

Board of Directors Meeting

April 9, 2018, 1 pm to 3 pm

Location: Kitsap Regional Library; 700 NE Lincoln Rd, Poulsbo

Web: <https://global.gotomeeting.com/join/937538149>

Phone: +1 (872) 240-3311

Access Code: 937-538-149

KEY OBJECTIVES

- Shared understanding of the IT Care Coordination Pilot and agreement on next steps
- Building shared understanding and support of the evolving drivers for DSRIP payment
- Agreement on the general concept for 2018 & 2019 DSRIP fund allocation milestones

AGENDA (Action items are in red)

Item		Topic	Lead	Attachment	Page(s)
1	1:00	Welcome and Approve Agenda	Roy		1
2	1:05	Consent Agenda	Roy	1. DRAFT: Board Minutes 3.12.2018 2. Director's Report	2 5
3	1:10	IT Care Coordination Pilot • Presentation by pilot partners and IT contractor • Next steps	Rob Kristina Kate Elya	<i>Handouts will be distributed at the Board meeting</i>	
4	1:55	Change Plan Pilot Results and Discussion	JooRi		
5	2:10	DSRIP fund allocation: milestones and next steps	Brent Jorge Elya		
6	3:00	Adjourn	Roy		

Acronyms

DSRIP: Delivery System Reform Incentive Program

IT: Information Technology

Olympic Community of Health

Meeting Minutes

Board of Directors

March 12, 2018

Date: 03/12/2018	Time: 1:00pm- 3:06pm	Location: Poulsbo City Hall	
Chair: Roy Walker, <i>Olympic Area Agency on Aging</i> Members Attended: Chris Frank, <i>Clallam County Public Health</i> ; Bobby Beeman, <i>Olympic Medical Center</i> ; Roy Walker, <i>Olympic Area Agency on Aging</i> ; Katie Eilers, <i>Kitsap Public Health District</i> ; Brent Simcosky, <i>Jamestown S’Klallam Tribe</i> ; Meriah Gille, <i>Lower Elwha Klallam Tribe</i> ; Leonard Forsman, <i>Suquamish Tribe</i> ; Anders Egerton, <i>Salish Behavioral Health</i> ; Joe Roszak, <i>Kitsap Mental Health Services</i> ; Dale Wilson, <i>Kitsap Community Resource</i> ; Gary Kriedburg, <i>Harrison Health Partners</i> , Thomas Locke, <i>Jefferson County Public Health</i> ; Andrea Tull, <i>Coordinated Care</i> Non-Voting Members Attended: Vicki Kirkpatrick, <i>Jefferson Public Health</i> , Mike Maxwell, <i>North Olympic Healthcare Network</i> Guests: Amy Etzel, <i>Washington State Department of Health</i> ; Craig Nolte, <i>San Francisco Federal Reserve</i> , Rochelle Doan, <i>Kitsap Mental Health Services</i> , Stephanie Johnson, <i>Salish Behavioral Health Organization</i> , Dunia Faulx, <i>Jefferson Healthcare</i> Attended by Phone: Jorge Rivera, <i>Molina</i> , Gill Orr, <i>Cedar Grove Counseling</i> ; Michelle Chapdelaine, <i>Center for Community Health Evaluation</i> , Laura Johnson, <i>United Health Care</i> Contractors: Daniel Vizzini, <i>Oregon Health Sciences University</i> Staff: Elya Moore, Margaret Hilliard, JooRi Jun, Grace McCallister			
Person Responsible for Topic	Topic	Discussion/Outcome	Action/Results
Roy Walker	Welcome and Introductions	Meeting called to order at 1:00 PM.	
Roy Walker	Consent Agenda	Board approval of consent agenda and minutes from February 12, 2018. Governor has yet to sign 2998 which would exempt ACH from B&O tax. OCH expects governor to sign the bill.	February 12th Board Minutes APPROVED unanimously with minor changes.
Elya Moore	IGT Contributor Funds Transfer	IGT is moving forward with no Hold Harmless Clause. Board to approve \$1,638,436 transfer. - ACHS need to approve their portion of the IGT every 6 months, or give ED discretion to release funds. - IGT is contributed to meet matching requirements and comes back to the ACHs as DSRIP – earned dollars that are not considered grant or federal revenue.	MOTION to approve IGT payment and authorize OCH staff to make future payments on behalf of the Board APPROVED . Clarification: Elya will report transactions back to Board and make IGT spreadsheets available.
Elya Moore	Incentive Allocation	2018:	Proposed MOTION – BoD endorses Funds

	Plan- Funds Flow	- Two opportunities for payment at contract signing and approval of amendment in December 2018. - Non-Medicaid billers will receive flat rate payments. - Come up with a term other than “Medicaid or Non-Medicaid Billers” - Will be tested with partners in pilot group. 2019 & Beyond: - Complexity of Change Plan, clinical integration, care coordination, participation, reporting, health equity 40% Medicaid Lives, 60% performance - Non-Medicaid Biller Change Plan: proportion of incentives related to competing milestones that directly support SCP, then participation, reporting, health equity.	Flow Workgroup recommended action contingent on findings in pilot process. Motion unanimously APPROVED.
JooRi	MTP Building Blocks: Shared Change Plan and Change Plan	- Shared Change Plan for Kitsap Natural Community of Care circulated - Draft Change Plan circulated Next Steps: - Pilot Change Plan, Fund Flow modeling, revise model, reconvene Fund Flow Workgroup, finalize model, bring to April BoD, present signed partners w/ potential earnings, sign Change Plan in May, sign contracts June. - OCH has between June and December to get clarity on reporting metrics and other requirements. - Testing to get clarity around scale ensuring balance between small and big providers.	
Elya	OCH Participant Survey Results	- Results from survey shared - Overall, OCH is performing well across all domains - Area for discussion at a future retreat include the role of OCH beyond the MTP and better community engagement	Executive director will work with executive committee on goals and objectives for a Board retreat
	Adjourn	The meeting adjourned at 3:06 PM.	

Acronym Glossary

CP: Change Plan

OCH: Olympic Community of Health

DSRIP: Delivery System Reform Incentive Payment

BoD: Board of Directors

FW: Funds Flow

IGT: Inter-governmental Transfer

ACH: Accountable Community of Health

SCP: Shared Change Plan

Top 3 Things to Track (T3T) #KeepingMeUpAtNight

1. Piloting the Change Plan with our partners turned out to be a very good idea. We uncovered many opportunities for improvement and are working quickly to make mid-course adjustments and re-test the model. We hope to finalize the template so it can be loaded in time for a June payment to partnering providers. Timing depends, in part, on the availability of our volunteers to provide additional input and CSI to load the Change Plan into a web-based form.
 2. Fund allocation discussions swing from “keep-it-simple” to “keep-it-precise”, with both strategies offering valid arguments. We are also learning that various health sectors are financed and managed differently, making a uniform fund allocation approach challenging. We will need to land on a decision and soon for how we want incent providers in 2018 and 2019.
 3. As the Medicaid Transformation Project evolves from design to implementation, I like to ask my favorite question: *What's next?* This will be a theme of the 2018 Board retreat.
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OCH Meetings

- April 9 – Board of Directors Meeting, Poulsbo Library
- April 13 – Funds Flow Workgroup Meeting
- April 23 – Executive Committee Meeting
- April 24 – Natural Community of Care Partner Convening and NEAR Training, Kingston
- April 26 – Finance Committee Meeting
- May 14 – Board of Directors Meeting, Poulsbo Library

IMPORTANT UPDATES: Medicaid Transformation Project Payments

1st Payment Transfer to Intergovernmental Transfer (IGT)/Shared Domain One Contributors

Financial transfers based on the IGT contributions/Shared Domain One investments have been postponed to May 23rd. The extra time will ensure accuracy of EINs and transfer details. When the time comes, two staff will independently approve the transfer to uphold internal controls and ensure accuracy of payment. The total payment amount will be \$1,638,436 dollars. The detailed payment scheme is included as a table at the end of this report for informational purposes.

Staff from all nine ACHs met with the HCA and the IGT Contributors (Washington Association of Rural Hospitals and University of Washington) in SeaTac on Thursday March 29th to discuss shared investments in infrastructure and capacity building such as workforce and health information technology. These conversations are beginning to show promise for a collaborative partnership to leverage IGT funds, also called Shared Domain One Investments, and opportunities statewide.

Financial Executor Portal

The OCH portal is loaded with the first installment of MTP funds: \$4,594,020.42. We can begin making payments: the payment schedule is April 6th, April 20th, May 4th, and June 29th. Thus far seven OCH partnering providers have successfully registered, and we are continuing to send reminders and assist remaining providers in the registration process.

UPDATE: OCH Retreat

The proposed concept for the OCH retreat is follows:

Date: October 8

Time: 11:00 am to 3:00 pm (extend the regular board meeting an extra two hours)

Location: Poulsbo Public Library

Attendees: Board Members, Alternate Board Members, Staff

Goal: Shared understanding of the role of OCH beyond the Medicaid Transformation Project

Objectives:

- Revisit organizational mission, core values, functions, and how we measure success
- Identify pathways to financial sustainability to meet organizational goals
- Agree on desired Board composition and pathway to get there

UPDATE: 501c3 Nonprofit Determination Status

OCH received a long-awaited communication from the IRS regarding our nonprofit determination status. The only additional information they requested was confirmation that the executive director (Elya) was authorized to sign the application. The director of administration (Maggie) and treasurer (Hilary) responded promptly by mail Thursday March 29.

UPDATE: Amerigroup Contribution

Amerigroup has issued a generous donation of \$20,000 to OCH to support wellness, prevention, and health equity.

UPDATE: Natural Community of Care (NCC) Convening and NEAR Training– April 24, 2018

All three NCCs will be convened for a joint NCC-Partner Convening on April 24th from 12:00 to 4:30 pm in Kingston. Proceeding the meeting, from 9:00 am to 11:30 am, is a free NEAR (Neuroscience | Epigenetics | Adverse childhood experiences | Resiliency) Training opportunity offered by Kitsap Strong.

UPDATE: Independent Audit by DZA

The independent audit by DZA is underway. Thus far it is going smoothly. The auditors have requested a few pieces of additional information: task billing for the books and when the final audit report is due to the Board. They also requested additional documentation based on interviews with the CFO service provider (Nathanael) and the director of administration (Maggie). The executive director will speak directly with the auditors on Wednesday April 4.

UPDATE: Three County Coordinated Opioid Response Project (3CCORP)

The 3CCORP Steering Committee and Workgroups did not meet January – March so that members could participate in their respective Natural Communities of Care (NCC) and shared change plans/partner change plans. Meetings will resume in April. However, 3CCORP has still been busy! 3CCORP leadership met with representatives from WSHA and Collective Medical to discuss:

- Being the pilot region for a new fatal and non-fatal overdose notification project. When a community member presents to the ED with an overdose, all providers who prescribed opioids to the patient in the six months prior will receive a notification of the fatal or non-fatal overdose.
- Participating in a notification project in which opioid prescribers and performing one standard deviation or lower than their peers with regards to adhering to the Medicaid opioid prescribing policy.
- Finalizing a contract with the Six Building Blocks team to bring the 6BB model to up to ten clinics in our region.

OCH staff continue to host weekly calls with ACHs and tribes across the state to share resources and collaborate on opioid project activities.

UPDATE: Community and Tribal Engagement

Partners in the OCH region have been busy! The OCH team has been zooming around the region to follow up on NCC meetings, pilot Change Plans, and establish and strengthen networks and relationships through in-person participation in meetings and events.

The 29 Tribes and 2 Urban Indian organizations in the State are receiving planning funds following the approval by CMS of the Indian Health Care Provider (IHCP) protocol and IHCP Planning Funds Plan. Each of the IHCPs are eligible for \$156,451 planning funds. Lena Nachand, Tribal Liaison with HCA, is working with each IHCP to load them into the Financial Executive Portal and sign a paper contract with HCA. IHCPs have the opportunity to develop and submit Medicaid Transformation Project (MTP) plans that are culturally relevant and specific to their community; these are due at the same time as the ACH Implementation Plans (October 1, 2018). The Director of Community and Tribal Partnership (Lisa Rey) is working with Lena, Jessie Dean (Tribal Affairs Administrator at HCA), and Vicki Lowe (Executive Director of the American Indian Health Commission of Washington State or AIHC) to meet with each of the seven Tribes that share our region to ensure that to the extent possible the IHCP plans complement and strengthen Change Plans that are developed with OCH.

The Director of Community and Tribal Partnership (Lisa Rey) has arranged for Lena, Jessie, and/or Vicki to provide updates to the other ACHs about this process as there is considerable variability of knowledge of the status of IHCPs across the state.

Outreach and Meetings

- March 1 – OlyCAP orientation meeting
- March 5 – Olympic Medical Center meeting
- March 5 – Peninsula Behavioral Health lunch meeting
- March 6 – Peninsula Community Health Services Change plan pilot
- March 7 – All nine ACH EDs meet in SeaTac
- March 9 – statewide Criminal Justice Opioid Workgroup meeting
- March 10 – NW Family Medicine Residency meeting
- March 10 – HCA Tribal Liaison meeting
- March 19 – North Sound Tribal Liaison meeting
- March 19 – WSHA Director of Quality and Performance/Patient Safety meeting
- March 20 – Director of Safe Harbor/Beacon of Hope meeting
- March 20 – KMHS Change Plan pilot
- March 21 – Tribal Roundtable with HCA/DSHS/DOH
- March 22 – Lower Elwha Klallam Tribe Change Plan pilot
- March 23 – IT Care Coordination meeting
- March 26 – 3CCORP and Collective Medical meeting
- March 26 – Beacon of Hope Change Plan pilot
- March 27 – Olympic AAA Change Plan pilot
- March 28 – OCH regional Hub & Spoke monthly meeting
- March 29 – meeting with Makah Tribe team
- March 30 – monthly Re-entry Task Force meeting
- April 4 – monthly ACH/HCA Communications Council call
- April 5 – monthly Tribal/IHCP/HCA meeting
- April 5 – monthly ACH/HCA HILN and Health Equity call
- April 12 – WSHA Rural Hospital CEO Retreat
- April 18 – All nine ACH ED meeting in SeaTac
- April 20 – SBHO Executive Board meeting

TABLE. List of Payments to Partnering Providers Based on IGT Contribution/Shared Domain One Investment Scheme	Percent of Allocation	Total Earned Funds
King County Public Hospital District No. 4, dba Snoqualmie Valley Hospital	0.8380	\$2,746
Okanogan Douglas Public Hospital District #1, dba Three Rivers Hospital	0.4490	\$1,471
Benton County Public Hospital District #1, dba PMH Medical Center	1.1540	\$3,782
Chelan County Public Hospital District #2, dba Lake Chelan Community Hospital	0.6620	\$2,169
Public Hospital District 3 of Pacific County, dba Ocean Beach Hospital and Medical Clinics	0.6080	\$1,992
Garfield County Public Hospital District No. 1	0.2940	\$963
Public Hospital District #1 of Pend Oreille County, dba Newport Hospital & Health Services	0.8040	\$2,635
Okanogan County Public Hospital District No. 3, dba Mid Valley Hospital	0.7480	\$2,451
Public Hospital District No 2, Klickitat County, dba Skyline Hospital	0.4650	\$1,524
Kittitas County Public Hospital District #1, dba Kittitas Valley Healthcare	1.8010	\$5,902
Lincoln County Public Hospital District No. 3, dba Lincoln Hospital	0.5410	\$1,773
Ferry County Public Hospital District #1 DBA: Ferry County Memorial Hospital	0.3190	\$1,045
Chelan County Public Hospital District No. 1 DBA: Cascade Medical Center	0.3550	\$1,163
Clallam County Public Hospital District #2, dba Olympic Medical Center	4.0720	\$13,343
Whitman County Public Hospital District No. 3, dba Whitman Hospital and Medical Center	0.7300	\$2,392
Grays Harbor Community Hospital	2.4880	\$8,153
Adams County Public Hospital District #2, dba East Adams Rural Healthcare	0.2830	\$927
Okanogan Public Hospital District #4, dba North Valley Hospital	0.4900	\$1,606
Lincoln County Public Hospital District 1, dba Odessa Memorial Hospital	0.3000	\$983
San Juan County Hospital District No. 1	0.0530	\$174
Douglas, Grant, Lincoln & Okanogan Counties Public Hospital District No. 6, dba Coulee Medical Center	0.6420	\$2,104
Public Hospital District No. 2 Skagit County Washington, dba Island Hospital	2.3930	\$7,842
Public Hospital District No. 2, Snohomish County, dba Verdant Health Commission	0.2640	\$865
Adams County Public Hospital District #4, dba Othello Community Hospital	0.4450	\$1,458
Grays Harbor County Public Hospital No. 1, dba Summit Pacific Medical Center	0.8270	\$2,710
Mason General Hospital & Family of Clinics	2.2310	\$7,311
Skamania County Public Hospital District, dba Skamania County EMS	0.0530	\$174
Public Hospital District No. 1, Skagit County, dba Skagit Valley Hospital	7.7080	\$25,258
Lewis County Hospital District No. 1, dba Morton General Hospital	0.5640	\$1,848
Clallam County Public Hospital District #1, dba Forks Community Hospital	0.6230	\$2,041
Grant County Public Hospital District #2, dba Quincy Valley Medical Center	0.3450	\$1,131
Columbia County Public Hospital District #1, dba Columbia County Health System	0.3390	\$1,111
Klickitat County Public Hospital District #1, dba Klickitat Valley Health	0.5490	\$1,799
Public Hospital District No. 1-A of Whitman County, dba Pullman Regional Hospital	1.5310	\$5,017
Grant County Public Hospital District No. 5, dba Mattawa Community Medical Clinic	0.0530	\$174
Grant County Public Hospital District #4, dba McKay Healthcare and Rehab	0.3440	\$1,127
Grant County Health District #1, dba Samaritan Healthcare	1.8590	\$6,092
Douglas County Hospital District #2	0.0530	\$174
Pacific County Hospital District No. 2, dba Willapa Harbor Hospital	0.4930	\$1,615
Grant County Public Hospital District No. 3, dba Columbia Basin Hospital	0.4160	\$1,363
Jefferson County Public Hospital District No. 2, dba Jefferson Healthcare	2.2530	\$7,383
Grant County Public Hospital District No. 7	0.0530	\$174

Whidbey Island Public Hospital District, dba WhidbeyHealth	2.4300	\$7,963
San Juan County Hospital District No. 2	0.0530	\$174
Point Roberts Public Hospital District	0.0530	\$174
Kittitas County Public Hospital District #2, dba Kittitas Valley Healthcare	0.0530	\$174
Skagit County Public Hospital District #304, dba United General District 304	0.0530	\$174
Public Hospital District No. 1 of King County, dba Valley Medical Center	20.0000	\$65,537
King County Public Hospital District #2 dba EvergreenHealth	20.0000	\$65,537
Association of WA Public Hospital Districts	5.2880	\$17,328
Association of WA Public Hospital Districts	10.5780	\$34,663
Investment Total		\$327,687
Partnering Provider	Percent of Allocation	Total Earned Funds
University of Washington	100.0000	\$1,310,749
Investment Total		\$1,310,749
Shared Investment Total		\$1,638,436