



Greater Columbia Accountable Community of Health

Collaboration • Innovation • Engagement

Board of Directors

Meeting Minutes

January 17, 2019 | 12:30 pm – 3:00 pm

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

ATTENDANCE

Board Members (*: called in):	<p>Rhonda Hauff (Housing Sector, President) Martha Lanman (Public Health Sector, Vice President) Brian Gibbons (Healthcare Providers Sector, Treasurer) Madelyn Carlson (Transportation Sector, Secretary) Ronni Batchelor (Consumer Sector) Les Stahlnecker (Education Sector) Jorge Rivera (Managed Care Organization (MCO) Sector) Susan Grindle (Social Services Sector), Dan Ferguson (Workforce Development Sector) Dana Oatis (Behavioral Health Sector) Carrie Green (Philanthropy Sector) Sandra Suarez* (Federally Qualified Health Centers (FQHCs) Sector) Julie Petersen* (Hospital Sector) Ruben Alvarado* (Local Government Sector) Tonya Kreis* (Yakama Nation Representative)</p>
Guests (*: called in):	Sierra Foster, Marissa Ingalls, Cicily Zornes*
Staff/Facilitator	Carol Moser, Wes Luckey, Becky Kolln, Rubén Peralta, Lauren Johnson, Diane Halo, Jenna Shelton, Martin Sánchez, Patrick Jones, Aisling Fernandez, Rachael Guess
Welcome & Introductions:	<ul style="list-style-type: none"> • Rhonda Hauff, GCACH Board President, facilitated the meeting. This was the first Board meeting of 2019. • Quorum was met with a total of 15 members present (or calling in) to start the meeting.

	<ul style="list-style-type: none"> The Board reviewed the Attestation of Conflict of Interest and the Self-Dealing Transactions: Prohibition and Standard for Approval. 	
MINUTES & REPORTS		MOTIONS
Consent Calendar:	<ul style="list-style-type: none"> 12/20/18 Board Meeting Minutes. <ol style="list-style-type: none"> December’s Board Minutes were accepted with the following two corrections: <ol style="list-style-type: none"> In the section of the Minutes titled “Election of 2019 Officers,” the words “Chair” will be changed to “President” and “Vice Chair” to “Vice President, for the language to be consistent within the minutes and with the Bylaws. Removal of the asterisk next to Madelyn Carlson’s name to indicate that she attended the meeting in person rather than calling in. 	<ul style="list-style-type: none"> Motion by Les Stahlnecker to approve the Consent Calendar, which included the December 20th, 2018 Board minutes, with two corrections (please see box to the left). Seconded by Madelyn Carlson. Motion passed.
GCACH Report & Updates (GCACH Staff):	<ul style="list-style-type: none"> The GCACH Report provides great narratives on recent work and upcoming events. Staff asks the Board to read the report independently to see all of the information. Highlights of the GCACH Report include: <ol style="list-style-type: none"> At the most recent State of Reform conference for Washington State (January 10th), Executive Director DJ Wilson emphasized the social contract that all of us have to share wisdom and information and by doing this, build up trust. There is value in building up this social capital. Building trust has been one of the important aspects of GCACH work, exemplified by the upcoming ACEs campaign. Note about one correction to the GCACH Report: Governor Inslee has set aside \$90 million not \$900 million for a variety of Behavioral Health initiatives. The Board welcomed Rachael Guess who just joined GCACH staff as the Finance and Contracts Coordinator. GCACH made payments totaling \$628,998 on January 11th through the WAFE Portal For naloxone availability in the GCACH region, contact Everett Maroon at Blue Mountain Heart to Heart. The Practice Transformation Navigators have been refining the Toolkit and are working through the Milestone Reporting Schedule. Diane Halo is now the GCACH Opioid Resource Network Project Manager. She talked about the Medication First Model in Missouri, described in the GCACH Report. GCACH will be providing funding for LHIN leaders and active participants to attend conferences (such as the Paper Tigers Conference in June) 	

- 9. GCACH will provide funding to sponsor local events that align with GCACH’s strategic initiatives. This will expand GCACH’s ability to collaborate with organizations that we’re not already contracted with. The links to the sponsorship policy and application are in the GCACH Report.
- 10. Behavioral Health (BH) Providers moved into Fully Integrated Managed Care (IMC) on January 1, 2019, and billing managed care organizations (MCOs). Ask Diane about questions regarding the Provider Readiness Workgroup convenings.
- Local Health Improvement Network (LHIN) Tracker: The Board reviewed the LHIN Tracker with the deliverables for contracts. The Yakima County Health Care Coalition (The Yakima LHIN) has sent in the reports required for proof of financial stability and the others LHINs are still in progress with this step.
 - 1. Community Health Fund Tracker: The LHINs have selected their priorities for the Social Determinants of Health. The Blue Mountain Region Community Health Partnership is collecting consumer input with a survey. Kittitas County Health Network (the Kittitas LHIN) contract has been completed with a third-party administrator.
- Practice Transformation Status Tracker: The PT Navigators have added dates to the trackers and have split the organizations between them, with 22-24 each. The Practice Transformation Implementation Workplan (PTIW) is the change plan.
- WAFE Portal Tracker: The WAFE Portal tracker shows updates to payments in the portal. The next payment coming up will go to the BHO providers. The contingency fund was paid out to the organizations. GCACH received the budget from Lourdes. TCCH signed their contract.
- The BHO providers sent updated budgets to GCACH to include their spending on the newly received contingency funds. None of the providers spent the money on a consultant.
 - 1. Lessons Learned and Next Steps:
 - 1. GCACH was trying to allow the providers to determine the funding formula and provide input, however there was still confusion and disappointment among the providers.
 - 2. The smaller providers could have benefitted more from a different and more proactive plan, for example where they could apply for the funds for infrastructure and office costs to running their businesses.
 - 3. Best to have a formula and methodology for any allocations for the BHO providers. The Budget and Funds Flow Committee can develop a process for these goals.
 - 4. More Board members are needed on the Finance Committee. The Finance Committee will ask Julie Peterson for her participation.
 - 5. It was noted that there’s a need to identify which committees need more members and particularly for new board members to be aware of which committees they have the opportunity to join. Staff will send a list of committees for the board.

ACTION ITEMS

MOTIONS

<p>Year-to-Date (YTD) & December Financial Reports (Becky Kolln):</p>	<ul style="list-style-type: none"> • Becky Kolln, GCACH Director of Finance and Contracts, reviewed the YTD and December Financial Reports, which included: <ol style="list-style-type: none"> 1. Balance Sheet as of 1-2-19 2. Budget vs. Actuals FYE2018 3. December 2018 Statement of Activity (Detailed) 4. December 2018 Statement of Activity • Financials of note: <ol style="list-style-type: none"> 1. GCACH earned \$71,201.45 in interest from the Numerica Money Market. GCACH is interested in investing this money in smarter ways. When the CFOs from all 9 ACHs meet in February, investment of funds will be an agenda item. 2. Staff is proposing that funds from the IMC funding be used to establish an Opioid Network. 3. The Finance Committee recommended a pie chart to more easily view the financials. 4. The Amerigroup funds need to be rolled into the Community Health Fund. 	<ul style="list-style-type: none"> • Motion by GCACH Treasurer Brian Gibbons to accept the 2018 Year-to-Date (YTD) and December financial reports, which included the Balance Sheet, the Budget vs. Actuals 2018, and the December 2018 Statement of Activity. Seconded by Jorge Rivera. Motion passed.
<p>Revised 2019 Operational Budget (Becky Kolln, Carol Moser):</p>	<ul style="list-style-type: none"> • The Board discussed the Master 2019 Operational Budget spreadsheet. • When this budget was presented to the Board at the December 2018 meeting, the budget for “Marketing, outreach, Sponsorships of Community Events” within the Engagement category was for \$5,000. GCACH presented the wrong version of the 2019 Operational Budget, and is asking that this budget for the sponsorships for community events is \$30,000. No other changes to the budget are being requested. • This change to the budget had already been discussed with the Finance Committee. • Although this was not a big change to the budget percentage-wise, the Board did not consider it a burden to vote on this issue. <ol style="list-style-type: none"> 1. It is appreciated that the Finance Committee makes suggestions about what’s important to bring to the Board. 	<ul style="list-style-type: none"> • Motion by Brian Gibbons to approve the revised "Master 2019 Operational Budget," with a budget change of \$25,000 additional funds compared to the 2019 Operational Budget that the Board approved in December. The additional funds will be used to support community events that align with GCACH goals. Seconded by Madelyn Carlson. Motion passed.
<p>LHIN Contract (Becky Kolln, Rubén Peralta):</p>	<ul style="list-style-type: none"> • The Board reviewed the 2019 LHIN Contract (Final) document, the contractual document for GCACH and the Local Health Improvement Networks (LHINs). This document includes recitals (the purpose of the document and the relationship between the organizations), definitions, payment distribution and milestones, allowable costs, responsibilities of LHIN, responsibilities of GCACH and several other categories. 	

	<ul style="list-style-type: none"> The focus of the Board’s discussion was around the LHINs’ responsibilities for 2019 outlined in Exhibit “A” Scope of Work. There was concern that the volume of activities (which was increased from the LHINs’ scope of work in 2018) and the level of specificity of the activities could cause the following problems. <ol style="list-style-type: none"> Would take money away from being used directly to benefit from the community, and Make it difficult for some LHINs complete all of the deliverables. It was suggested that the number of activities be reduced (removed or combined) and that some of them could be defined more broadly, so that the spirit or purpose of the activity could be completed in a way that made the most of each LHIN’s community and organizational resources. After a lengthy discussion about the Scope of Work including workforce needs, teleconferencing, budgeting, social media, and timelines for the contract, the Board asked staff to discuss the contract with LHIN leaders at their next LHIN quarterly meeting, February 15. Their feedback would be brought back to the February GCACH Board meeting, and factored into the contract. 	
<p>Conflict of Interest Statement (Carol Moser):</p>	<ul style="list-style-type: none"> The Board is required to review the Conflict of Interest Policy annually, the same policy that was originally adopted in June 2016. A printed copy of the policy was passed around the room for Board members to sign the document, and it is required for all Board members to sign each year as a deliverable for GCACH to the HCA. At the beginning of every Board meeting, it is part of the agenda to review the Attestation of Conflict of Interest. 	
<p>Bylaws (Carol Moser):</p>	<ul style="list-style-type: none"> The Board reviewed the Bylaws of The Greater Columbia Accountable Community of Health, adopted in November 2015 and revised in December 2017. The bylaws are the guiding principles of the organization, and this document is part of the Board Orientation Packet. If the Board has a discussion that they don’t like some of the rules of the Bylaws, they can be changed through a Board process. Due to lower attendance than acceptable in the Bylaws (please see below), the Board motioned to remove John Sinclair from the Board as the member representing the Public Safety sector. This leaves a vacancy for this sector, but this sector has yet to convene to fill this spot a person who can attend more meetings. The pertinent language from the Bylaws (within Article IV) is as follows: “Section 10. Removal from Office. Directors are expected to regularly attend Board meetings; however, they shall notify the President or Executive Director with appropriate notice if they are not able to attend such meeting. Absences from more than one-third (1/3) of the regularly scheduled meetings in any given calendar year may be 	<ul style="list-style-type: none"> Motion by Sandra Suarez to remove John Sinclair from the Board member position representing the Public Safety sector based on guidance from the GCACH Bylaws regarding attendance and to find a new representative for this sector. Seconded by Brian Gibbons. Motion passed.

	grounds for removal. Any Director may be removed by a sixty percent (60%) vote of the Board, such vote being held at an annual, regular or special meeting of the Board.”	
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DISCUSSION ITEMS

Practice Transformation Toolkit/Workbook (Practice Transformation Team):	<ul style="list-style-type: none"> • Staff members reviewed the most recent version of the Practice Transformation Implementation and Reporting Toolkit with the Board. • This document walks you through all of the Practice Transformation milestones and the type of reporting for each milestone: Selection, Data and/or Narrative. Some of the milestones has a Key Question section which facilitates discussion among the QI team. • The Toolkit provides a path for the providers to follow. We’re not expecting certification, but rather that they come to understand how to implement value-based care under the PCMH model. • GCACH has turned the Toolkit over to CSI and will be working with them to develop the reporting platform. • The Toolkit provides decision-making tools for shared decision making. • The Learning Collaborative Curriculum follows the milestones.
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Sustainability Discussion (Carol Moser, Wes Luckey):	<ul style="list-style-type: none"> • Sustainability of Greater Columbia Accountable Community of Health beyond the Medicaid Waiver will take intentional discussions and work, therefore the discussion at the Board meeting was about how, when and where to begin. The Board decided to have a retreat to begin these talks. • Carol passed out a timeframe for GCACH work (not included in the Board packet) to get an idea of the work coming up in the next few months.
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Additional Discussions:	<ul style="list-style-type: none"> • Rubén updated the Board on the ACEs Campaign. The Communications Committee met the day before the Board meeting and they directed him to develop a taskforce for the campaign and to develop a more detailed framework to work from. • Dan Ferguson complimented Carol for her great representation of GCACH at the State of Reform, asking great questions at the right times. • Dan Ferguson noted that on March 25th to 27th at SeaTac there will be a rural health conference and on the afternoon of the 27th there will be a specific workforce committee meeting. Click here for the conference website.
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ADJOURNMENT

Adjournment:	<ul style="list-style-type: none"> • Meeting adjourned 2:29 p.m. Minutes taken by Aisling G. Fernandez.
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Thank you for your time and engagement with Greater Columbia Accountable Community of Health!

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:

Thursday, February 21st Thursday, March 21st Thursday, April 18th Thursday, May 16th Thursday, June 20th Thursday, July 18th
Thursday, August 15th Thursday, September 19th Thursday, October 17th Thursday, November 21st Thursday, December 19th