

Meeting Summary for Care Management Zoom Meeting

Oct 08, 2025 09:51 AM Eastern Time (US and Canada) ID: 963 8072 6118

Quick recap

The Care Management Committee Meeting focused on reviewing various healthcare quality measures and their performance across pediatric and adult populations, including behavioral health screenings, developmental assessments, and various medical screenings. The meeting covered updates on the PCMH program, including changes in practice sites and providers, as well as discussions about linking behavioral health and developmental screening data for children. The committee addressed scheduling conflicts that postponed some agenda items, including DSS call center updates and work requirements, with plans to address these topics in an upcoming Friday MAPOC meeting.

Next steps

- [Laura Demeyer to send PCMH program update and quality measure update presentations to David for posting on the website.](#)
- [DSS to provide an update on the call center at the November meeting.](#)
- [DSS to provide an update on non-emergency medical transportation at the November meeting.](#)
- [David Kaplan to send out the links Bill Halsey shared in the chat about work requirements to committee members and add them to the meeting summary.](#)
- [Reps. Dathan and Comey to discuss with Reps. Gilcrest and McCarthy-Vehey and Senators Anwar and Lesser about the call center and work requirements topics for the Friday MAPOC meeting.](#)
- [DSS to prepare work streams related to work requirements for Friday's meeting.](#)
- [Co-Chair Lucy Dathan to add PCMH+ re-envisioning and provider payment parity to the November meeting agenda.](#)

Summary

PCMH Program Performance Update

The Care Management Committee Meeting was convened on October 8th, 2025, at 10:03 a.m., with Co-Chairs Lucy Dathan and Rep. Comey participating remotely. Karen Dubois, Director of Quality Management, presented a status update on the PCMH program and quality measures, highlighting year-to-date performance rates for 12 performance measures across pediatric and adult categories. The meeting was broadcast on CT-N.

PCMH Quality Measures Review

Laura Demeyer (CHNCT) reviewed pediatric and adult PCMH quality measures, including HEDIS and custom measures, explaining their criteria and significance. She clarified that challenge pool measures, such as behavioral health screening for pediatrics and eye exams for adults with diabetes, offer additional incentive payments if practices achieve a 90% or higher rate. Karen noted that these measures were selected based on data trends and identified areas for improvement, with the eye exam measure being a persistent challenge. Laura presented the behavioral health screening measure's performance, showing an increase from 46.5% in 2023 to 49.5% in 2024, with a preliminary rate of 50.6% as of August 2024.

Behavioral Health Screening Data Challenges

The group discussed behavioral health screening rates, with Lucy expressing concern about the 50% rate despite the importance of screenings post-pandemic. Laura explained that Connecticut tracks state rates for quality improvement with PCMH practices, while Karen noted that coding issues and EMR connectivity affect the reported rates, with some practices showing improved rates after addressing coding problems. William from DSS mentioned that separate payments for screenings were introduced to incentivize practitioners, and Erica confirmed that policy education has improved compliance, though claims data remains an imperfect measurement tool. Janice highlighted Connecticut's 10-year commitment to developmental screening data collection, which provides a valuable baseline for upcoming Medicaid changes, and raised questions about linking behavioral screening data with other child health outcomes.

Child Health Screening Data Integration

The group discussed linking behavioral health and developmental screening data for children aged 1-9, with Bill Halsey confirming that data sets can be linked to track screenings and treatment services over time. Janice Gruendel raised the possibility of linking maternal depression screening data to child health records, which Lucy acknowledged as a valuable consideration for future discussion. Laura presented screening rates data showing improvements in developmental screenings from 64.6% in 2023 to 69.5% in 2025, while noting that practices participating in quality improvement initiatives tend to show higher rates than the state average.

Healthcare Measures Performance Review

The meeting focused on reviewing various healthcare measures and their performance, including HPV vaccine uptake, lead screening, chlamydia screening, post-admission follow-up, breast cancer screening, eye exams for diabetes patients, kidney health evaluation, and the use of imaging studies for low back pain. Laura explained the changes and trends in these measures, highlighting improvements in some areas and challenges in others. The group also discussed the expanded age range for breast cancer screening and the impact of measure changes on denominator sizes. Representative Dathan expressed interest in discussing the broken DSS call center and work requirements in the next meeting, as DSS was not ready to provide an update at this time.

PCMH Program Updates and Challenges

The meeting focused on updates to the PCMH program, including changes in practice sites and providers, and the outreach efforts to non-PCMH practices. The committee discussed the need for urgent action on work requirements and call center issues, which were postponed due to scheduling conflicts but will be addressed in the upcoming Friday MAPOC meeting. There was also a discussion about the complexity of implementing work requirements and the need for efficient coordination among stakeholders. The conversation ended with plans to continue discussions on PCMH+ and provider payment disparities in the next meeting.

[A Summary of Federal Medicaid Work Requirements - Center for Health Care Strategies](#)

[Implementing Work Requirements on a National Scale: What We Know from State Waiver Experience | KFF](#)

[Medicaid Work Requirements — Results from the First Year in Arkansas](#)