



## Board of Directors

Thursday, April 21st, 2016

12-2:30 PM Meeting

[Greater Columbia Behavioral Health](#)

101 N. Edison Street, Kennewick, WA 99336

### Minutes

Board Members Present	Rhonda Hauff, Madelyn Carlson, John Sinclair, Caitlin Safford, Les Stahlnecker, Kevin Bouchey, Lori Brown, Eddie Miles, Martin Valadez, John Sinclair	
Backbone Support	Carol Moser, Aisling Fernandez, Patrick Jones, Julie LaPierre	
Guests	Bethany Osgood, Andrea Tull, Lena Nachand, <del>Marey</del> , Brittany (Guest), Renee Biles	
Special Thanks	•	
TOPIC	NOTES	ACTIONS
Welcome & Introductions	<ul style="list-style-type: none"> <li>Patrick led introductions. He asked everyone to introduce themselves</li> </ul>	•
Action: Approval of Minutes	<ul style="list-style-type: none"> <li>April 21, 2016 GCACH Board minutes approved</li> </ul>	<ul style="list-style-type: none"> <li>Motion by John Sinclair to approve the minutes. Seconded by Madelyn Carlson</li> </ul>
Leadership Council Report (Patrick)	<ul style="list-style-type: none"> <li>Patrick summarized the work that happened at the LC meeting this day.               <ul style="list-style-type: none"> <li>The LC broke into five small cross-priority workgroup groups. The purpose of these groups was to review and add to the work that Deb Gauck had done to date bringing all of the comments, minutes and work of the 5 Priority Workgroups into one document. The previous work of the workgroups was called “influencing factors” and these influencing factors were re-categorized by Deb into “drivers” as defined by the Robert Wood Johnson Foundation’s framework called the Culture of Health. Each small group read out loud the definition of each of the 12 drivers, then reviewed the influencing factors to see</li> </ul> </li> </ul>	•



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	<p>if those influencing factors were correctly categorized within the drivers and to discuss what was missing from each driver category.</p>	
<p>Communications Committee (Rhonda)</p>	<ul style="list-style-type: none"> <li>• There was a discussion on how and when we roll out what the GCACH is and get engagement with consumers &amp; the larger community whether at an individual level or at a larger community level. There are multiple ways to approach local community leaders, policymakers, and other interested parties.             <ul style="list-style-type: none"> <li>○ John said that one idea is to reach out to individuals in the community that kids look up to such as athletes, nurses, etc. We can look at the media outlets and send out messages on nutrition or exercise on a regular interval.</li> <li>○ Rotary circuit is one idea.</li> <li>○ Carol: how do we engage leaders, military and other employers that require physical fitness?</li> <li>○ Martin: have to give youth information about not only what is healthy but WHY we need to be healthy. We could do some awareness that we exist so when we go out and try to engage with folks they've heard of the GCACH.</li> <li>○ John: multiple redundant messaging is important.</li> <li>○ Create a speakers' bureau. First step to find paper and news media and provide a list of people on the board so media can start asking us questions.</li> <li>○ Lori: We need something more concrete</li> <li>○ Les: We need fairly concise, consistent messaging. "This is what our goal is." Would rather not give the press a list of everyone's names. Prefer to have 1-2 people on the communications committee unless this committee shares messaging with the board.</li> <li>○ Action Item: Aisling will resend org chart and overview sheet to Board</li> <li>○ Lena brought up NOHLA. Product is coming. They do evaluation and suggestions for community engagement.</li> <li>○ Martin: start with public awareness</li> <li>○ Rhonda: there is work on the newsletter</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>



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	<ul style="list-style-type: none"> <li>○ Carol: mentioned that we could contract with someone to create a communications plan.</li> <li>○ Martin said he looks to the Community Engagement Task Force for recommendations</li> </ul>	
<p>Director's Report (Carol Moser)</p>	<ul style="list-style-type: none"> <li>● We are using the RWJF COH framework to drive the RHIP</li> <li>● We recently received the Health Management Associates (HMA) recommendations/guidance and the role ACHs should play in terms of the Medicaid Waiver. It has been formalized that ACHs will have the coordinating role for the projects on the toolkit/menu. HMA recommends MOUs or letters of understanding with key partners for community collaboration and stakeholder engagement. We need to show we have the financial capacity. We could hire a financial management firm. We need to have a policy in place for clear communication about finances.</li> <li>● Medicaid Waiver Goals: Carol reviewed items 1-4 (the stated goals for the Medicaid Waiver)             <ul style="list-style-type: none"> <li>○ During the Leadership Council meeting, we heard from Stan Ledington that the DOH is focusing on Medicaid Waiver Domain #2: Care Delivery Redesign</li> <li>○ These 4 goals are meant to emphasize delivery system transformation and ROI.</li> </ul> </li> <li>● The draft toolkit is now on the website: <a href="#">Framework for the Project Toolkit</a></li> <li>● Right now it's fee for service, rather than paying for a population. Need to transform how we pay for services if we're going to change the system.</li> <li>● Example of integration in Yakima that Carol got to see in person. Pediatrician and behavioral health specialist worked together to come up with a care plan for a child at the same time.</li> </ul>	<ul style="list-style-type: none"> <li>●</li> </ul>
<p>Review Work Plan Schedule &amp; Projected Budget (Carol)</p>	<ul style="list-style-type: none"> <li>● Carol reviewed the timeline and budget             <ul style="list-style-type: none"> <li>○ Based on recent meetings and communications with the HCA (and indirectly with HMA) the GCACH Board doesn't seem to have a choice about whether or not to become independent. This may take different forms and may be done at different times. There was a discussion around staff for the independent</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>● John moved to approve the proposed budget/estimate. Rhonda and Martin</li> </ul>



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	<p>GCACH. Current backbone employees could be staff or could contract with staff from another organization</p> <ul style="list-style-type: none"> <li>○ Madelyn &amp; Eddie gave examples of structure of contracting with staff from another organization</li> <li>○ At the next meeting, the Board plans to have a more robust discussion around incorporation and staff structure</li> </ul> <ul style="list-style-type: none"> <li>● Caitlin: Everyone should gain a better understanding of what the waiver means for the GCACH. Finally getting to a place where we have more information about timelines, funds flow, and type of infrastructure. There’s been a lot of emphasis on accelerating value-based purchasing. Everyone needs to really understand what value-based purchasing means and what it means under the waiver.             <ul style="list-style-type: none"> <li>○ CMS has a huge focus on value-based purchasing.</li> </ul> </li> <li>● John: Made a motion to accept this budget and send to finance committee (currently Caitlin, Martin and Brian). Need more granularity.             <ul style="list-style-type: none"> <li>○ Les asked Carol to confirm that this is a concept/forecast but not a commitment at this time and Carol agreed.</li> <li>○ Need to know more about what we have and don’t have and what we will need (grant writing for example, and HCA money cannot be used for grant writing).</li> </ul> </li> </ul>	<p>seconded. Kevin abstained</p>
<p>MCO &amp; Business Sector Representation</p>	<ul style="list-style-type: none"> <li>● Discussion of the status of 2 sector Board positions: Business and MCO.</li> <li>● Business Sector: Still looking for a business representative.             <ul style="list-style-type: none"> <li>○ Rhonda: we could use more minority representation.</li> <li>○ John also mentioned that agriculture is a major driver here. Many folks work in agriculture who will be assisted by the work of the GCACH, might be helpful to have someone from the ag sector for the business sector.</li> </ul> </li> <li>● MCO Sector discussion:             <ul style="list-style-type: none"> <li>○ Status going in to the meeting on April 21<sup>st</sup>:                 <ul style="list-style-type: none"> <li>▪ As of now, Caitlin is still the representative, but we need to talk about how we move forward</li> </ul> </li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>● John made a motion to accept Caitlin’s resignation. Seconded by Madelyn. Motion approved.</li> </ul>



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	<ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>▪ Caitlin as an individual was elected Secretary and has been integral to our work and discussions</li> </ul> </li> <li>○ Discussion to inform action:           <ul style="list-style-type: none"> <li>▪ The MCOs recommended that they feel it's best for Coordinated Care fill the rest of the term until June 30<sup>th</sup>.</li> <li>▪ John: MCOs are such an integral part of this work, having more than one MCO rep at our meetings may be ok. Moves to expand the Board by one position.               <ul style="list-style-type: none"> <li>• Madelyn: appreciates the recommendation from the MCOs. Madelyn doesn't want to expand the board.</li> <li>• Rhonda agrees with Madelyn not to change the board structure.</li> </ul> </li> <li>▪ Carol: How do we look at the timing with the bylaws vs the timing of the MCOs?</li> <li>▪ Rhonda: Doesn't want to amend the bylaws to accommodate a sector</li> <li>▪ John: have to make the change and vote in a new secretary</li> <li>▪ MCOs may want to meet and change their timeline</li> </ul> </li> <li>○ Caitlin: Resigning as herself. Board needs to accept.           <ul style="list-style-type: none"> <li>▪ Motion to accept Caitlin's resignation (John, Madelyn)</li> </ul> </li> <li>○ Motion to have Andrea Tull be the new MCO rep until the end of June. A representative from United Healthcare will fill in the Governing Board slot through the end of the year. (move by John &amp; second by Les)</li> <li>○ Goal that is January 1<sup>st</sup> all Governing Board members will be on the same calendar year.</li> <li>○ Rhonda moved and Les seconded the motion for John Sinclair to be the Secretary through the end of 2016.</li> </ul>	<ul style="list-style-type: none"> <li>• John made a motion to accept nomination of Andrea Tull to the Board position for the MCO sector. Seconded by Madelyn. Motion approved.</li> <li>• Rhonda made a motion for John Sinclair to be Secretary. Seconded by Les. Motion approved.</li> </ul>
<p>Conflict of Interest Policy: Action</p>	<ul style="list-style-type: none"> <li>• John motioned to approve as amended by Keith Nagayama. Madelyn seconded. Motion approved.</li> <li>• Request to bring it back next month in final form for signatures</li> </ul>	<ul style="list-style-type: none"> <li>• John motioned to approve the COI policy as amended by</li> </ul>



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		Keith Nagayama. Madelyn seconded. Motion approved.
Information Requests Policy: Action	<ul style="list-style-type: none"> <li>John moved to approve as amended by Aisling. Seconded by Madelyn. Motion approved.</li> </ul>	<ul style="list-style-type: none"> <li>John moved to approve as amended by Aisling. Seconded by Madelyn. Motion approved.</li> </ul>
501(c)3 Discussion	<ul style="list-style-type: none"> <li>Martin thought we should save this discussion for next time and put it at the top of the agenda</li> <li>Learn more about the model that Madelyn was talking about. She can give a short presentation on this model.</li> <li>Could get advice from an attorney (possibly Keith Nagayama) who could speak to the differences between different legal entity options. We'd have to ask the HCA if that would be covered by technical assistance (TA) funds or we can pay for it.</li> <li>Cost of infrastructure.</li> <li>Cost compared to the scale of work. Interested in knowing the budget of win211 vs GCACH.</li> <li>Madelyn says that win211 has 2-3 times this proposed budget</li> <li>Because of the scale of the work, we may or may not be able to contract out all the work</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>



<p>Transformation Project Advisory Committee formation discussion (Medicaid Waiver)</p>	<ul style="list-style-type: none"> <li>• For the Medicaid waiver, looking for a committee to form around the Medicaid waiver. We don't have a lot more info at this time. Could be the LC. Not sure what the other ACHs have done. At some point we have to discuss the Medicaid waiver project.</li> <li>• Caitlin: the senate allocated dollars based on projections of what they think they will get through next June. Could potentially come up again next year. Gave HCA expenditure authority.</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>
<p>CMMI Overview and Discussion</p>	<ul style="list-style-type: none"> <li>• Discussion withdrawn</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>
<p>Updates between Board Meetings</p>	<ul style="list-style-type: none"> <li>• <b>May 3, 2016:</b> The <a href="#">video</a> from our April 26 webinar is now available!</li> <li>• <a href="#">Framework for the Project Toolkit</a></li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>
<p>Adjournment</p>	<ul style="list-style-type: none"> <li>• The Board of Directors meeting was adjourned around 2:30 PM.</li> </ul>	<ul style="list-style-type: none"> <li>•</li> </ul>
<p>2016 Meeting Schedule</p>	<p>The GCACH Leadership Council meets the Third Thursday of the month.</p> <ul style="list-style-type: none"> <li>• Location: Greater Columbia Behavioral Health, 101 N Edison St, Kennewick</li> <li>• Time: Leadership Council: 9-11:30</li> <li>• Dates:             <ul style="list-style-type: none"> <li>○ Thursday, May 19th, 2016</li> <li>○ Thursday, June 16th, 2016</li> <li>○ Thursday, July 21st, 2016</li> <li>○ Thursday, August 18th, 2016</li> <li>○ Thursday, September 15th, 2016</li> <li>○ Thursday, October 20th, 2016</li> <li>○ Thursday, November 17th, 2016</li> </ul> </li> </ul>	



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○ Thursday, December 15th, 2016

Thank you for your time and engagement with the Greater Columbia Accountable Community of Health!