

ACH Regions Map



Vision: The Greater Columbia Region is a vibrant, healthy community in which all individuals, regardless of their circumstances, have the ability to achieve their highest potential.

Mission: The mission of the Greater Columbia ACH is to advance the health of our population by decreasing health disparities, improving efficiency of health care delivery, and empowering individuals and communities through collaboration, innovation, and engagement.

Greater Columbia ACH

Director's Report

September 24, 2015

1 HEALTHIER WASHINGTON: BETTER HEALTH, BETTER CARE, LOWER COSTS

The Healthier Washington project builds the capacity to move health care purchasing from volume to value, improve the health for state residents and deliver coordinated whole-person care. Through focused and collaborative engagement of the public and private sectors, the HW project will achieve better health, better care and lower costs for at least 80% of state residents. Under this project, targeted investments are made in the following:

Community empowerment and accountability	ACHs; regionally organized to align the activity and investments of diverse sectors-providers.
Practice transformation support	A support hub will support providers across the state to effectively coordinate care, increase capacity and benefit from value-based reimbursement strategies.
Payment redesign	In partnership with purchasers, providers and payers, WA will leverage its purchasing power to be the first mover in shifting 80% of the health care market from traditional fee-for-service to integrated, value-based payment models.
Analytics, Interoperability and Measurement (AIM)	New analytical infrastructure for monitoring and reporting on health system performance will support broad deployment of common performance measures to guide health care purchasing.
Project management	Implementation will be coordinated through a public-private leadership council with a dedicated interagency team and legislative oversight.

2 ACH MEDICAID PROFILE

The Greater Columbia Community of Health started with six Counties in June of 2014. In November, the HCA authority announced that the new regional service areas of the ACHs would be the same as the Regional Support Network. This added 3 more Counties to the Greater Columbia ACH: Kittitas, Yakima, and Whitman. In August of 2015 the HCA named Klickitat as a "Transitional" County and moved them into the GC ACH. We officially have 10 Counties and 1 Tribal nation, the Yakamas in our ACH. Whitman has filed a formal letter with the HCA requesting that they move to the Spokane ACH. Here is what the Medicaid population looks like for our area.¹ GC ACH has 19.7% of the total Medicaid population in Washington State.

Medicaid Population	Adult Medicaid (19 & over)	Youth Medicaid (under 19)	Total
Asotin	3,908	2,721	6,629
Benton	26,515	28,760	55,275
Columbia	746	455	1,201
Franklin	12,715	22,119	34,834
Garfield	331	272	603
Kittitas	5,772	4,006	9,778
Klickitat	3,597	2,773	6,370
Walla Walla	8,813	8,110	16,923
Whitman	4,705	2,948	7,653
Yakima	50,869	62,456	113,325
Total	117,971	134,620	252,591
Washington State			1,281,000

3 GOVERNING BOARD SECTOR REPRESENTATION

The Leadership Council (LC) has been the driving force behind ACH activities. They have been meeting monthly since July 25, 2014, and the meetings have been held in Walla Walla, Kennewick, and Yakima. Membership has grown from 21 participants representing 18 agencies and organizations to 165 members representing over 80 agencies. The LC determined the Governing Board representation based on the HCA's strong focus on the social determinants of health. The following Sectors are currently represented on the GC ACH Governing Board with the Consumer position yet to be determined.

Governing Board Director	Sector	Organization
Martha Lanman	Public Health	Columbia County Public Health
Lane Savitch	Hospitals	Kadlec Regional Medical Center
Brian Gibbons	Providers	Sunnyside Hospital
Ed Thornbrugh	Behavioral Health	Comprehensive Mental Health
Darlene Darnell	CBOs/FBOs/Food Systems	Catholic Charities of Yakima
Lori Brown	Social Services	ALTC
Kevin Bouchey	Local Government	Yakima County
Les Stahlnecker	K-12 Education	ESD 123
Carrie Green	Philanthropy	3 Rivers Community Foundation
Caitlin Safford	Managed Care Organizations	Coordinated Care
Rhonda Hauff	Housing	Yakima Neighborhood Health Services
Mike Gempler	Business	WA Growers League
Frank Mesplie	Tribes	Yakama Indian Nation
John Sinclair	Public Safety	Kittitas Valley Fire & Rescue
Madelyn Carlson	Transportation	People for People
Martin Valadez	FQHCs	Tri-Cities Community Health
TBD	Consumer Representative	TBD

4 PRACTICE TRANSFORMATION HUB

The purpose of the Practice Transformation Support Hub is to accelerate regional and statewide health improvement activities that strengthen capacity, improve health outcomes, and increase

the overall health of the community. The Hub will support local quality improvement efforts by connecting healthcare providers with tools, training, and hands-on technical assistance to advance whole person care. On 9/14/15 the Practice Transformation Hub Team came to Kennewick to listen to participants' ideas for Hub services and priorities. The Hub concept is based on principles of an extension service delivery model to support the ACHs and providers. They offered four (4) listening sessions to get our input on: Behavioral health integration, How to support providers' move from volume-based to value-based care payment, How to help build broader community linkages, and Extension center design ideas.

5 AIM INITIATIVE

The State is investing heavily in developing measures that will ensure accountability to the state and to help ACHs measure their progress in improving population health. Three ACH leaders including Carol Moser are serving on the committee to help guide the contractor (CORE) to make sure that there is flexibility among the ACHs to reflect local priorities, benchmarks, and key indicators.

6 MEDICAID TRANSFORMATION WAIVER

On Wednesday, Sept. 9, the Health Care Authority received notice from the Centers for Medicare and Medicaid Services (CMS) that it had completed its preliminary review of Washington's Medicaid Transformation Waiver application.

If approved by the federal government, the waiver will give Medicaid the flexibility to transform the health delivery system for Medicaid beneficiaries and will help accelerate the state's Healthier Washington efforts to improve health care while limiting cost growth.

The state's application is now available for comment on the federal CMS website. CMS will accept public comments on its website until 11 p.m. Friday, Oct. 9, 2015.

After the federal public comment period the HCA and CMS will begin negotiations that are anticipated to extend over several months. During that time, the state will continue to work with its partners and stakeholders to develop the proposal.

The Greater Columbia ACH weighed in with comments gathered from Governing Board meetings, conversations with specific ACH members, and from a public meeting on 8/4/2015 where several ACH members made comments.

7 BYLAWS

The Bylaws committee was established on June 18, 2015 to be a Standing Committee of the Governing Board. They have developed a draft set of Bylaws that has been reviewed by the subcommittee twice, by the ACH Technical Advisory Team, Larry Thompson, and will be reviewed by the Leadership Council and GB on September 24th. All ACHs have been given \$5,600 in technical support, and these funds can be used for legal, financial, and management assistance.

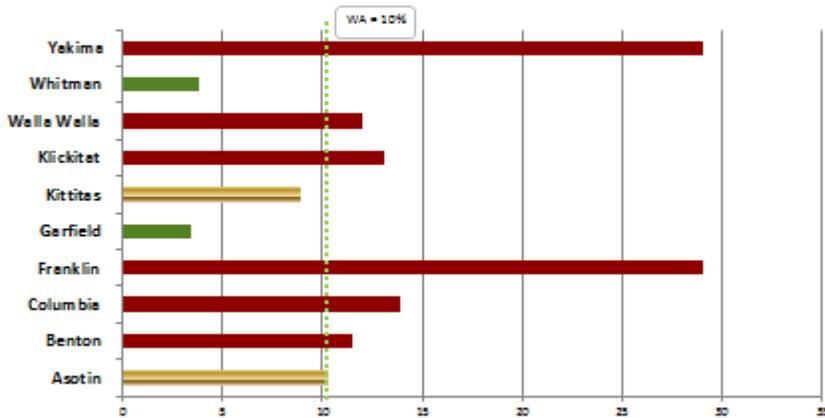
Governance Structure and Administrative Capacity	Health Improvement and Measurement Planning	Health and Delivery System Transformation
Develop and Refine Governing Body and Backbone Capacity	Develop Regional Health Improvement Plan (RHIP)	Implement initial health improvement plan based on interventions, strategies and board approved criteria
Develop Structure for Funding Pass Through in Partnership with the State	Serve a coordinating role between ACH Membership and State for Analytics, ACH Measure Set and Alignment or regional priorities with State measures	Assist State in Development of Regional Linkage with the Practice Transformation Hub
Implement Communication Plan for Transparency and Awareness		Coordinate with Regional and State Entities for integration of physical and behavioral health
Explore Sustainability Planning – including savings and reinvestment strategy		

10 RETREAT PRIORITIES

Determinants of Health

Share of Population 25+ w/out a High School Degree (or equivalency): '09-13 (%)

■ start something big



Census, American Community Survey Table S1802
 Red = statistically above (at 90% confidence level) WA
 Green = statistically below WA

The joint retreat of the Leadership Council and Governing Board on August 20th confirmed the priorities that were identified in the December retreat; Obesity/Diabetes, Care Coordination, and Behavioral Health. A new determinant of health, Population 18-24 w/out a High School Degree emerged, however. High School education is the largest contributor to health status according to a new CDC study. How do we address this priority in the context of population health?