

# GREATER COLUMBIA ACCOUNTABLE COMMUNITY OF HEALTH

## Budget and Funds Flow Committee Meeting Minutes

Tuesday, December 8, 2020 | 10:00 AM to 11:00 AM

*Teleconference*

Number of Members: 10  
 Number for Quorum: 6  
*Italicized: GCACH Board Member*

ATTENDANCE			
Committee Members	Caitlin Safford David DiGuseppe Estakio Beltran Jennifer Alao-Alford	Melissa Hess Mitchell Rhodes <i>Rhonda Hauff</i> Scott Olander	Suzy Diaz Viktoriya Broyan
GCACH Staff	Carol Moser Chelsea Chapman	Sam Werdel Sula Savchuk	Wes Luckey
Guests	Dan Vizzini		
WELCOME AND INTRODUCTIONS			
Welcome & Introductions (Wes Luckey)	Wes Luckey, Deputy Director, facilitated introductions. Quorum was met with six (6) members present (or calling in) to the convening.		
DISCUSSION ITEMS			
Crosswalk of PCMH Certification (Wes Luckey/Sam Werdel)	<p>Wes Luckey and Sam Werdel reviewed the Patient-Centered Medical Home (PCMH) crosswalk against the Greater Columbia Cares Model (GCCM) toolkit. The PCMH certification is a goal for our practice transformation organizations—it is not a requirement but something we want to help facilitate for clinics who desire this certification. The National Committee for Quality Assurance (NCQA) is the certifying body. GCACH staff used the appendix to their PCMH scoring to conduct this crosswalk. To meet PCMH certification, organizations must meet the “core” criteria as well as 25 “elective” credits. This cross walk helped ensure there GCCM incorporates this criterion.</p> <p>Wes and Sam reviewed each category:</p> <ul style="list-style-type: none"> <li>• The Practice’s Organization</li> <li>• Team Communication</li> <li>• PCMH Responsibilities</li> <li>• Collecting Patient Information               <ul style="list-style-type: none"> <li>○ Social determinants of health: Wes touched on this is top of mind for HCA and will be an increasingly important part of our work.</li> </ul> </li> </ul>		

**Thank you for your engagement with GCACH!**

	<ul style="list-style-type: none"> <li>• Patient Diversity</li> <li>• Addressing Patient Needs</li> <li>• Medication Management</li> <li>• Evidence-Based Care</li> <li>• Connecting with Community Resources           <ul style="list-style-type: none"> <li>○ Wes highlighted activities around the local health improvement networks (LHINs) and the WIN211 resource directory.</li> </ul> </li> <li>• Additional Patient Collaboration</li> <li>• Patient Access to the Practice</li> <li>• Empanelment and Access to the Medical Record</li> <li>• Identifying Care Managed Patients</li> <li>• Care plan Development</li> <li>• Diagnostic Test Tracking and Follow-up</li> <li>• Referrals to Specialists</li> <li>• Coordinating with Health Care Facilities</li> <li>• Measuring Performance</li> <li>• Setting Goals and Acting to Improve</li> <li>• Reporting Performance</li> </ul> <p>Sam highlighted sharing best practices, not reinventing wheel and providing assistance to those who are wanting to become PCMH certified.</p> <p>No comments or questions. The committee moved on to review the revenue sharing model.</p>
<p>Review and Approve Revenue Sharing Model (Wes Luckey/Sam Werdel)</p>	<p>Wes reviewed the revenue sharing model for 2021. He reminded the committee that each Cohort is on a different schedule/performance year.</p> <p>Wes and Sam highlighted the changes to this schedule. Comments and questions included:</p> <ul style="list-style-type: none"> <li>• Sam noted this is a more streamlined way to get payments out, which require manual review and processing. She further explained the weighted criteria and receiving payment for each category. Current system is cumbersome for GCACH Finance Coordinator to upload different payment structures. This is a means to collaborate and streamline the process.</li> <li>• Clarification that the milestones attributed to the PCMH certification (core vs. elective) will not have an impact and is for those who are looking to become certified. It is important for the navigators to work with each clinic to understand the strategy behind the core and elective measures.</li> <li>• Discussion around the consideration of realities/burden of the pandemic for providers and adapting requirements navigators for assistance, moving reporting back and giving additional time to address deficiencies, leniency/flexibility on scoring of milestones, etc. Confirmation that providers met milestones/receiving payment.</li> </ul>

**Thank you for your engagement with GCACH!**

	<ul style="list-style-type: none"> <li>Clarification that the only difference to the new revenue cycle is the combination of categories. The formula is still the same. Sam and Wes reiterated this change is to ease the burden of the GCACH staff (the navigators and finance coordinator) with respect to scoring and making payments. Additionally, Wes noted that this is an effort to create financial controls to prevent overpayments from happening again.</li> </ul> <p>No further discussion.</p> <p>✓ <b>MOTION:</b> Suzy Diaz moved to approve the revenue sharing formula/model as presented by GCACH staff. Seconded by Viktoriya Broyan. Motion passed.</p> <p>Wes announced the transition of the Director Finance and Contracts. Sula is working to mitigate any issues in this department with Carol and other directors. We are in the process of reviewing the job description and aligning the position with our current and future business needs.</p>
<p>November 2020 Meeting Minutes (Rhonda Hauff)</p>	<p>Rhonda reviewed the November 2020 GCACH Budget and Funds Flow Committee meeting minutes.</p> <p>✓ <b>MOTION:</b> Scott Olander moved to approve the November 2020 GCACH Budget and Funds Flow Committee meeting minutes. Seconded by Suzy Diaz. Motion passed.</p> <p>No further comments or questions.</p>
<b>ADJOURNMENT</b>	
<p>Adjournment</p>	<p>Meeting adjourned at 11:00am. Minutes taken by Chelsea Chapman.</p> <p><b>Recap of Motions</b></p> <ul style="list-style-type: none"> <li>Revenue sharing formula/model as presented by GCACH staff</li> <li>November 2020 meeting minutes</li> </ul>

**Thank you for your engagement with GCACH!**