

Board of Directors

October 8, 2018 1:00 pm to 3:00 pm

1. Approve Agenda



2. Consent Agenda

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1	Draft Minutes September 10, 2018 Board Meeting*	2-3
2	MTP Payment Report	4-5
3	Opioid Summit Agenda (please see separate handout)	6
5	Executive Director's Report	7-9



^{*} Several Board members have identified errors in the minutes related to attendees. These are being addressed in the revised version.

Upcoming Important Dates

- 1. 2018 Opioid Summit, October 17, 12:00 pm 4:30 pm, Suquamish Clearwater Resort (*Open to the public*)
- 2. Behavioral Health Transformation: Preparing for Integrated Managed Care, November 1, 10:00 am 4:00 pm, Little Creek Casino Resort (Behavioral Health Agencies)*
- **3. Board Retreat**, November 2, 11:00 am 4:30 pm, Port Gamble S'Klallam Tribe (*Board Members and Alternates*)
- **4. Behavioral Health Transformation: Value-Based Payment Preparation**, November 14, 10:00 am 4:00 pm, Little Creek Casino Resort (*Behavioral Health Agencies*)*

^{*} Sponsored by United Healthcare, Molina and Amerigroup; Organized by the Practice Transformation Support Hub and Department of Health, in collaboration with the Cascade Pacific Action Alliance



Informational item to add to the Directors Report

- Next round of the Shared domain 1 payments, also called *Intergovernmental Transfer (IGT) Payment* is due November 7.
- The amount this round for OCH is \$1,111,125. The total amount for all ACHs is \$27,778,125.
- Decision from March Board meeting: The OCH Board of Directors authorizes the executive director to execute any transactions that are needed under the IGT strategy.
- At the start of the November 2 Board Retreat, we will have one hour protected for Board business



On-Site Customized Integrated Billing Support Project

- 1. Discovery Behavioral Health Services (BHA)
- 2. Kitsap Mental Health Services (BHA)
- 3. Peninsula Behavioral Health Services (BHA)
- 4. Olympic Personal Growth (SUD)
- 5. Reflections Counseling Services Group (SUD)
- 6. West Sound Treatment Services (SUD)
- 7. Cedar Grove Counseling (SUD)
- 8. Kitsap Recovery Center (SUD)
- 9. Beacon of Hope/Safe Harbor (SUD)
- 10. True Star Behavioral Health (SUD)

Provided by carry-over Department of Health funds passed through the Practice Transformation Support Hub



3. Draft 2019 Budget

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5	Draft 2019 Budget	10
6	Draft 2019 Budget Narrative	11-12

Purpose of this agenda item

The Finance Committee reviewed this budget twice and recommended it go to the Board for discussion and input at the October Board meeting.



Indian Health Care Provider Medicaid Transformation Project Update

Lena Nachand, MPH
Tribal Liaison for Medicaid Transformation
Washington Health Care Authority



MTP IHCP Projects Plan

An overview of the Indian Health Care Provider (IHCP) projects and how they fit within the Medicaid Transformation Project (MTP)



Medicaid Transformation Project STCs

Objectives

- ► Integrate physical and behavioral health purchasing and service delivery to better meet whole person needs
- Convert 90 percent of Medicaid provider payments to reward outcomes instead of volume*
- Support provider capacity to adopt new payment and care models
- ▶ Implement population health strategies that improve health equity





Indian Health Care Provider Protocol (Attachment H)

- Objectives
 - ► Collaborative Medicaid Transformation
 - ► IHCP Health Systems and Capacity
 - Workforce Capacity and Innovation
 - > Health Systems
 - Financial Sustainability
 - CMS State Health Official Letter #16-002 (February 26, 2016)
 - CMS Frequently Asked Questions (FAQs): Federal Funding for Services "Received Through" an IHS/Tribal Facility and Furnished to Medicaid-Eligible American Indians and Alaska Natives (SHO #16-002) (January 18, 2017)
 - ► Statewide Improvement of Behavioral Health for AI/AN Medicaid Clients
 - The National Tribal Behavioral Health Agenda



IHCP Projects Plan Development Process

- We hit the open road!
- Indian Health Commission of Washington State visited 26 of the 31 IHCPs in Washington.





IHCP Projects*

- ▶ Behavioral Health Integration** 12
- ▶ Tribal FQHC 7
- Care Coordination 5
- Public health 2
- Start/expand a Tribal 638 clinic − 2
- ▶ Traditional healing 2
- Workforce Development/CHAP Board 2
- ▶ Falls Prevention 1
- Community Outreach 1

- ▶ Telemedicine 1
- Integrate behavioral health and law enforcement – 1
- Quality Childcare 1
- ▶ Dental Integration 1

^{**}Includes clinical and systems level integration



^{*}Inclusive Counting, will total more than 31

The National Tribal Behavioral Health Agenda

"As indigenous people, we possess the culturally relevant knowledge and expertise to address and enhance the overall health and well-being of all American Indian and Alaska Native people across the country."

THE TRIBAL BEHAVIORAL HEALTH AGENDA FOUNDATIONAL ELEMENTS



1. HISTORICAL AND INTERGENERATIONAL TRAUMA

SUPPORT SYSTEMS

COMMUNITY CONNECTEDNESS

BREAKING THE CYCLE



2. SOCIO-CULTURAL-ECOLOGICAL APPROACH

> SUSTAINING ENVIRONMENTAL RESOURCES

RELIABLE INFRASTRUCTURE

HEALTHY FAMILIES AND KINSHIP



3. PREVENTION AND RECOVERY SUPPORT

PROGRAMMING THAT MEETS COMMMUNITY NEEDS

COMMUNITY MOBILIZATION AND ENGAGEMENT



4. BEHAVIORAL HEALTH SYSTEMS AND SUPPORT

WORKFORCE
DEVELOPMENT

FUNDING MECHANISMS

TRIBALLY DIRECTED PROGRAMS

YOUTH-BASED PROGRAMMING

SCOPE OF PROGRAMMING

LAW ENFORCEMENT AND JUSTICE PROGRAMS



5. NATIONAL AWARENESS AND VISIBILITY

TRIBAL CAPACITY BUILDING

TRIBALLY DIRECTED COMMUNICATION STRATEGIES

COLLABORATOR CAPACITY BUILDING





- Historical and Intergenerational Trauma
 - Support Systems
 - ► Community Connectedness
 - ► Breaking the Cycle
- Projects
 - ► Elder Care Coordinating





- Socio-Cultural-Ecological Approach
 - ► Sustaining Environmental Resources
 - ► Reliable Infrastructure
 - ► Healthy Families and Kinship
- Projects
 - ► Tailored Prevention Program for Elders
 - ► Increase Access to Quality Childcare





- Prevention and Recovery Support
 - Programming that Meets Community Needs
 - Community Mobilization and Engagement





- Behavioral Health Systems and Support
 - Workforce Development
 - Funding Mechanisms
 - Tribally Directed Programs
 - Youth-based Programming
 - Scope of Programming
 - ► Law Enforcement and Justice Programs

Projects

- Community Health Aid Program with focus on Behavioral Health
- Telemedicine
- Healthcare Workforce Development
- ► Tribal FQHC (x 7)
- Start/Expand Tribal 638 Clinic (x 2)
- ▶ Public Health Accreditation Community Health Assessment
- ▶ Behavioral Health Integration, Traditional Healing and Care Coordination
- Traditional Healers Integrated into Provider Teams
- ▶ Behavioral Health Integration (x 7)
- ▶ SUD Response Integrated into Law Enforcement





- National Awareness and Visibility
 - ► Tribal Capacity Building
 - ► Tribally Directed Communication Strategies
 - ► Collaborator Capacity Building



Intersection of IHCP work and ACH work

- Overlap between the IHCP Projects Plan and the Medicaid Transformation Toolkit
- ▶ How could this work?
- More to come...



IHCP-specific Projects and MTP Objectives

- Integrate physical and behavioral health purchasing and service delivery to better meet whole person needs
 - Behavioral Health Integration, Traditional Healing, Start/expand a Tribal 638 clinic
- Support provider capacity to adopt new payment and care models
 - ► Tribal FQHC, Telemedicine, Community Outreach
- Implement population health strategies that improve health equity
 - ➤ Workforce Development/CHAP Board, Public Health, Integrate Behavioral Health and Law Enforcement, Childcare, Dental Integration



Next Steps

- Establish workgroups based on projects
 - ► Behavioral Health Integration
 - ► Tribal FQHC
 - ► Traditional Healing
 - ► Expand/start a 638 Clinic
 - ► Public Health





Questions?

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5. CBOSS Change Plan and Fund Allocation Strategy

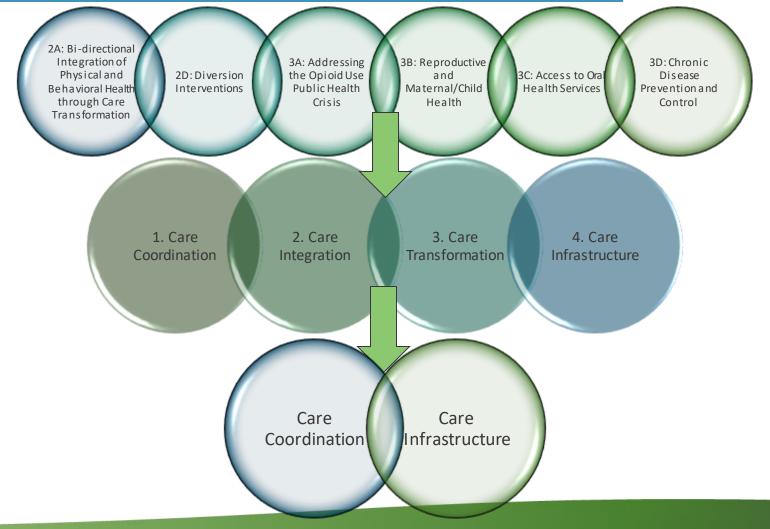
#	Item	Page #
7	CBOSS Change Plan	14-24
8	Draft 2019 Budget Narrative	25

Purpose of this agenda item

Shared understanding of the CBOSS Change Plan and approval of a 2018 CBOSS MTP payment strategy

CBOSS: Community-Based Organization and Social Services





• 1. Care Coordination Domain • 2. Care Infrastructure Focus • Range 1-5 per Domain Area • Range 1-5 per Focus Area Outcome • Some Required • Range 1-16 per Outcome **Tactics** Some Highly Recommended



- Aligned with Physical Health Behavioral Health Change Plans
- Some Outcomes are Required
- Some Tactics are Highly Recommended



OCH PARTNERSHIPS	BCB PCC	BoH SHR	DBH	E.	HHP PCC	HMC H	JFHC	HH	ЭН РС	KCC	KMG	KMHS	KRC	NHON	NWFMR	OMCH	OMC PC	OPG	ЬВН	PCHS	PGST	RCSG	STIHC	WEOS	WSTC
Care Coordination																									
Population Health Management Care coordination protocols that include screening, appropriate referal, and closing the loop on referrals are developed to connect specific subpopulations to clinical or community services																									
Sign Business Associate Agreements or equivalent with partners invove shared patients/clients receive appropriate services	d with	n the	e pat	ient	's ca	re to	sup	por	t ref	erral	ls Of	R sub	-cor	itrac	t wi	th c	omn	nun	ity p	oartr	ners	to er	nsure	2	
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Big Club																									
Boys and Girls Club																									
Cedar Grove Counseling																						\Box			
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Forks Community Hospital														\top								\top	\top	\top	
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Kitsap

- The breadth and scope of CBOSS services range dramatically and are highly specialized.
- CBOSS MTP payment strategy should align with PHBH strategy while also allowing for the diversity and specification of services of CBOSS partners.

CBOSS: Community-based organization and social services

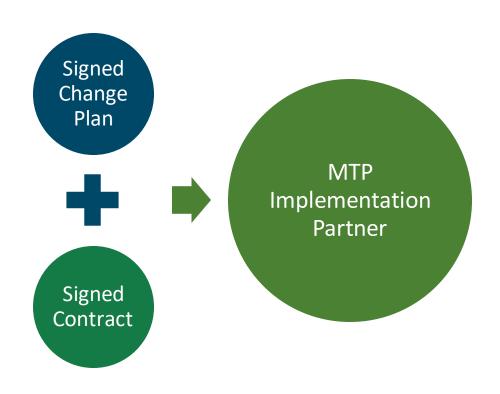
PHBH: Physical health and behavioral health

MTP: Medicaid Transformation Project



Signed CBOSS Change Plans and Contracts
October 23, 2018

First Payments to CBOSS MTP Implementation Partners
November 16, 2018





The amount of the MTP payment to a CBOSS Implementation Partner will depend on <u>two drivers</u>

- Partnerships: # of new and expanded partnerships with PHBH Change Plan Implementation Partners that are required to achieve Outcomes in the CBOSS Change Plan (In 2018, the entire MTP CBOSS payment is based on partnerships)
- Performance: process and intermediary measures reported by CBOSS Implementation Partners that track progress towards achieving the Outcomes in the CBOSS Change Plan and the 14 selected OCH Core Measures



Estimated Available Incentive Pool by NCC, Incentive Category and MTP Year

	Allocations by MTP Year												
	2018	2019	2020	2021	2022	2023	Total						
NCCs and Allocation Categories	25%	20%	20%	15%	10%	10%	100%						
Partnership Allocation Rate	100%	70%	60%	50%	40%	30%							
Performance Allocation Rate	0%	30%	40%	50%	60%	70%							
Clallam - partnership	\$101,230	\$56,690	\$48,590	\$30,370	\$16,200	\$12,150	\$265,230						
Clallam - performance	\$0	\$24,290	\$32,390	\$30,370	\$24,290	\$28,340	\$139,680						
Clallam - total	\$101,230	\$80,980	\$80,980	\$60,740	\$40,490	\$40,490	\$404,900						
Jefferson - partnership	\$58,450	\$32,730	\$28,060	\$17,540	\$9,350	\$7,010	\$153,140						
Jefferson - performance	\$0	\$14,030	\$18,700	\$17,540	\$14,030	\$16,370	\$80,670						
Jefferson - total	\$58,450	\$46,760	\$46,760	\$35,070	\$23,380	\$23,380	\$233,800						
Kitsap - partnership	\$196,750	\$110,180	\$94,440	\$59,030	\$31,480	\$23,610	\$515,490						
Kitsap - performance	\$0	\$47,220	\$62,960	\$59,030	\$47,220	\$55,090	\$271,520						
Kitsap -total	\$196,750	\$157,400	\$157,400	\$118,050	\$78,700	\$78,700	\$787,000						
Total CBOSS Incentives	\$356,430	\$285,140	\$285,140	\$213,860	\$142,570	\$142,570	\$1,425,710						



Other factors

- Payment will vary by whether the organization is a direct service provider or a coordinating center for services.
- Payment drivers for CBOSS partners will change over time,
 with higher weights awarded for performance each year.
- CBOSS payments will be once per year.



Proposed Recommendation

The Board approves the above methodology for 2018 CBOSS Implementation Partner MTP payments.



Summary Natural Community of Care Convenings August 2018

Daniel Schafer

Communications and Development Coordinator



Olympic Community of Health







Kitsap NCC Survey Results

- 32 respondents.
- 8/32 reported this was their first NCC
- 12/32 reported PHBH CP was "somewhat difficult," with one "very difficult."
- 5/32 reported PHBH CP was "somewhat easy."
- 26/32 say they feel "very" or "somewhat" connected to their NCC.
 - 5 say "a little."



Kitsap NCC Survey Results

- 27/32 feel "very" or "somewhat" connected to the work connected to the work connected to the work of OCH.
 - 4/32 say the feel "a little" or "not at all" connected to the work of OCH.
- How can OCH help partners feel more connected?
 - "Do instead of plan and talk."
 - Partner outreach.
 - Continue to convene all partners.



7. Board Retreat Planning

#	Item	Page #
9	Board Retreat Discussion Guide	26-27

Purpose of this agenda item

Get input from Board on how to focus the discussion for Board retreat next month.



Board Retreat: Overview

Goal

Planning a renewed direction

Date

November 2

Location

Port Gamble S'Klallam Tribe

Attendees

Board Members and Alternate Members

Forecast

Five years from now (2019-2023)

Agenda

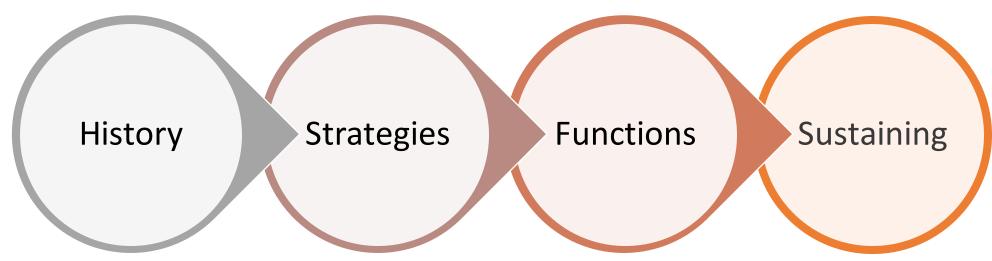
Board Business: 11 am to 12 pm

Lunch: 12 to 12:30 pm

Board Retreat: 12:30 to 4 pm



Board Retreat: Objectives



- 1. What will success look like in five years?
- 2. What are the handful of strategies to get to success?
- 3. What are the resources and assets needed to take on these strategies?

The answers to these questions will tell me what I need what I need to know as your ED so I can build the appropriate steps to meet your definition of success.



Upcoming Important Events

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