CLINICAL QUALITY IMPROVEMENT (CQI) PROGRAM TEAM

Clinical Quality Improvement (CQI) Department

Our Mission: In alignment with the Rocky Mountain Health Plans (RMHP), a UnitedHealthcare Company, Mission and Strategic Plan, we facilitate the ongoing improvement in health care delivery to our members through progress toward achievement of the Quintuple Aim (Improve the health of the population, Enhance the patient experience of care, Control the per capita cost of care, Improve provider/clinician job satisfaction, Advance health equity and social determinants of health) through clinical quality improvement efforts that strive to optimize effective processes and minimize system barriers that focus on member behavior.

Our Vision: In alignment with the Clinical Quality Improvement mission, we develop and/or manage the administration of clinical programs that support continuous quality improvement. We provide implementation support, clinical quality audits, analysis of member care quality, and measurement standards to support quality improvement using HEDIS and other tools. We develop a growing community network of advanced entities who are equipped to provide high value, whole person care and facilitate effective health plan utilization in concert with our value-based contract strategy.

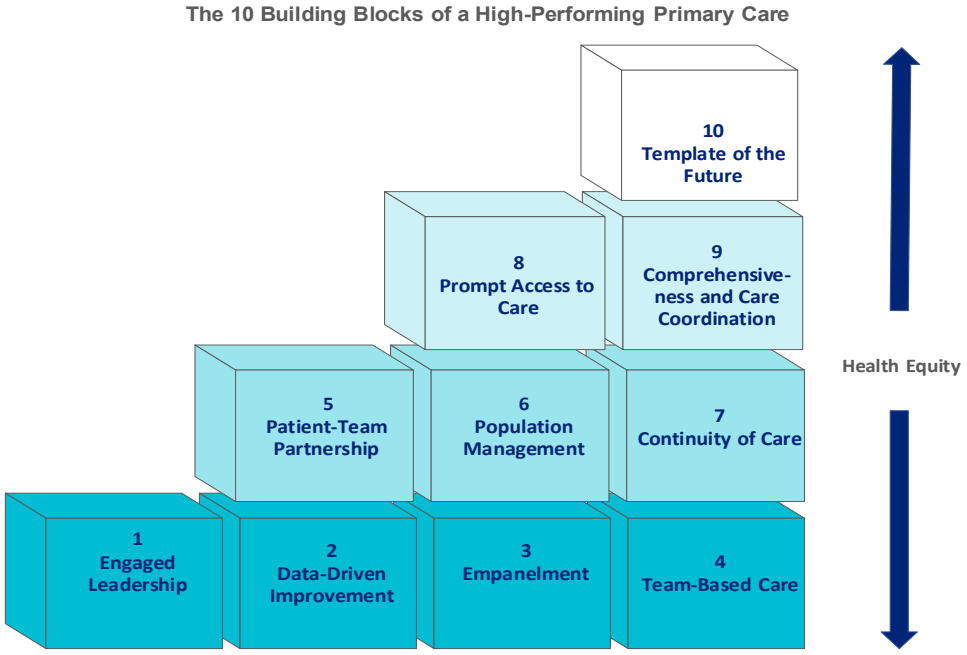
Clinical Quality Improvement Program Team

The Clinical Quality Improvement Program Team (formerly known as the Practice Transformation Team) at Rocky Mountain Health Plans (RMHP) has partnered with practices throughout Colorado for over a decade, to develop a community of advanced practices by fostering quality improvement at the practice level between physicians and patients with a focus on team-based, patient-centered, primary care. A state-of-the-art practice transformation approach is integrated into the medical neighborhood through the implementation of care management and care coordination processes, and engagement of both primary and specialty practices.

Last Updated on: August 19, 2025

What we do

Practices are engaged in a stair-step trajectory of advancing curriculums based on Bodenheimer's 10 Building Blocks of High-Performing Primary Care. Bodenheimer's building blocks of engaged leadership, data-driven improvement, empanelment, team-based care, patient-team partnership, population management, continuity of care, prompt access to care, comprehensiveness and care coordination, and integration are incorporated in program curriculum. Practices build skillsets based on these building blocks.



Adopted from: Bodenheimer T, Willard-Grace R, Gharob A, Grumbach K. "The 10 building blocks of high-performing primary care." Ann Fam Med. 2014;12(2): 166-171. http://www.annfammed.org/content/12/2/166.full.pdf

Data evaluation and analysis is used throughout all programs. This allows practices to monitor their program performance and make program changes based on measured outcomes. Value measurements include practice reported and actionable quality metrics, patient experience, and total cost of care. There is a strong focus on the advanced use of healthcare information technology.

One element of our clinical quality improvement program includes comprehensive care that extends beyond traditional medical services and accounts for various needs along the biopsychosocial spectrum.

RMHP's Clinical Quality Improvement Program Team offers a variety of ways to support practices in developing models of integrated behavioral health that are clinically, operationally, and financially sustainable. For example, the team includes a Clinical Program Manager specializing in integrated behavioral health, who works one-on-one with practices to create visionary, tailored plans for integrated behavioral health and can serve as a resource over time for evidence-based tools, staff trainings, and more. There are several clinical quality improvement programs facilitated by RMHP's Clinical Quality Improvement Program Team that specifically address the role of integrated behavioral health in primary care.

Participation in clinical quality improvement programs allows practices the opportunity to test, prepare for, and implement payment reform opportunities. Specific attention and action in the program offerings focus on the three components of the Institute for Healthcare Improvements Triple Aim, as well as Bodenheimer's and Sinsky's Fourth Aim, provider satisfaction:

- Improve the health of the population
- Enhance the patient experience of care (including quality, access, and reliability)
- Control the per capita cost of care

- Improve provider/clinician job satisfaction
- Advance health equity and social determinants of health

As the models for healthcare improvement continue to evolve, there is a growing consensus that an additional aim is needed to address inequities in the healthcare system. You may begin to hear of a fifth aim, or "The Quintuple Aim". The Quintuple Aim builds upon the Quadruple Aim framework and includes an additional dimension to address health equity and inclusion. With this framework as a foundation, your progress in the RMHP Clinical Quality Improvement Programs will help shape workflows to improve population health, elevate the experience of the patient and medical staff, decrease healthcare costs, and address disparities in care.

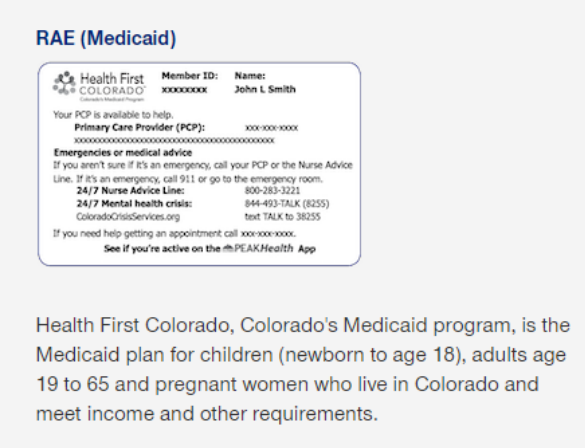
Rocky Mountain Health Plans (RMHP) Value Based Payment Programs

RMHP value-based contracting programs reward high-quality, high-value care, and reimburse through a payment structure designed to achieve better care, more efficient spending, and healthier communities. A series of programs, as described in this document, provide practices with a trajectory through which practices can progress. To be considered advanced primary care practices and provide the infrastructure to demonstrate outcomes that support value-based payment contracts.

- Overview of RMHP's Role in Affiliated Contracts and Programs
- Overview of HCPF Practice Assessment Tool for RAE

Regional Accountable Entity (RAE)

RMHP has the contract to serve as the RAE for Region 1 of the Health First Colorado Accountable Care Collaborative (ACC) which includes the Western Slope of Colorado and Larimer County. As the RAE, RMHP is responsible for connecting Health First Colorado Members with both primary care and behavioral health services. ACC 2.0 will end on June 30, 2025, and ACC 3.0 will start on July 1, 2025. Stay tuned for more information.



General Overview

- New to the RAE
- RAE 101
- RMHP RAE website
- HCPF website on Accountable Care Collaborative 3.0
- RAE Terminology
- ACC Program Improvement Advisory Committee (PIAC)
- RMHP Care Coordination Activities
- Member Dismissal Process for RAE/PRIME

HCPF Practice Assessment Tool

- HCPF Practice Assessment Timeline
- Scoring for the HCPF Competency Assessment Tool

eCQMs

- Quarterly eCQM Reporting
- Electronic Clinical Quality Measures (eCQM) Basics 101
- 2025 RMHP eCQM Suite – To review the most recent RMHP eCQM Suite please refer to your quarterly reporting email that you receive from your Clinical Program Manager (CPM).

Attribution

- Member Attribution Fact Sheet
- Accessing Attribution Reports via Provider Portal

PCMP Payments Structure

- Primary Care Payment Structure

- PCMP Quality Payment Webinar
- PCMP Quality Payment Slides
- Payment Structure
- PCMP Access Stabilization Payments Webinar
- PCMP Access Stabilization Payments Slides
- ACC 3.0 eCQM Payment
- eCQM Payment Timeline
- SDoH Screening Incentives
- Social Driver of Health Z-Code Provider Guide

Quality Measures that Impact Practice Payments

Note: HCPF has not yet updated resources for CMS core measures. Check back for more updates.

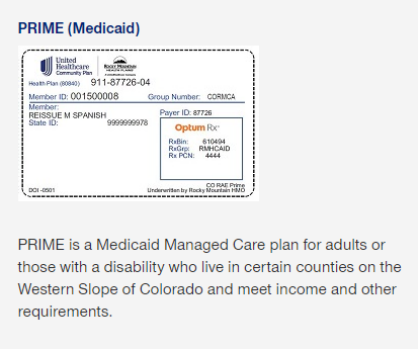
- HCPF – Key Performance Indicators (KPI), Performance Pool and Behavioral Health Incentive Program (BHIP) Website
- 2025 CMS Adult Core Measure Set Reporting Resources
- 2025 CMS Child Core Measure Set Reporting Resources
- 2025-2026 PCMP Quality Measure and Thresholds- coming soon!

Behavioral Health

- Resources for Providers from Rocky Mountain Health Plans/United Healthcare
- Resources for Providers from the Colorado Behavioral Health Administration (BHA)
- HCPF- Integrated Care Sustainability Policy Guidance
- State Behavioral Health Services Billing Manual for Medicaid

Payment Reform Initiative for Medicaid Enrollees (PRIME)

The Department selected Rocky Mountain Health Plans (RMHP) to participate in a payment reform initiative as part of Health First Colorado's Accountable Care Collaborative (ACC) program. This integrated health payment reform initiative uses a community-based, global payment model for high-risk Health First Colorado Members. The RMHP PRIME counties are: Delta, Garfield, Gunnison, Mesa, Montrose, Ouray, Pitkin, Rio Blanco, and San Miguel



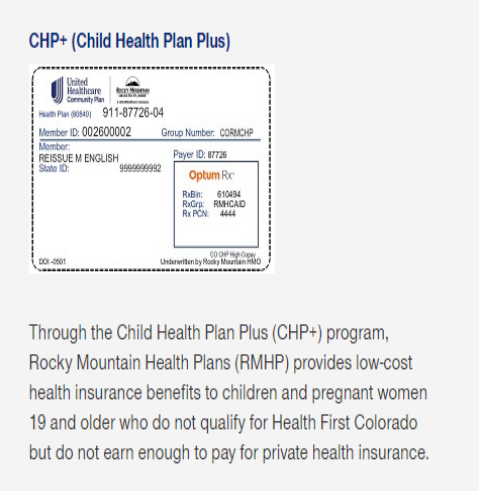
- PRIME 101
- RMHP PRIME Website
- PRIME Year 11 Reinvestment Criteria
- PRIME Year 11 Overview
- PRIME Attribution
- Patient Choice Form
- Instructions for the Patient Choice Form
- Spanish version of the Patient Choice Form
- Accessing Attribution Reports via Provider Portal
- Member Dismissal Process for RAE/PRIME

Child Health Plans (CHP+)

Child Health Plan Plus (CHP+) is public low-cost health insurance for certain children and pregnant women. It is for people who earn too much to qualify for Health First Colorado (Colorado's Medicaid program), but not enough to pay for private health insurance. CHP+ members are enrolled into a Managed Care Organization (MCO). A MCO is a group of doctors, clinics, hospitals, pharmacies, and other providers who work together to help meet your health care needs. Each CHP+ MCO uses its own group of hospitals, pharmacies, and doctors for the counties it serves.

RMHP is one of four CHP+ MCOs in Colorado. The county in which a plan participant lives will determine which MCO they are enrolled in.

- Rocky Mountain Health Plans (RMHP) – Child Health Plan Plus (CHP+) website
- Child Health Plan Plus Frequently Asked Questions
- CHP+ Reinvestment Criteria



RMHP Advanced Alternative Payment Model (APM)

The RMHP Advanced Alternative Payment Model is an expansion of the Comprehensive Primary Care Plus (CPC+) Program, that ended in 2021.

- Patient Choice Form
- Instructions for the Patient Choice Form
- Spanish version of the Patient Choice Form
- RMHP APM Incentive Criteria
- Accessing Attribution Reports via Provider Portal

Value Based Contracting Review Committee (VBCRC)

The RMHP Value Based Contracting Review Committee is responsible for reviewing practice performance and outcomes for RMHP value-based contracts and determining eligibility for funding support to practices. The committee is also responsible for identifying practices who will be audited each year. You can email them at vbcrc@uhc.com.

Health Care Policy and Finance (HCPF) Programs

These are programs that are managed by HCPF (Department of Healthcare Policy and Financing). The Clinical Quality Improvement (CQI) Department at Rocky Mountain Health Plans supports these programs by:

- Assisting practices with measure selection
- Supporting practices with program management
- Collecting structural documentation at end of Program Year
- Providing reminders for program deadlines

Alternative Payment Model (APM) for Primary Care

- HCPF APM Website
- 2025 APM 1 Guidebook
- 2025 APM 1 Annual Updates Appendix to Guidebook
- 2025 APM 1 Measure Selection Workbook
- 2025 Measure Set Master List
- 2025 Structural Measure Specifications
- Instructions for Accessing Administrative Measure Specifications

Alternative Payment Model 2 (APM 2)

- HCPF APM 2 Website

Prescriber Tool for Health First Colorado

- HCPF Prescriber Tool for Health First Colorado
- Prescriber Tool Alternative Payment Model | Colorado Department of Health Care Policy & Financing

Rocky Mountain Health Plans Internal Quality Improvement Programs

At Rocky Mountain Health Plans (RMHP), we are committed to helping practices on their journeys to advanced care as we work together to better serve our Members. The RMHP Clinical Quality Improvement Team offers the programs, tools, and resources to help practices take the steps to attain high-quality advanced care and value-based payments. We recognize the different needs practices have as they move toward this destination, and we are here to offer support along the way.

Your practice's participation in the programs listed below may help you qualify for a higher tier in the Region 1 Regional Accountable Entity (RAE). These programs also align with the Colorado Healthcare Policy and Financing Alternative Payment Model (APM). If you are interested in any of the programs listed below, please reach out to Kristi.Hall1@uhc.com.

Educational Opportunities

Engagement in RMHP educational events and webinars is a great way for your practice to stay informed on clinical topics, obtain training and information on health equity, enhance skills for your care managers, behavioral health providers and other members of the care team, as well as gain information on value-based contracts, codes, and billing. Webinars & Events Catalog

ED Utilization Program

The ED utilization project is a yearlong intervention that includes monthly targeted facilitation with your Clinical Program Manager (CPM) to discuss timely identification and execution of needed changes necessary to accomplish reduction of unnecessary emergency department utilization. Program Overview

Integrated Behavioral Health Support

Recognizing the value of integrated behavioral health (IBH) in the primary care setting, we offer all practices one to one support through our Clinical Program Manager (CPM) who is dedicated to IBH practice facilitation. Support services offered include sessions on how to build team collaboration in an IBH model, understanding evidence-based practice for IBH, workflow design and optimization, data collection and quality improvement, overcoming implementation barriers, and sustainability planning. If you are interested in additional support, please reach out to Kylanne.Briggs@uhc.com.

Diabetes Management Program

The Diabetes Disease Management Program is a yearlong intervention that includes monthly targeted facilitation with your CPM to discuss timely identification and execution of needed changes necessary to improve the management and outcomes for patients in the practice with an active diagnosis of diabetes. This program measures A1c, retinopathy, kidney disease and ED/hospital utilization rates. Program Overview

Colorado Specialty CareConnect eConsult program

The vision of Colorado Specialty CareConnect (CSCC) is to advance the curbside consult to improve care. CSCC provides a structure to document and bill for interdisciplinary consultation (eConsults) between PCPs and specialty care providers to assist in the next steps in care for RMHP members. Powered by Safety Net Connect and Quality Health Networks (QHN) this platform streamlines communication for interprofessional consults and allows for reimbursement, resulting in the empowerment of Primary Care Providers to make additional treatment recommendations for patients. Training and ongoing support is provided by the Clinical Quality Improvement team. Colorado Specialty Care Connect (CSCC) - Quality Health Network

Patient-Centered Medical Home (PCMH) Recognition

Participating practices will work with PCMH Certified Content Expert, Merceydes Moffat, to review and improve processes that build and maintain an infrastructure that supports ongoing improvement for the delivery of effective and efficient primary care, as recognized and in accordance with NCQA's standards for PCMH recognition. PCMH Introduction and NCQA PCMH Website

Learn More About

Visit www.rmhp.org or Our Newsroom | Rocky Mountain Health Plans (rmhp.org).

For questions and additional information on the RMHP Clinical Quality Improvement Program work, please use the following contact information: Kristi Hall Kristi.Hall1@uhc.com.

References

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NCQA PCMH Recognition: Better quality lower costs. (2017). Retrieved 24 October 2017, from: http://www.ncqa.org/programs/recognition/practices/patient-centered-medical-home-pcmh/why-pcmh/pcmh-benefits/benefits-to-clinicians-practices-patients