



Greater Columbia Accountable Community of Health

Collaboration • Innovation • Engagement

Board of Directors

Meeting Minutes

July 18, 2019 | 12:30 pm – 3:00 pm

Tri-Cities Community Health (TCCH) | 800 W. Court Street, Pasco, WA 99301

ATTENDANCE

Board Members (*: called in)

Voting Board Members (Minimum 9 for Quorum):

- Rhonda Hauff (Housing, President)
- Martha Lanman (Public Health, Vice President)
- Brian Gibbons (Healthcare Providers, Treasurer)
- *Madelyn Carlson (Transportation, Secretary)
- Jorge Arturo Rivera (Managed Care Organization (MCO))
- Carrie Green (Philanthropy)
- Dan Ferguson (Workforce Development)
- *Darlene Darnell (Community-Based Organizations & Faith-Based Organizations)
- Dana Oatis (Behavioral Health)
- Lottie Sam (Tribes)
- Les Stahlnecker (Education)
- *Susan Grindle (Social Services)
- Ronni Batchelor (Consumer)
- Sandra Suarez (Federally Qualified Health Centers (FQHCs))
- Ruben Alvarado (Local Government)
- *Julie Petersen (Hospital)
- Eric Nilson (Public Safety)

Non-Voting Board Members:

- Tonya Kreis (Yakama Nation Representative)

	<input type="checkbox"/> Martin Valadez (Board Past President, Advising Role)	
Guests (*: called in)	Courtney Winton, _____ (OHSU), Jordan ____ (OHSU), Sierra Foster, Marissa Ingalls*, Kat Latet*	
Staff/Facilitator	<input checked="" type="checkbox"/> Carol Moser, <input checked="" type="checkbox"/> Wes Luckey, <input checked="" type="checkbox"/> Becky Kolln, <input checked="" type="checkbox"/> Rubén Peralta, <input checked="" type="checkbox"/> Lauren Johnson, <input checked="" type="checkbox"/> Diane Halo, <input checked="" type="checkbox"/> Jenna Shelton, <input checked="" type="checkbox"/> Martin Sánchez, <input checked="" type="checkbox"/> Patrick Jones, <input checked="" type="checkbox"/> Aisling Fernandez, <input checked="" type="checkbox"/> *Sam Werdel, <input type="checkbox"/> Rachael Guess	
Welcome & Introductions	Rhonda Hauff, GCACH Board President, facilitated the meeting. Quorum was met with a total of 14 voting members present (or calling in) to start the meeting. The Board reviewed the Attestation of Conflict of Interest and the Self-Dealing Transactions: Prohibition and Standard for Approval.	
MINUTES & REPORTS		MOTIONS
Consent Calendar (Rhonda Hauff)	516/19 Board Meeting Minutes were accepted by the Board members who had previously reviewed them. There was no discussion.	Motion by Ruben Alvarado to approve the Consent Calendar, which included the May 16, 2019 Board minutes. Seconded by Eric Nilson. Motion passed.
GCACH Report & Updates (GCACH Staff)	<ul style="list-style-type: none"> • <u>Status of Yakama Medicaid Transformation:</u> GCACH signed an MOU with the Yakama nation. Health Common is a more lengthy implementation. The Yakama Nation doesn't have adequate IT infrastructure. Working with the Tribe's IT program manager to determine infrastructure upgrades that will be funded through the MOU. MOU will include HIPAA training with Yakama nation staff. HIPAA training is primarily for those interacting with clients. • <u>Planning for Community Paramedicine Pilot Project:</u> GCACH is working with Eric Nilson to ID the outcome measures and the SBAR to implement the pilot project. Working with MCOs for some reimbursement. Cary Cole hired as the Community Paramedic for the program. Cary will ID users and superusers. We have set some parameters for the types of people we'll NOT be working with- for example with anyone who is pregnant, anyone under 18, anyone who is disabled. One person can only do so much, so we want quality over quantity. Have mapped out 12-13 contacts in a 12-month period. If we were to work along the lines of Alliance Consistent Care's work- they reduced ED utilization to 50% of clientele just by visiting the one time- just knowing they were being monitored and just knowing there's another resource, hopefully we'll see better understanding of better use of resources. • <u>Practice Transformation:</u> We've seen successes in Walla Walla with Providence: Some patients were getting a PHQ9 but not the follow up, now there is follow up for those patients. The deadline for milestones was on Monday so there were a lot of submissions. Everyone turned it in for the deadline. Quarter One was on paper, Quarter Two used the reporting platform online which is much nicer. • <u>Status of CSI Portal/Review of Landing Page:</u> GCACH has had ongoing meetings with CSI Solutions as the Partnering Providers have entered Quarter Two Practice Transformation Milestone deliverables into the CSI Reporting Portal. CSI was responsive with making changes to the site. The Practice Transformation team is working with CSI and the portal to get it up to date. Lauren has overseen the landing page. Lauren gave a tour of the main page: There are confidential 	

folders for each organization (you can't see the folders for the others). The link to register is only going out to those who Jenna and Martin have approved to be in the portal.

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- Cohort 2 Tracker: Cohort 2 consists of all organizations that participated in IMC. Some of these organizations have been able to turn in things to Becky and Rachael for their contracts, some have signed and returned the contracts. We had kickoff meetings with most of the organizations. Some of them have turned in their proposed budgets. There will be learning collaboratives for Cohort 2.
- Cohort 1: There were a lot of lessons learned with Cohort 1. We learned about the process of reporting data. We got to meet with the sites and in 6 months you'll need to report on this and prepare them, learned who should be in the room for meetings. It's been going well. We have relationships with these people now. They welcome us. We explain the work they'll have to do, and they receive it very well.
- ORN Update: Benton-Franklin-Walla Walla (B-F-WW) Opioid Resource Network (ORN) did their first reporting and they have nine new patients as of July 9, 2019 and six of those nine have started on Medicated Assisted Treatment (MAT). They've done a lot of outreach with flyers and Facebook. They've also been reaching out to other providers by establishing Collaborative Agreements (7 in place now) and by getting more MAT providers in their agreements. It's a requirement to get 100 patients.
- Community Resilience Campaign: Ruben gave an update on the Community Resilience Campaign taskforce. This is composed of professionals who work directly with consumers and who are very trauma informed and ACEs aware. The first step the taskforce took was to remove ACEs from the name of the campaign and taskforce. Then they renamed the taskforce to focus on resilience and addressing/mitigating the effects of ACEs (more than just identifying ACEs). Went through a decision-making process to establish a pilot program to find the focus of the pilot and the right location for it. The community for this pilot needs to represent the average community in the 9-county region. The taskforce agreed on Yakima because it showed the second most concerning health indicators in the region by ranking (1st, 2nd or 3rd in 47% of the indicators). Toppenish was 1st in 60% of the indicators but that's not as representative of the region. We're in the process of inviting some local community members from different sectors from MH, the City of Yakima, school districts, and others for the planning group. The Community Resilience Campaign Task Force will kick off the pilot project in Yakima to implement an educational and awareness campaign with a focus on children and families about resiliency and NEAR (Neuroscience, Epigenetics, Adverse Childhood Experiences and Resilience) education that will scale up to a \$500,000 regional campaign in 2020.
- LHIN Tracker: The Board reviewed the LHIN Tracker. GCACH is waiting on BFCHA which is in the selection process for grantees and there are 10 applications now. All the third-party administrators (TPAs) have received the funds. Besides BFCHA, the rest of the LHINs and their TPSs have made their grantee selections. SW WA was the first LHIN to meet all the requirements.
- GCACH Sponsorship Update: Two sponsorships were awarded in Q1 & Q2, including \$3,500 to Chaplaincy Healthcare of the End of Life Conference and \$5,000 to Walla Walla County Department of Community Health for National Night Out.

	<ul style="list-style-type: none"> 2019 Workplan Update: Wes created a workplan for 2019 showing much GCACH’s concurrent work for 2019 in one place. Of note, there’s a cultural sensitivity training with the Yakama Nation for the Board of Directors with a date to be decided on soon. The PCMH kickoff (a big celebration) will be at Walter Clore in October. 	
ACTION ITEMS		MOTIONS
Year-to-Date (YTD) and May and June Financial Reports (Becky Kolln)	<ul style="list-style-type: none"> Becky Kolln, GCACH Director of Finance and Contracts, reviewed the Financial Reports, which included: <ul style="list-style-type: none"> Balance Sheet Budget vs. Actuals 2019 Statement of Activity GCACH had an audit and they asked GCACH to switch from a cash-based process to an accrual-based process. There was no June Board meeting, so the financial documents include two months for this meeting. The funds from the Yakima Valley Community Foundation grant that GCACH received several years ago went to the Yakama Nation. Carol, Wes and Becky went to meet with the Yakama Nation to hand them the check. Julie Peterson noted that the second half of the year is expected to be more expensive than the first half of the year but will still be within budget. Becky noted that they are working with LoAnne Ayers at United Way to beef up the United Way infrastructure. This is a smart investment in the community and a benefit to GCACH since future LC and Board meetings will be held there. Payback for the investments is estimated to be only 6 months. Moving to the United Way location will allow for GCACH to have better control over finances and catering for the monthly meetings. GCACH is working on a cash flow projection. So far in 2019, many areas are underspent. Becky walked through the DSRIP tab of the Budget vs. Actuals. GCACH spent about \$5.6 million in Q1 for the Practice Transformation Contract. The other big spend was the TPA (\$1.4 million dollars). Had a phone call with the HCA the day before the meeting and they asked why more hadn’t been spent, but most of it is contracted for and will be spent by the end of the year. 	<p>Motion by Julie Peterson to accept the Year-to-Date (YTD) and May and June financial reports, which included the Balance Sheet, the Budget vs. Actuals, and the May and June 2019 Statement of Activity. Seconded by Ronni Batchelor. Motion passed.</p>
Cohort 3 SBAR (Carol Moser, Becky Kolln)	<ul style="list-style-type: none"> The Board reviewed the SBAR document for PCMH Cohort #3. On the day of the meeting, it had been a year and a day since the Board approved the first cohort. Situation: GCACH staff would like to determine the process for the PCMH Cohort (Cohort #3) that receives incentive funding for practice transformation. Recommendation: Staff recommends that the Board approve the LOI/CSA/Independent evaluation process to select the next Cohort that starts in October 2019. Staff 	<p>Motion by Sandra Suarez to approve the LOI/CSA/Independent evaluation process to select the next Cohort that starts in October 2019,</p>

	<p>recommends approval of the revenue model to incent Cohort #3 for the PCMH practice transformation program and approve the Funds Flow Modeling for Year 2 and 3 for all Cohorts.</p> <ul style="list-style-type: none"> • Discussion: <ul style="list-style-type: none"> ○ The financial modeling shows a balance of \$2.98 million at the end of 2023 if we add another Cohort (approximately 20?) in 4th quarter of 2019. ○ Funding for Cohort 1 in year 2 incents providers for care management, bi-directional integration, Learning Collaboratives, QI team, reporting, assessments, and PTIW. ○ Excited about the integration happening in the region. We want to be innovative and revolutionary. We've learned a lot from Cohorts 1 & 2. We can expand our reach a little bit. ○ With the LHINs, could they suggest any other names? Yes. ○ Staff looked at the data, claims by providers, this has led to a lot of organizations for the third cohort (those that have seen a lot of Medicaid clients). ○ The scores are from last year. 	<p>approval of \$7,187,502 million for Cohort #3 for the PCMH practice transformation program, and the incentive funding for year two and year three for all Cohorts. The Scale and Sustain Allowances for Cohort Two is revised to \$74,727 (instead of \$149,454). Seconded by Jorge Rivera. Motion passed.</p>
<p>Three ORNs SBAR (Diane Halo)</p>	<ul style="list-style-type: none"> • The Board reviewed the SBAR document to discuss funding three new ORNs for the Whitman, Kittitas, and Asotin-Columbia-Garfield counties. The ORNs will be hubs and set up Collaborative Agreements in their regions. They must be contracted with a MAT provider. We would award each ORN \$100,000. Funding was approved by the Board in March through the BH incentive budget. Staff is now asking to use those funds for the three ORNs. It's a competitive process with RFPs to set up the hubs. • Discussion: <ul style="list-style-type: none"> ○ Concern that we're taking care of numbers instead of people. ○ Major problem is a lack of motivation getting out and moving with prevention strategies. ○ For Blue Mountain Heart to Heart, the focus is on recovery. Recovery is huge. It's easy to get people to do MAT but to stick with it and get to support services they need is harder. Providing housing, recovery supports, CHWs, etc. Hoping the other RFPs will show similar emphasis not just getting people on MAT. ○ Rhonda said that they're part of the hub and spoke in Yakima. Much of this is around alternatives such as physical therapy. The interdisciplinary approach helps a lot. Care coordination is a big part of it to find the other services not just talking about their medication. ○ The biggest thing is the recovery part and treatment. Hoping that other regions have the same goal. 	<p>Motion by Les Stahlnecker to approve using \$300,000 from the Phase II Integration Incentive Funding approved by the Board of Directors at their May 16, 2019 meeting to contract for Network Managers for three Opioid Resource Networks in Whitman, Kittitas, and Asotin/Columbia/Garfield for a twelve-month period with the possibility of renewal. Seconded by Sandra Suarez. Motion passed.</p>

	<ul style="list-style-type: none"> ○ GCACH region hubs are similar to the Vermont model. 	
Sponsorship Policy/Application (Lauren Johnson)	<ul style="list-style-type: none"> • The Sponsorship Policy and Applications were reviewed at this meeting after several revisions based on the work of the Communications Committee. • In the past there have been submissions for the sponsorships, but we've had concerns that too much of the budget was to pay for staff and overhead. If it's a high percentage for staff that's not allowable. • Think about the value of the event. Identify the impact, the number of people who will attend, the long-term impact and how it will affect our project areas. 	Motion by Sandra Suarez to approve the revisions made to the Sponsorship Request Policy and the Sponsorship Application. Seconded by Dan Ferguson. Motion passed.
DISCUSSION ITEMS		
Addition of GCACH Staff (Carol Moser)	<ul style="list-style-type: none"> • Carol announced that GCACH created an internal position for a Marketing Manager to promote Lauren! • It was a good experience working with PNWU to see how much marketing they did. People don't just sign up for events; you must work at it. 	
August Learning Collaborative (Sam Werdel, Diane Halo)	<ul style="list-style-type: none"> • GCACH will host Transitional Care & Disease Management Learning Collaborative at PNWU on August 1st to 2nd. So far 100 people have signed up. Diane, Lauren, Sam, Rachael have all been working together on this. Most of the learning collaboratives will go through Eventbrite. The costs are over \$20,000 in just speaker costs alone. We want it to be well attended. Trying to advertise to the right people to get the right information out. Jeff Hummell MD, MPH will do a keynote. Dr. Kevin Martin will lead a palliative care discussion. Disease management will be a full day will Dr. Karen Hill. For the transitions track we're bringing in Elena Madrid, RN, BSN. Becky Grohs will do a talk about transitional care management. John Gilbert will talk about motivational interviewing. Brian Dawson, MD will work on transition from jail in BF counties. Ideal Option. 	
ADJOURNMENT		
Adjournment	<ul style="list-style-type: none"> • Meeting adjourned at 3:03 p.m. Minutes taken by Aisling Fernandez. 	Motion by Sandra Suarez to adjourn the July Board meeting at 2:53 p.m. Seconded by Dan Ferguson. Motion passed.
<p><i>Thank you for your time and engagement with Greater Columbia Accountable Community of Health!</i></p> <p>The 2019 Board meetings listed below will be in the Tri-Cities Community Health Board Room, at 800 W. Court St. Pasco, WA 99301, from 12:30-3:00 p.m. on the following dates:</p> <p>Wednesday, August 14th Thursday, September 19th Thursday, October 17th Thursday, November 21st Thursday, December 19th</p>		