Respiratory Season
• November – COVID Therapeutics
• December - PFAS
CUPH 2023 in review

- January – Public Health Authority
- February – Avian Influenza, Viral Resp.
- March – Long COVID
- April – Candida auris
- May – Mpox & GAS
- June – Tuberculosis
- July – Hantavirus
- August – Legionella & West Nile Virus
- October – Fall Vaccine Update
- November – Drug Resistant Gonorrhea
- December – Xylazine
### Overall Participation

<table>
<thead>
<tr>
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<th>ALL SESSIONS</th>
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<tbody>
<tr>
<td>Approved Registrants</td>
<td>1,254</td>
</tr>
<tr>
<td>Participants</td>
<td>867</td>
</tr>
<tr>
<td>Direct Provider Participants</td>
<td>671</td>
</tr>
<tr>
<td>Average attendance per session</td>
<td>172</td>
</tr>
</tbody>
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**PARTICIPATION (n=867)**

![Graph showing participation trends from January 2022 to December 2022](image)
Attendance Across All Sessions

Registered Participants

Jan 22  233
Feb 22  253
Mar 22  220
Apr 22  224
May 22  212
June 22  217
July 22  180
Aug 22  188
Sept 22  223
Oct 22  224
Nov 22  211
Dec 23  214
Jan 23  184
Feb 23  195
Mar 23  162
Apr 23  147
May 23  161
June 23  183
July 23  160
Aug 23  158
Oct 23  135
What was most valuable about this series?

“Providing real time, reliable data that allows me to advise my patients more accurately and plan for the next few months with respect to my practice and personal choices.”

“I have a better idea what to watch for in kids presenting with possible MIS-C. That was VERY helpful! Also I’ll be pushing adults to boost their Pertussis vaccination. Good to be aware. And watching labs on what might have seemed like a simple viral GI that drags out with hepatitis like symptoms. This whole presentation was super helpful! Thanks!”
### Participation by Colorado-Based County Designation: All Sessions

<table>
<thead>
<tr>
<th>County Designation</th>
<th>Unique Total Participation</th>
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<tbody>
<tr>
<td>Urban Practices</td>
<td>544</td>
</tr>
<tr>
<td>Rural Practices</td>
<td>105</td>
</tr>
<tr>
<td>Frontier Practices</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>733 Colorado Direct Provider Participants</strong></td>
</tr>
</tbody>
</table>

### Number of Colorado Counties Reached: All Sessions

<table>
<thead>
<tr>
<th>County Designation</th>
<th>Reached: All Sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban Colorado Counties</td>
<td>17 of 17</td>
</tr>
<tr>
<td>Rural Colorado Counties</td>
<td>23 of 24</td>
</tr>
<tr>
<td>Frontier Colorado Counties</td>
<td>15 of 23</td>
</tr>
<tr>
<td>Colorado Counties</td>
<td>55 of 64</td>
</tr>
</tbody>
</table>

Note: Unit of measurement is **Colorado county or counties of practice** (n=618) of direct provider participants (n=733) in Colorado. Participants who’s practice location was undeterminable (n=115) were not included. The number of counties does not add up to the number of direct care participants because participants were allowed to provide none, one, or multiple counties of practice. Non-Colorado participants (n=63) and Non-direct care provider participants were excluded from the data presented on this slide.
Unique Participation by County Designation: All Sessions (n=817)

Note: Unit of measurement is Colorado county or counties of practice (n=618) of direct provider participants (n=733) in Colorado. Participants whose practice location was undeterminable (n=115) were not included. The number of counties does not add up to the number of direct care participants because participants were allowed to provide none, one, or multiple counties of practice. Non-Colorado participants (n=63) and Non-direct care provider participants were excluded from the data presented on this slide.
HCPF - Medicaid

- Several access to care challenges - specialty care, social needs barriers, vulnerable populations
- Right care at the right time
- In 2017, partnership formed between HCPF and the CU School of Medicine (CUSOM)
  - Goal: Increase access to healthcare
- Priority Areas
- Access to Care Framework
Partnership Structure

- CUSOM
  - Supplemental Program Team (UPL)
  - PMCC
- HCPF
  - Clinical
  - Population Health
  - Quality
  - Data
Medicaid Priority

- Project ECHO can be used to enhance Medicaid efforts to improve access to care
- Wide Reaching Impact
  - Medicaid member health outcomes
  - Reduce Costs
  - Enhance Provider Satisfaction
    - Primary care provider capacity
    - Specialty care access challenges
  - Rural/Frontier Focus
  - Reduce health disparities
Opportunities

- Targeted outreach to Medicaid providers
  - Managed care networks
  - Regional Accountable Entities (RAE)
- Evaluation using Medicaid claims data
  - Provider and member outcomes
- Data sharing opportunities
  - Identification of need
- Quality Metrics
  - KPI in primary care
  - CMS Core Measures
- Clinical Input
  - Review data and clinical outcomes
Example 1: Specialty Care Access

Strategy

○ Focus on access:
  ■ Primary Care capacity
  ■ Reduce specialty care wait times, inappropriate referrals

○ Medicaid specific topic areas
  ■ Claims data analysis
  ■ Core measures
  ■ Clinical team insight

○ Physician champions
  ■ CUSOM understanding of provider attitudes and satisfaction

Series: Rheumatology and Neurology
Example 2: Newcomer Health Series

- Collaborative effort between ECHO, Centers for Excellence, HCPF and CUSOM
  - Goal: Improve provider knowledge and confidence on Newcomer Health needs and medical screening guidelines
- Series: October 2022 - November 2023
- Mid Year Outcomes
  - 44 states represented
  - 395 participants
  - 48% Medicaid providers
- Next steps
  - Cohort 2
  - Colorado Specific Series - partnership expansion
Supplemental Funding/UPL Support Series Topics

- Rheumatology
- Endocrinology
- Urology
- Newcomer Health
- Autism
- Transgender Health
- Pediatric Suicide Prevention
- CoPPCAP: Colorado Pediatric Psychiatry Consultation & Access Program
- Colorado Updates in Public Health
Future Goals - FY 24-25 and Beyond

● Demonstrate Medicaid Impact
  ○ Member outcome evaluations
  ○ Provider targeted outreach and marketing
  ○ Opportunities for sustainable funding mechanisms
  ○ CMS Core Measures

● Data Sharing

● Medicaid Priority Series
  ○ Newcomer Health Series
  ○ Autism
  ○ Reproductive Health
  ○ Justice Involved
  ○ Neurology
State Agency and ECHO Collaboration

- Access to Care Opportunities
  - Justice Involved (panel discussion)
  - Unhoused
  - Refugee
  - Rural/Frontier Counties

- Supportive Partnership
  - ECHO seeks state support
  - State seeks ECHO support
Post-Conference Connections

ECHO listserv

HCPF/CUSOM Community Engagement Forum

- Email Polly Davis to be added to the listserv
  - Polly.Davis@cumedicine.us
Contact Us

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