

# Greater Columbia ACH

## Director's Report

March 16, 2017



## 1 NEW PROGRAM MANAGER, WES LUCKEY, HIRED!

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We are delighted to announce that GCACH has a Program Manager, Wes Luckey! Wes has been very actively engaged in healthcare as a business intelligence analyst, the Director of the Navigator In-Person Assister program, a senior analyst in market and competitive intelligence for Group Health Cooperative, and the Director of the Medical Central Service Company/Mid-Columbia Surgical Suite. Wes was the co-chair of the Benton-Franklin Community Health Alliance's Health Access Team for several years, and has been actively engaged in GCACH meetings and committees since 2014.

It is to our advantage that Wes will be able to hit the ground running given his knowledge of GCACH, its priorities, his data and analytics background, and the vast amount of work ahead. Please welcome him aboard our GCACH train!

## 2 WORLD CAFÉ SUCCESSFUL COMMUNITY ENGAGEMENT TOOL

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A Public Forum on March 11<sup>th</sup> at United Way proved a successful test of GCACH's community engagement plan. Although the Community Survey was not quite ready for prime time, the pre-meeting World Café gave attendees the opportunity to learn about oral health initiatives, Nurse-Family Partnership programs, Diabetes Self-Management, Women, Infant and Child programs, Emergency Department Diversion, hot-spotting, Healthy Community Design, Palliative Care, a new grief counseling service being offered at our high schools, ACES, and our SIM project, the Readmission Avoidance Pilot and engage with Nathan Johnson, Chief Policy Officer of the Health Care Authority, MaryAnne Lindeblad, WA State Medicaid Director, Mark Provence, Healthier WA Medicaid Transformation Manager, Lena Nachand, HCA Transformation Specialist, Elizabeth Watanabe, Tribal Liaison, Healthier WA, Kennedy Soileau, Health Transformation Communications Manager, Bea Rector, Home Care Services Division of DSHS, and Shawn O'Neill. Approximately 40 people from the community were in attendance, including two of our Board members, Dan Ferguson and Lori Brown. The HCA's presentation was informative, and the audience seemed truly appreciate of the state's attempts to improve our system of care.

## 3 SUB-REGIONAL MEETING WITH WHITMAN COUNTY HEALTH NETWORK

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On March 8<sup>th</sup>, I traveled to Pullman to meet with the Whitman County Health Network. While the network consists primarily of provider organizations like hospitals and behavioral health organizations, they were interested in forming a sub-regional alliance of the four eastern counties to be better positioned within the GCACH. Jac Davies from the Critical Access Hospital Network presented a power point highlighting the main features of the Medicaid Transformation Demonstration, and then led the discussion regarding how the sub-region could work together on common goals.

I provided the Network with the GCACH overview sheet, and the newly released ACH indicators from the Washington Health Alliance (Common Measure Set.)

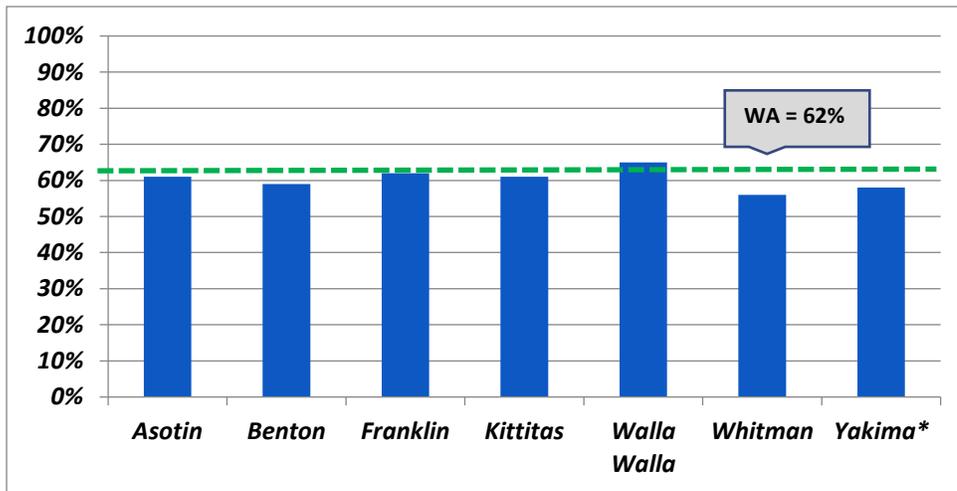
## 4 GREATER COLUMBIA ACH INDICATORS

Dr. Patrick Jones, our fearless facilitator, dove into the latest WHA Community Check-up data and developed a series of indicators for GCACH where we scored lower than the WA State average in 2016. I'm including a few of them in the Director's report.

### Greater Columbia ACH Indicators Scoring Lower than WA Average in 2016 for Medicaid Population

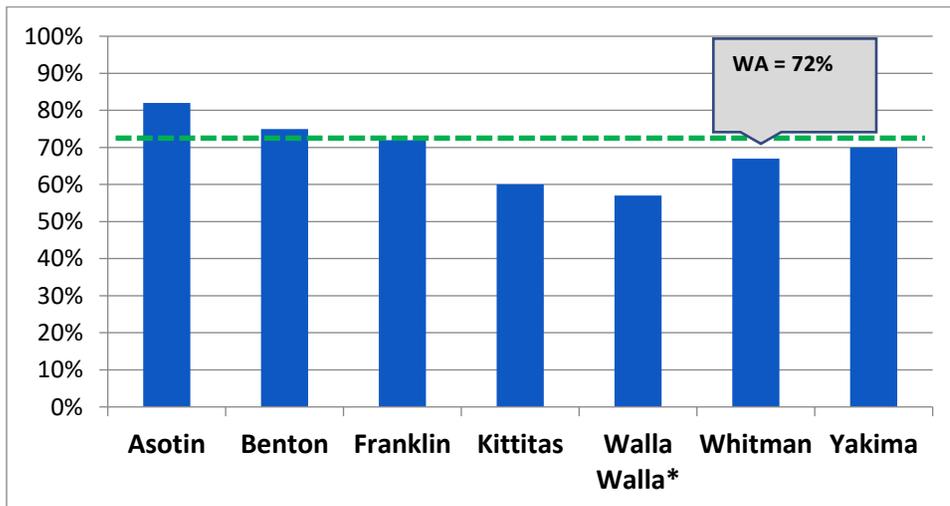
#### Chronic Disease Management

##### 1. Blood sugar (HbA1c) testing for people with diabetes



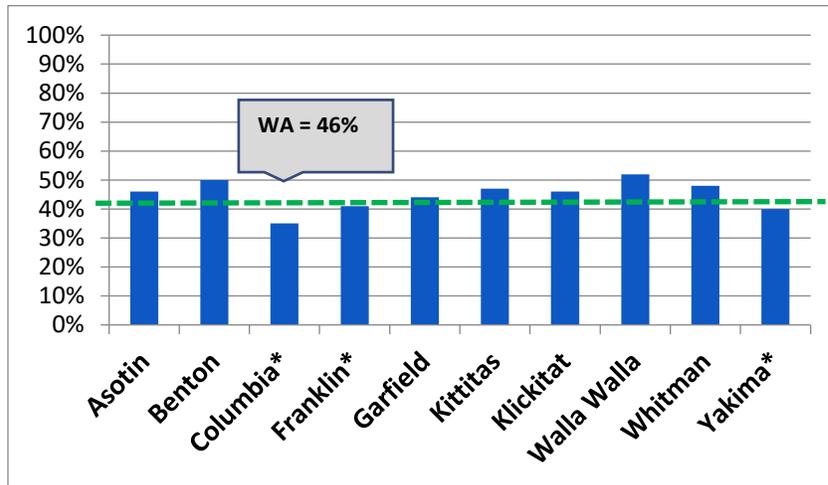
Note: Definitions are available from the Washington Health Alliance document "Technical Specifications for Community Checkup Measures."

##### 2. Kidney disease screening for people with diabetes

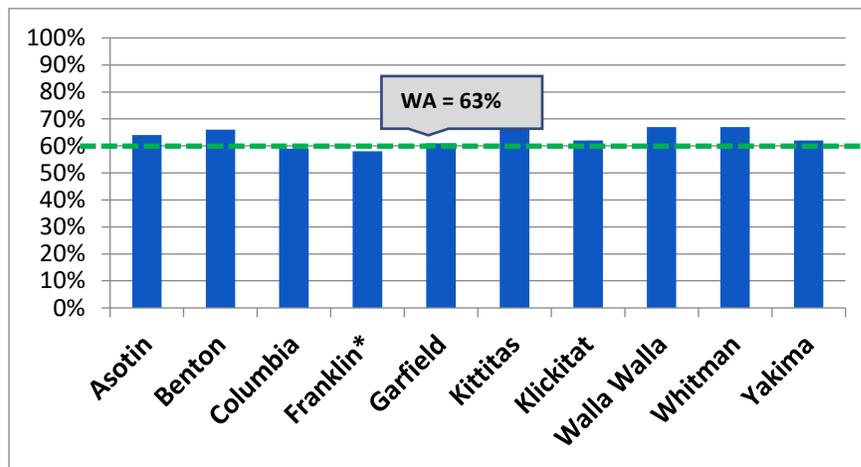


#### Behavioral Health

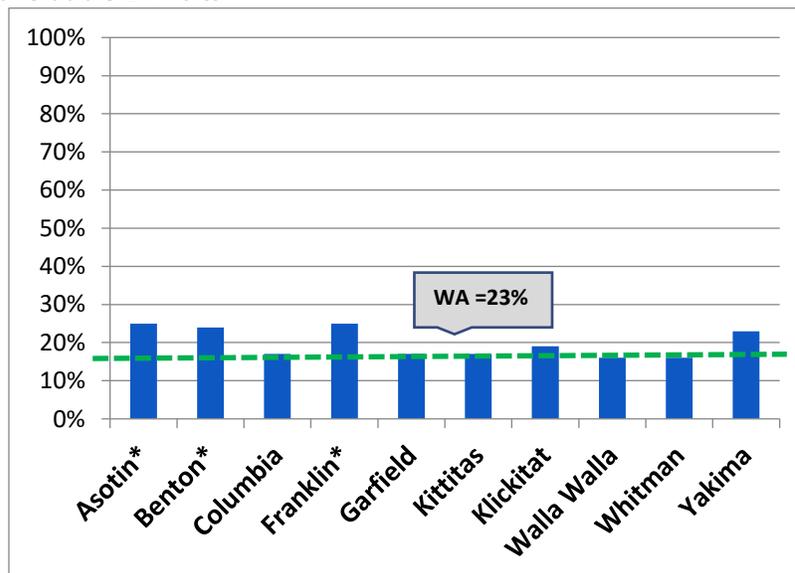
### 3. Mental health services for adults



### 4. Mental health services for children



### 5. Potentially avoidable ER visits



## 5 CERTIFICATION PROCESS FOR ACCOUNTABLE COMMUNITIES OF HEALTH

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Each ACH is required to demonstrate compliance with expectations set forth by the state and the Centers for Medicare and Medicaid Services through a certification process. Certification criteria are established by the state in alignment with the demonstration [Special Terms and Conditions](#). Each ACH will submit both phases of certification information to the state within the required time frames. The state will review and approve certification prior to distribution of Project Design funds. Each ACH must complete both phases of certification and receive approval from the state before the state will consider its Project Plan application. The certification process, scoring criteria and subsequent awarded funding amount is at the sole discretion of the WA State HCA.

Electronic copies must be submitted by 3pm on May 8, 2017 for phase 1.

## 6 ACH CONVENING MARCH 13-14

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Wes Luckey and I attended the ACH quarterly convening on March 13-14 in Spokane. Some of the major agenda items included a thorough review of the certification process, practical process planning, and ACH data considerations. Our table discussions emphasized the need for strong coordination and highly effective communication between our tiers of organizational structure (Leadership Council and Board of Directors). Bi-directional communication is critical in order for everyone to stay on the same page, whether between the LC and Board, or our internal and external partners that we serve.

In the case studies that we dissected, the majority of issues stemmed around lack of key partner engagement, a lack of clarity of roles, responsibilities, trust, and accountability, lack of mechanisms to obtain the correct data, and a lack of dissemination of critical information.

In other case studies, major problems arose when the Leadership Councils forwarded recommendations to the Board for consideration which was essentially ignored, or groups worked outside of the established process to advance their own agendas.

## 7 CAC IS THE PLACE!

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After a month of researching options, and checking out more possibilities, GCACH staff will be moving to 720 W Court Street in Pasco, the home of Community Action Connections. The move will take place on St. Patrick's Day, so with a little luck of the Irish, it will be a smooth and happy transition!

## 8 GCACH IS A 501(c)3!!

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On March 7<sup>th</sup>, GCACH received the "official" letter from the IRS that we are a 501(c)3 with a public charity status! This means that we are qualified to receive tax deductible contributions, can access great deals through Tech Soup, and have bragging rights that we are the 1<sup>st</sup> of the ACHs to attain our charitable status. Go team!

