



Board of Directors

September 10, 2018

1:00 pm to 3:00 pm

Clallam • Jefferson • Kitsap

Happy Retirement!!

Wishing Anders Edgerton a happy retirement

L'Shanah Tovah

Happy New Year!

1. Approve Agenda

2. Consent Agenda

#	Item	Page #
1	Minutes August 13, 2018 Board Meeting	1-3
2	OCH Personnel Policy*	4-33
3	OCH Fiscal Policies and Procedures**	34-46
4	Board Member Term Renewal	47-48
5	Executive Director's Report	49-52

* *Personnel Policy* - the **Executive Committee** is recommending that the Board approve this policy. Since the August Board meeting, the policy was reviewed by OCH's HR consultant.

** *Fiscal Policies and Procedures* – the **Finance Committee** is recommending that the Board approve this policy.

3. Financials

#	Item	Page #
6	OCH Financials: January 2018-July 2018	53-56

Olympic Digital HIT Commons

THE COMMONS

Pilot partners: **Kate Weller** MD, North Olympic Healthcare Network; **Kristina Bullington**, Olympic Personal Growth

Statewide partners: **Aaron Tyerman**, Deputy Chief, Puget Sound Regional Fire Authority; **Matthew Morris**, Fire Chief, Puget Sound Regional Fire Authority; **Wes Luckey** (phone), Greater Columbia Accountable Community of Care; **Hiroshi Nakano**, Director Value Based Care, UW Valley Medical Center

Support: **Elya Prystowsky**, Executive Director, Olympic Community of Health; **Rob Arnold**, Director, Quad Aim Partners

Goal of COMMONS agenda item

1. Understand the history and progress of Olympic Digital HIT Commons
2. Discuss with pilot partners and statewide partners about the intent to collaborate and potential community benefit
3. Authorize a budget increase to continue the collaboration through 2018

DRAFT

The struggle

Today, health and social service providers in the community work on **CARE ISLANDS** - - while they appear close in proximity, communication and reporting barriers make it difficult for providers to track and coordinate care as an integrated team.

Communities with fragmented systems of care struggle to deliver whole-person care and produce relatively low achievement in population health and well-being.



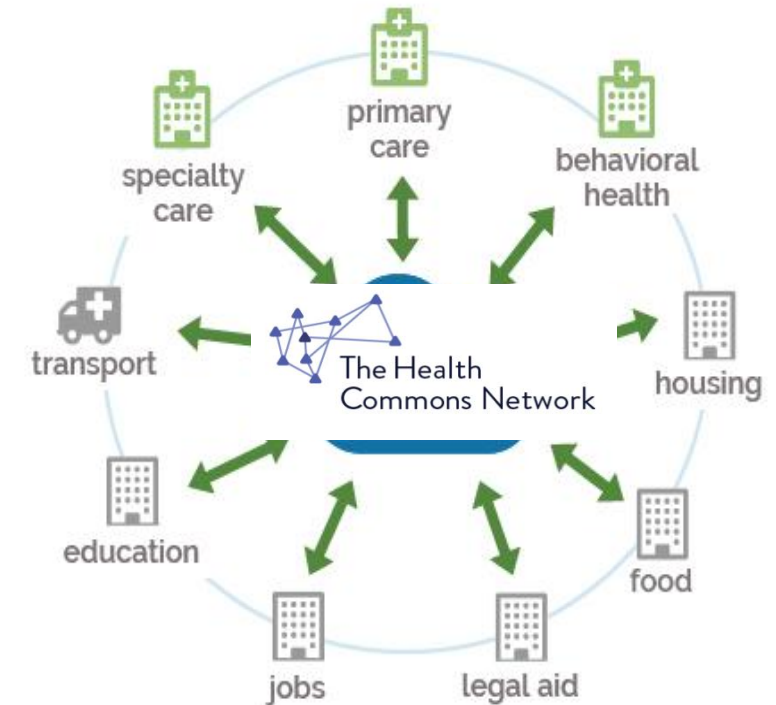
What is the Health Commons Network?

A Natural Community of Care is powered by a technology platform, called the Health Commons Network (Commons). The Commons is a communication network that digitally connects health and social service agencies in a community. Where agencies in a Natural Community of Care are connected to the Commons:

1. Providers can share the information needed to coordinate and track care as an integrated team
2. Organizations can disseminate strategies, workflows, and best practices that improve population health and well-being.



Before the Commons Network

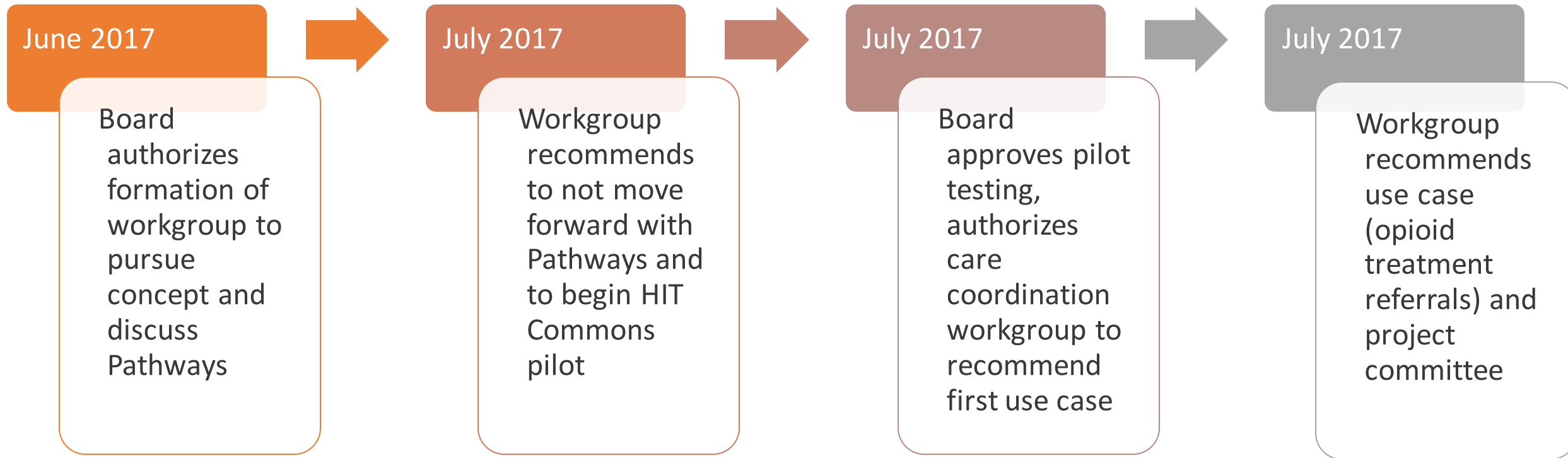


After the Commons Network

Olympic Digital HIT Commons

Pilot is complete: on time and on budget

HIT Commons History



HIT Commons History, Continued

August 2017

Board reviews concept and invites contractor, Rob Arnold to present at next Board meeting

Sept. 2017

Board authorizes pilot and Rob begins work with Clallam partners on opioid use care, \$90,000 budget approved

March 2018

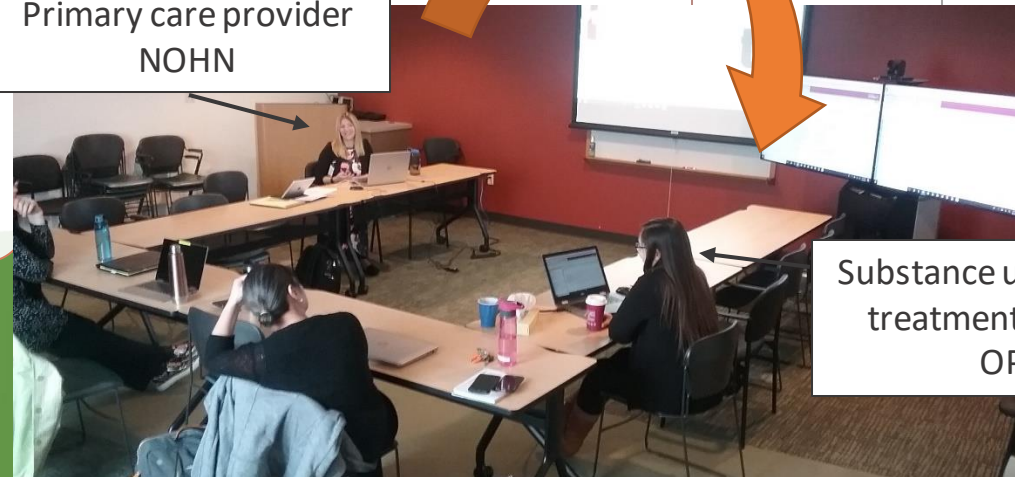
Successful pilot test between primary care and SUD treatment providers

Primary care provider
NOHN

April 2018

Present pilot to Board; Board requests update and proposal in July 2018

Substance use disorder
treatment provider
OPG



HIT Commons History, Continued

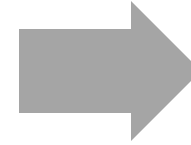
July 2018

Board requests finalizing fund allocation and inquiry on partner willingness to participate



August 2018

Commons introduced to each NCC
Braided funding options explored



Sept 2018

- Board hears from partners and is asked to authorize budget through 2018

Name	Organization	Email Contact	Commons Use Case
Bobby Berman	OMC	bberman@olympicmedical.org	SUD
M. Maxwell	NOTH	you know	SUD, chowdrem CDM,
ia Mishkin	JFHC	iamishkin@jamestowntribe.org	SUD/MAT
Ginell Ashley	Reflections	gnell@rcsgpa.org	SUD
Tanya Mackel	WEOS	tanyam@forkshospital.org	BH < SUD MH
Tim Courmyer	FCH	timc@forkshospital.org	Hospital
Libby Cope	STIHL	elizabeth.lope@ihs.gov	BH
Sue Ehrlich	DBH	suee@discoverybh.org	SUD/MAT
FORD KESSLER	B of H	FordK@safeharborrecovery.org	SUD/MAT
Manu Klemes	Practice Transformation Owens Health	manuk@owenshealth.org	PC/BH/SUD
Hilary Whittington	Jefferson Healthcare	hwhittington@JGH.org	Hospital/PC
Noddy Moss	OZA	mossjuni@dshs.wa.gov	CDSMP & other
Katie Eilers	KPHD	Katie.eilers@kitsapublichealth.org	CDSMP, DPP, perinatal, child services
Megan Kelly	KMHS	megan.k@kmhs.org	Primary w/ BH.
JOE ROSZAK	KMHS	joer@kmhs.org	" " "
Amber McNeil	KRC	amcneil@co.kitsap.wa.us	SUD

“If you are interested in learning more about how your organization can share data with partnering organizations in real time on the Commons, please indicate your interest...”

NOHN and OPG Story

Our perspective
Our experience

DRAFT

What is the Health Commons Project?

We are group of PNW communities, provider organizations, and technologists dedicated to creating connected and sustainable systems for delivery of whole-person care. We call these new systems Natural Communities of Care.



A Natural Community of Care is a fully integrated system of care where **health and social service providers** work together to ensure there is “No Wrong Door” for people to access the care and services they need. A Natural Community of Care is designed to improve the population health and well-being of individuals and populations.



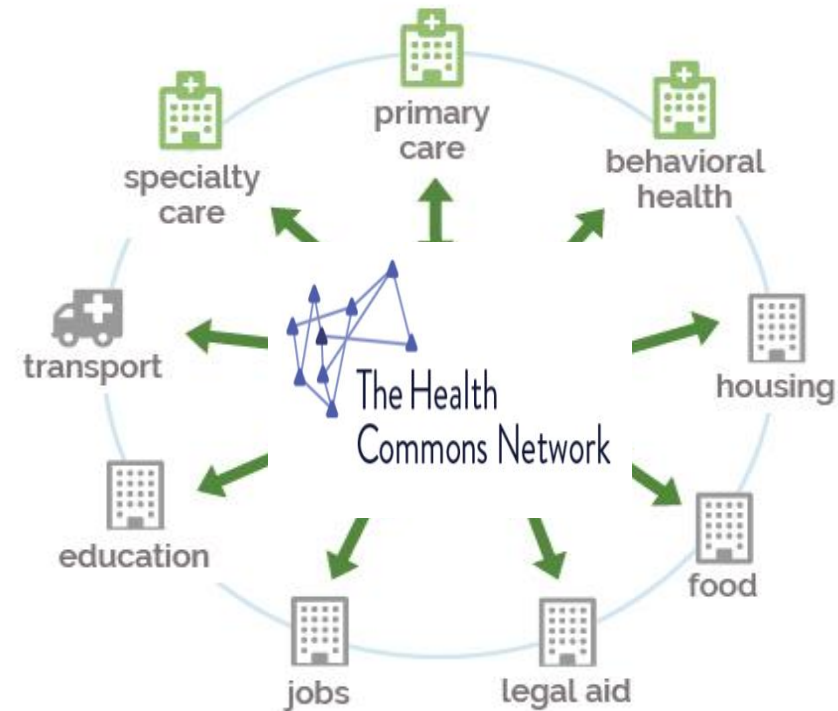
How does the Health Commons Network work?



The Commons supports a wide range of digital tools including Electronic Health Record, eReferral, Health Information Exchange, eConsult, Secure Chat, Digital Consent and Remote Monitoring.

The Commons is vendor agnostic. The Commons Project Team works with your organization to identify and implement best-in-class technology based on what is best for each pilot test / use case.

The Commons operates like a public utility. Partnering organizations in a Natural Community of Care develop a financial model to sustain the Commons. Each organization that connects to the Commons uses their voice to drive system improvements.



Community pioneers committed to the Health Commons Project



Olympic Health Commons Project

Olympic Commons Pilot

- Addressing the Opioid Use Public Health Crisis
- Primary Care / Behavioral Health Integration
- Community-Based Care Coordination

Greater Columbia Health Commons Project

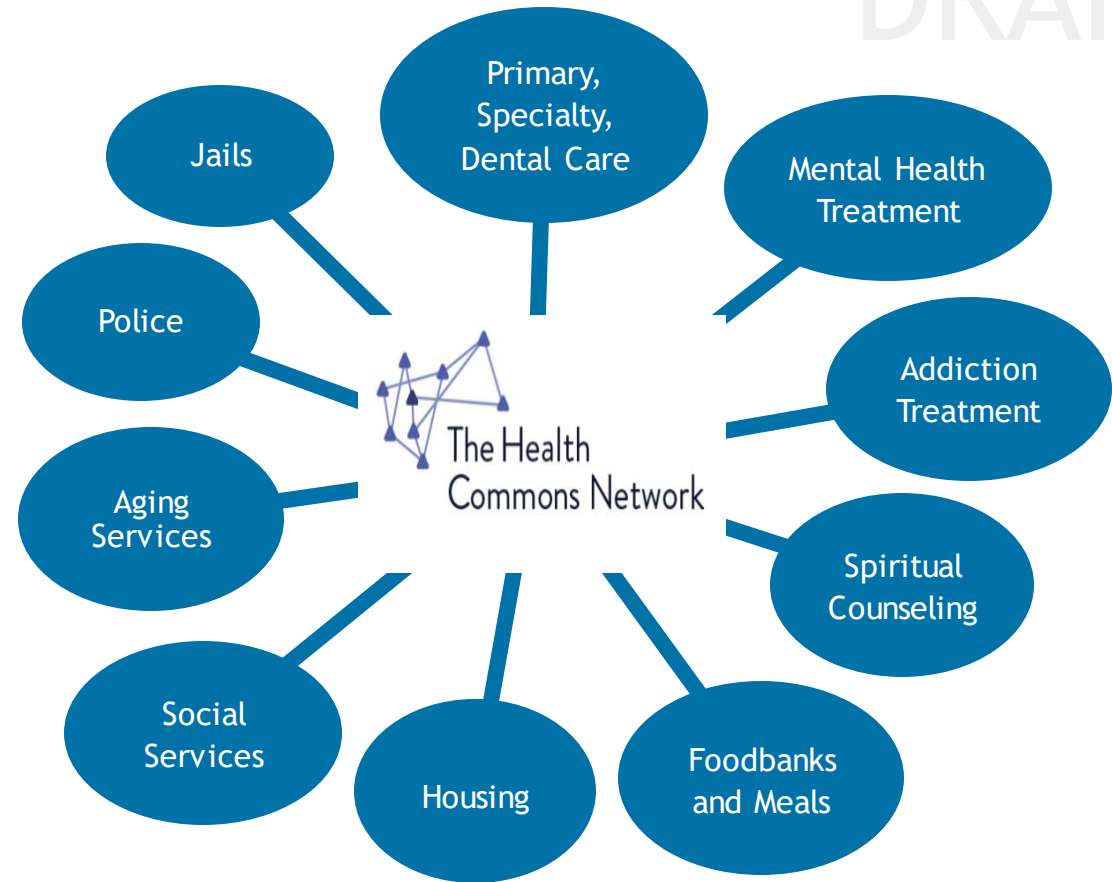
Kittitas Commons Pilot

- Improving Transitional Care
- Community-Based Care Coordination

South King Health Commons Project

South King Commons Pilot

- Improving Diversion Care
- Community-Based Care Coordination



How the collaboration with the Commons works



- Commons Project Teams
- Use the Natural Community of Care Concept
- Bring in the Commons technology
- Bring in the IHI Plan -> Do -> Study -> Act
- Follow IHI Pathways to Population Health Framework (<http://www.pathways2pophealth.org/>)

PATHWAYS
TO POPULATION HEALTH

**An Invitation
to Health Care
Change Agents**

PARTNERS

HRET HEALTH RESEARCH & EDUCATIONAL TRUST | **Institute for Healthcare Improvement** | **nrhi** Network for Regional Healthcare Improvement | **PUBLIC HEALTH INSTITUTE** | **Stakeholder Health**

AN INITIATIVE FACILITATED BY **100 Million Healthier Lives** | WITH GENEROUS SUPPORT PROVIDED BY **Robert Wood Johnson Foundation**

Cost Model Comparison

Pathways Estimates

\$200-400k per year per HUB; 6
HUBs in the state

\$1.25 mill for statewide evaluation

Olympic Digital HIT Commons *Estimates*

Yearly cost Clallam NCC: \$45k

Yearly regional cost : \$135k

connected partners: >60*

**One-time set-up cost per connection: \$7.5k*

Sustainability

- Public-private partnerships
- Public utility model
- Efficiencies as other Commons Teams join (e.g., share computing costs)

Olympic Digital HIT Commons: Next Steps

- Remainder of 2018
 - Continue to seek braided funding
 - Enhance partnership with Puget Sound Fire and Greater Columbia
 - Roll out Commons to Clallam NCC, starting with the Opioid/Primary Care workflow)
 - Finalize governance documents
 - Considering Community Paramedicine home visits
- Kittitas and South King NCCs are focused on Community Paramedicine
 - Workflows are easily shareable with Olympic (no need double pay!)
- Present 2019 Commons budget at October Board meeting

<http://healthcommonsproject.org/>



Accelerate your Community's Transformation to Whole-Person Care

"Where people combine their talents and efforts to design organized services for patients and local communities, extraordinary change can result."

Atul Gwande
Cowboys and Pil Crews

Introducing the Health Commons Project

Situation

Today, health and social service providers in the community work on "care islands" -- while they appear close in proximity, communication and reporting barriers make it difficult for providers to track and coordinate care as an

To improve population health and well-being, communities are breaking down care silos to create connected and sustainable systems for delivery of whole-person care -- systems where providers work together to direct their

Natural Community of Care Convenings

Daniel Schafer

Communications and Development Coordinator

Olympic Community of Health



2
6

Clallam NCC



Jefferson NCC



2
8

Kitsap NCC

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

Kitsap NCC Survey Results

- 27/32 feel “very” or “somewhat” connected to the work connected to the work of OCH.
 - 4/32 say they 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.

Kitsap NCC

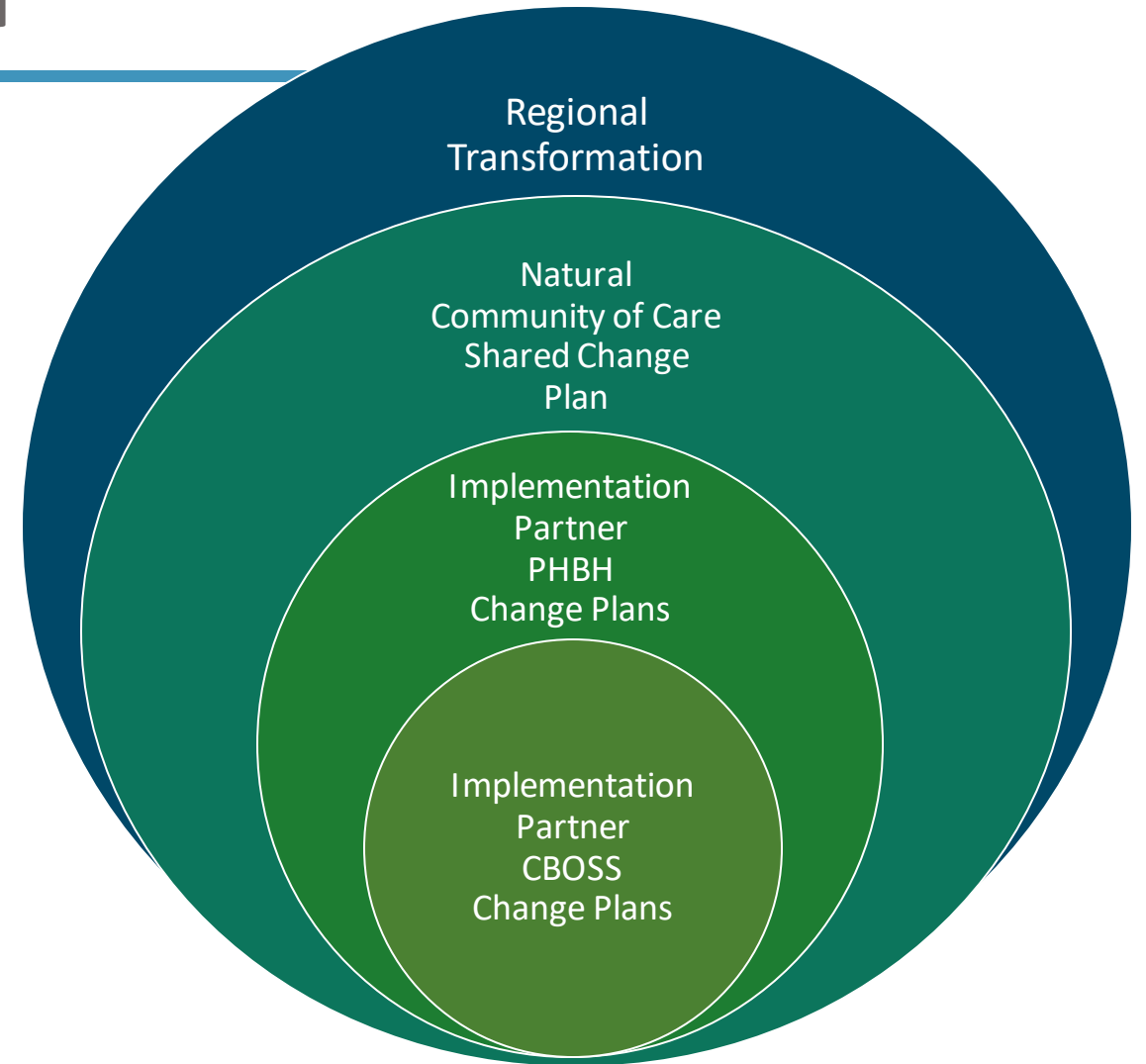
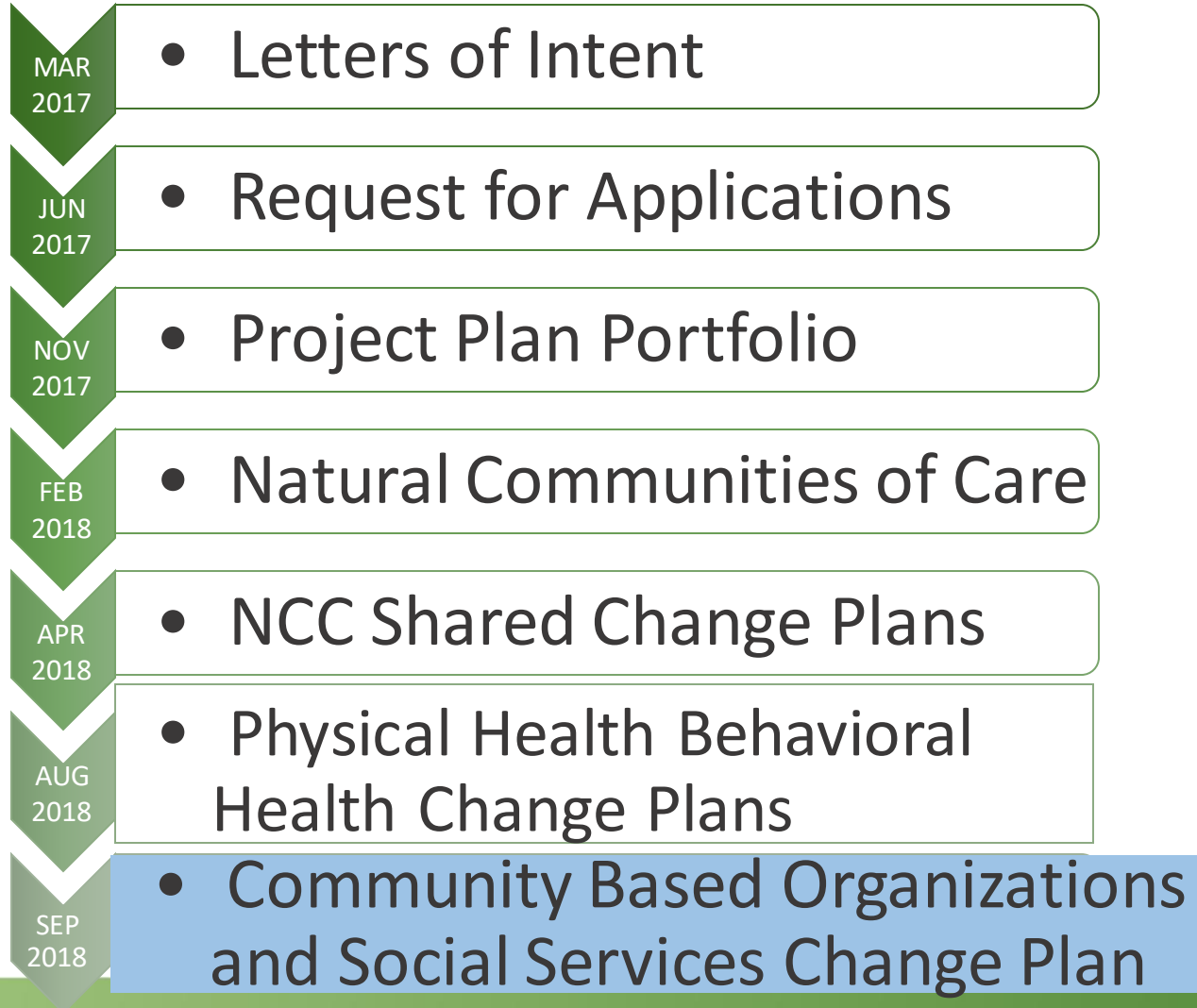
Change Plans

JooRi Jun, ND

Clinical Transformation Manager

Olympic Community of Health

Where we have come from



Shared Change Plan

~~FINAL DRAFT~~ Clallam Natural Community of Care Shared Change Plan v 3.19

~~April 10, 2018~~REVISED – September 4, 2018

Background

This is our final version of your Natural Community of Care's Shared Change Plan following three convenings during January and February with your input and revisions. It has been updated to include additional partners. This Shared Change Plan represents agreement by the listed parties on shared expectations, goals and strategies of the Medicaid Transformation Project (MTP), a statewide initiative to improve care for the Medicaid beneficiaries of Washington.

Adoption of MTP Goals

We commit to the following goals Olympic Community of Health has put forward to transform the health system for Medicaid beneficiaries:

- Prepare for or optimize value-based contracts
- Continually enhance processes to integrate care
- Improve patient/client access and health outcomes
- Collaborate with partners within our Natural Community of Care (NCC) to coordinate care
- Collaborate with partners in our NCC and across NCCs to address social influences of health and improve health equity
- Collaborate on transformation activities that will benefit by and/or require a cooperative approach to be successful. These activities are summarized on the pages below.

Section	Implementation	Primary Stakeholders/Partners	Reporting/Notes
Programs	• Assess and develop a shared vision for the future of the health system • Develop a shared vision for the future of the health system • Develop a shared vision for the future of the health system	• Clallam Community of Care • Olympic Community of Health • Skagitway Health	• Shared vision for the future of the health system • Shared vision for the future of the health system • Shared vision for the future of the health system
Health Services	• Assess and develop a shared vision for the future of the health system • Develop a shared vision for the future of the health system • Develop a shared vision for the future of the health system	• Clallam Community of Care • Olympic Community of Health • Skagitway Health	• Shared vision for the future of the health system • Shared vision for the future of the health system • Shared vision for the future of the health system

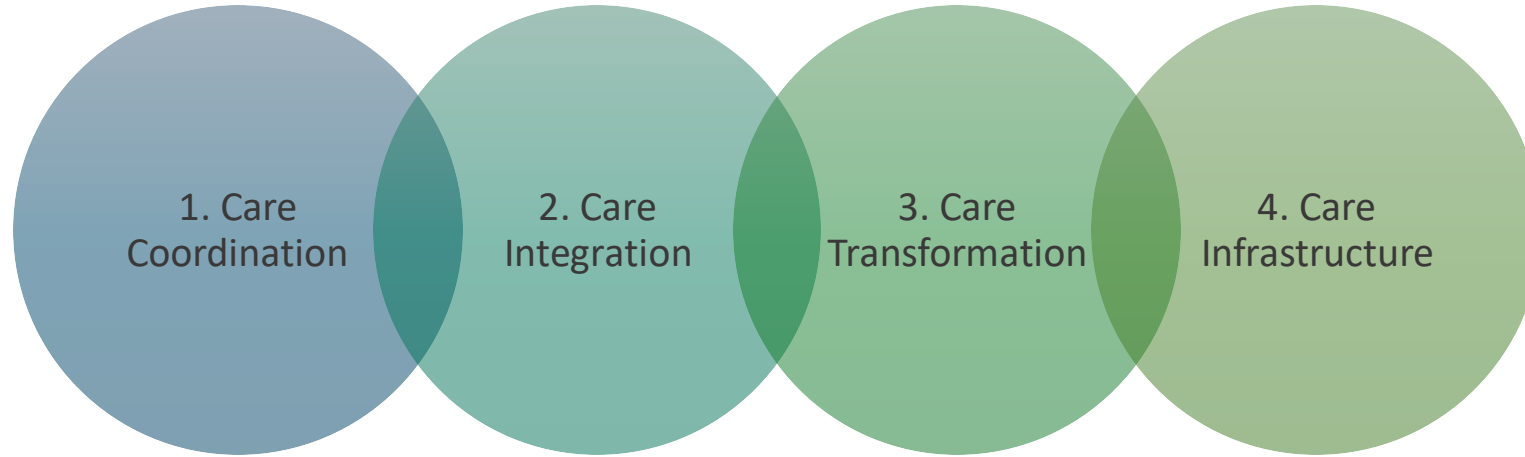
Element	Cooperative Activity	Primary Implementing Partners (see glossary of acronyms)	Supporting Partners (see glossary of acronyms)
Integration	- Care coordination, bi-directional referrals, data sharing between providers from different organizations and sectors - Full spectrum of evidence-based treatment for Opioid Use Disorder and substance disorder - Co-location and clinical integration of primary care in the behavioral health setting - Co-location and clinical integration of behavioral health in the primary care or hospital setting - Advocacy to decrease regulation of the behavioral health system to facilitate integration	<u>Primary Care</u>: OMP, JSFHC, NOHN, BC, LEKT <u>Substance Use Disorder Treatment & and Mental Health Care</u>: RCSG, CG, OPG, PBH, WEOS <u>Hospital</u>: OMC, FCH <u>Payers</u>: SBHO, Mol, AG, CC, UHC, CHPW <u>Community-Based Organization</u>: VIMO, O3A, OlyCAP, OPHCC	<u>Education</u>: OESD, based clinics <u>Public Health</u>: CPI <u>Law enforcement</u> <u>Fire and EMS</u> <u>Courts</u> <u>Housing</u>: OlyCAP,
Opioid Response	- Regional standards of practice for coordinating care and implementing the full spectrum of best practice treatment for opioid use disorder and management of chronic pain - Clinic transformation for best practice opioid prescribing and chronic pain management - Increase local access to medication assisted treatment - Expand the current Hub and Spoke system to include additional spokes - Develop and strengthen referral networks for syringe exchanges - Increase secure drug take back programs	<u>Primary Care</u>: OMP, JSFHC, NOHN, BC, LEKT <u>Substance Use Disorder Treatment & and Mental Health Care</u>: RCSG, CG, OPG, PBH, WEOS <u>Hospital</u>: OMC, FCH <u>Payers</u>: SBHO, Mol, AG, CC, UHC, CHPW <u>Community-Based Organization</u>: VIMO, O3A, OlyCAP, OPHCC <u>Public Health</u>: CCHHS, Syringe Exchange	<u>Education</u>: OESD, based clinics <u>Public Health</u>: CPI <u>Law enforcement</u> <u>Fire and EMS</u> <u>Courts</u> <u>Housing</u>: OlyCAP,

Emergency Department and Jail Diversion	- Hospital or ED-based care coordinators, nurse care managers, social workers, peer navigators, community health workers or equivalent - Primary care-based care coordination for high utilizers of the emergency department - Low-tech solution for integrated referral that includes law enforcement, EMS, ED, behavioral health and SUD care, and primary care, to divert from the jail and ED - Community Paramedic: bi-directional referrals with clinical providers; pre-planned, home-based visits referred from primary care; respond to non-urgent 9-1-1 calls - Larger practices contract with community partners for services	<u>Primary Care</u>: OMP, JSFHC, NOHN, BC, LEI <u>Substance Use Disorder Treatment & and Mental Health Care</u>: RCSG, CG, OPG, PBH, WEOS <u>Hospital</u>: OMC, FCH <u>Payers</u>: SBHO, Mol, AG, CC, UHC, CHPW <u>Community-Based Organization</u>: VIMO, O3A, OlyCAP, OPHCC <u>Law enforcement</u> <u>Fire and EMS</u> <u>Courts</u>
Chronic Disease Prevention and Control	- Bi-directional referrals and care coordination between clinical and community settings to support disease self-management - Evidence-based programs: - Chronic Disease Self-Management Program (CDSMP) - Diabetes Prevention Program (DPP) - Whole Health Action Management (WHAM)	<u>Primary Care</u>: OMP, JSFHC, NOHN, BC, LEI <u>Substance Use Disorder Treatment & and Mental Health Care</u>: Reflections, CG, OPG, PBH, WEOS <u>Hospital</u>: OMC, FCH <u>Community-Based Organization</u>: VIMO, O3A, OlyCAP, OPHCC <u>Payers</u>: SBHO, Mol, AG, CC, UHC, CHPW <u>Education</u>: OESD <u>Public Health</u>: CCHHS

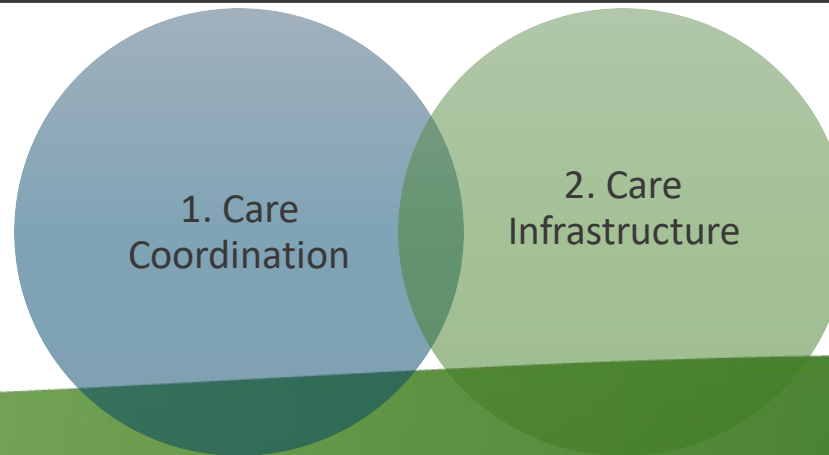
Reproductive, Maternal, and Child Health	- Bi-directional referral networks for well-child visits and immunizations - Bi-directional referral networks to community-based social service supports and parent education - Use substance use and mental health screening tools for pre- and inter-conception with appropriate referral	<u>Primary Care</u>: OMP, JSFHC, NOHN, BC, LEKT <u>Substance Use Disorder Treatment & and Mental Health Care</u>: RCSG, CG, OPG, PBH, WEOS <u>Hospital</u>: OMC, FCH <u>Payers</u>: Mol, AG, CC, UHC, CHPW <u>Community-Based Organization</u>: FS, OPHCC, PW, LCSNW, BGC, GB, OlyCAP <u>Payers</u>: SBHO, Mol, AG, CC, UHC, CHPW <u>Education</u>: OESD <u>Public Health</u>: CCHHS	<u>Public Health</u>
Oral Health Access	- Creation or expansion of access to dental care - Coordinate referrals and scheduling with mobile dental (van) - Integrated platforms for coordinated care between dentists, primary care, and ED (EPIC, WISDOM, or other existing platforms recommended by Arcora)	<u>Primary Care</u>: OMP, NOHN <u>Substance Use Disorder Treatment & and Mental Health Care</u>: RCSG, CG, OPG, PBH, WEOS <u>Hospital</u>: OMC, FCH <u>Payers</u>: Mol, AG, CC, UHC, CHPW <u>Community-Based Organization</u>: VIMO, O3A, OlyCAP <u>Dental</u>: Sea Mar Dental Clinic <u>Education</u>: OESD <u>Public Health</u>: CCHHS	<u>Philanthropic Foundations</u>

Implementation Partner Change Plans

Physical Health Behavioral Health (PHBH)

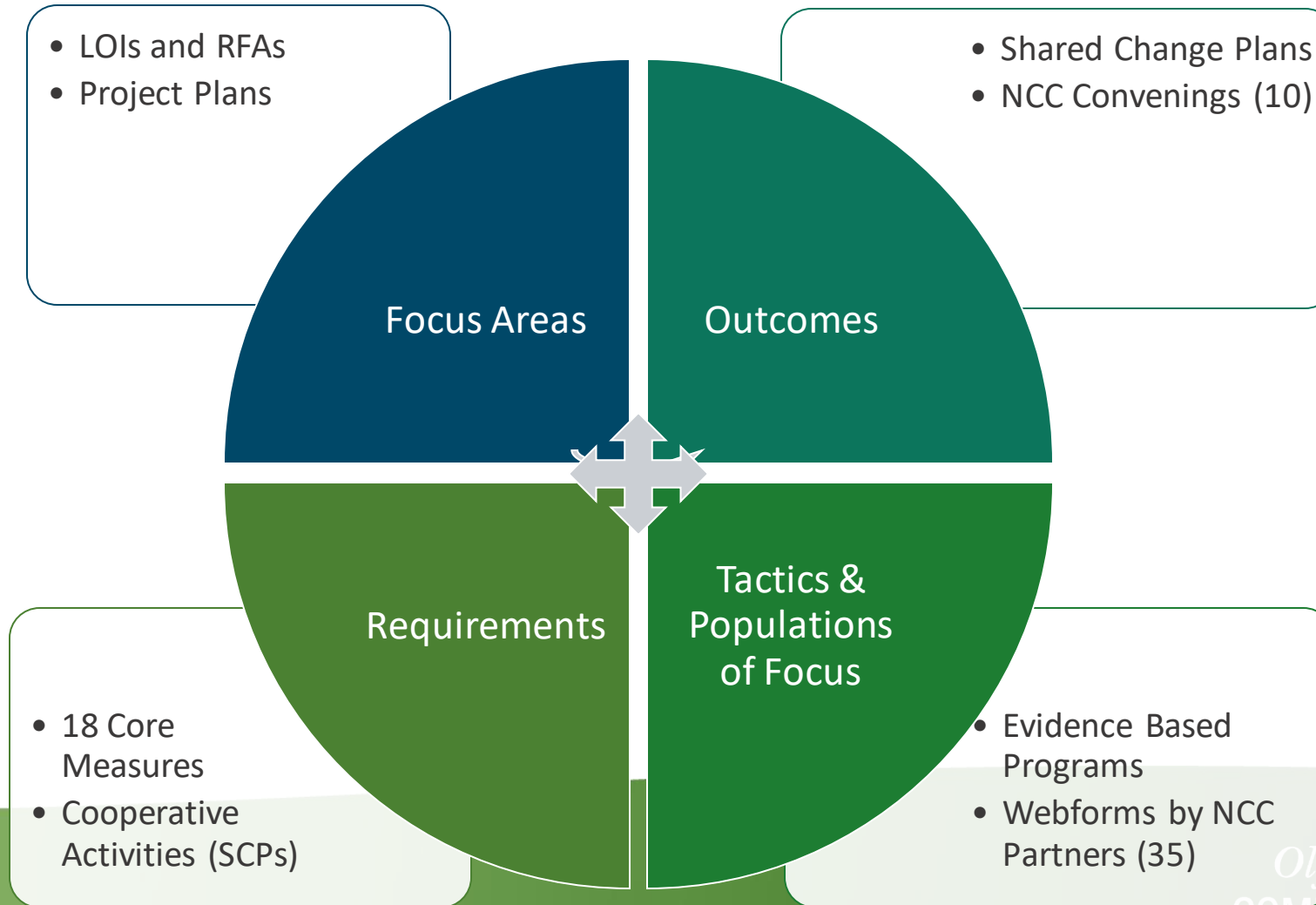


Community Based Organizations and Social Services (CBOSS)

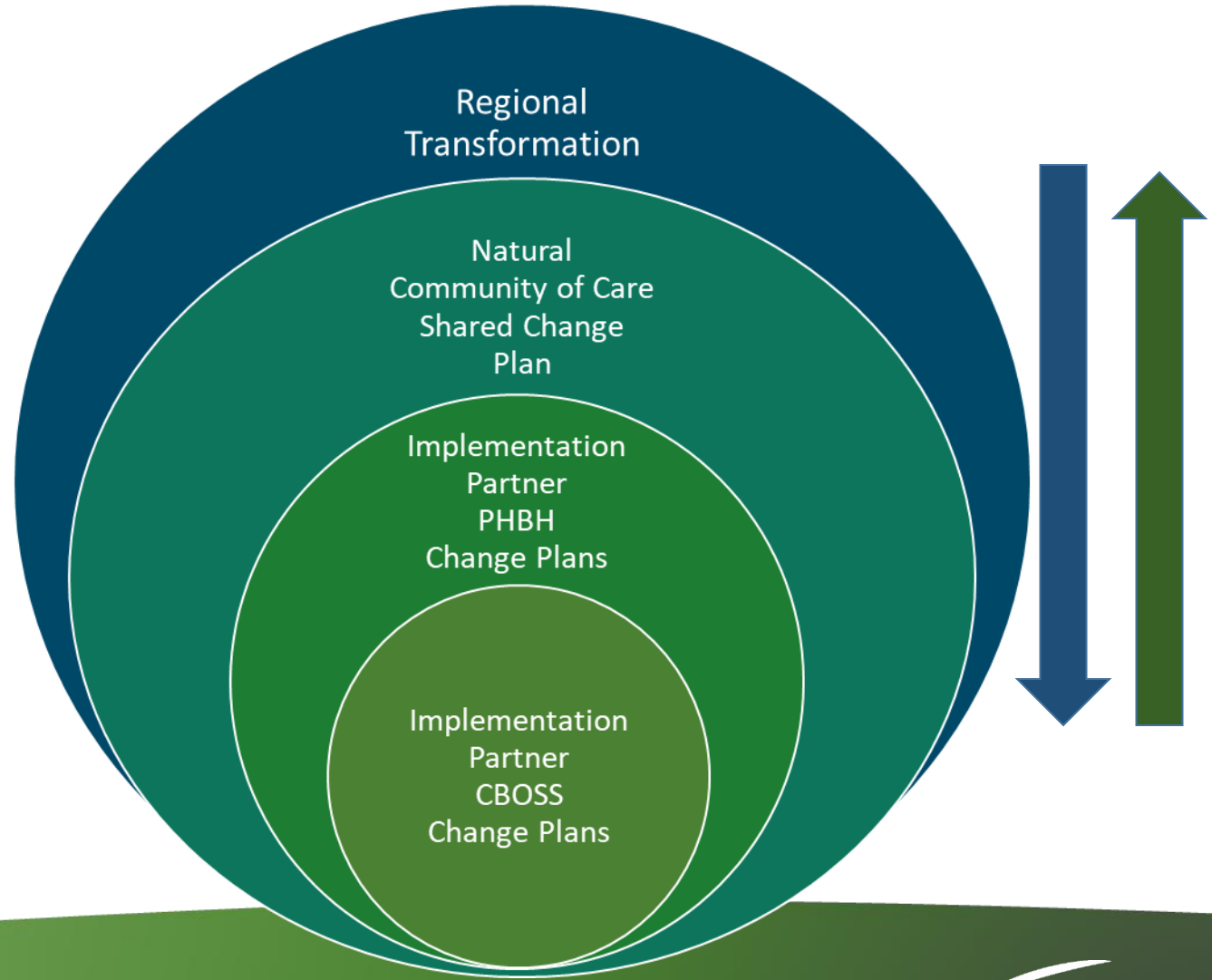
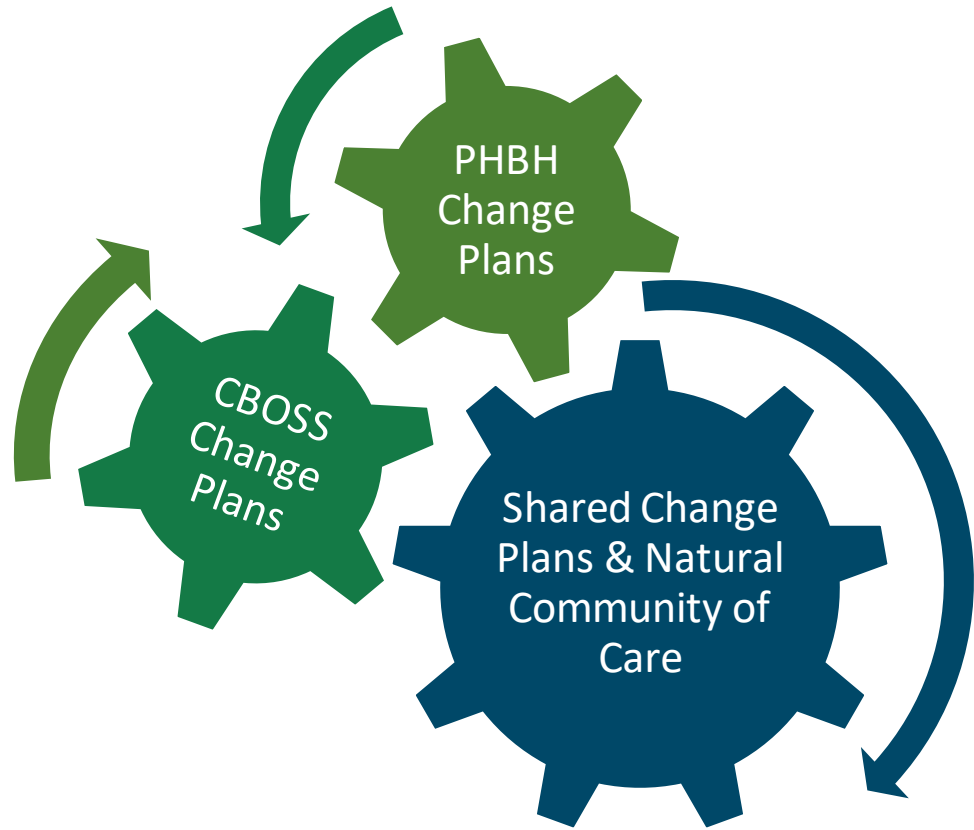


Development of Change Plans

- From Version 1.0 to 3.0 through 2 rounds of pilots with 10 partners



It's All Coming Together!



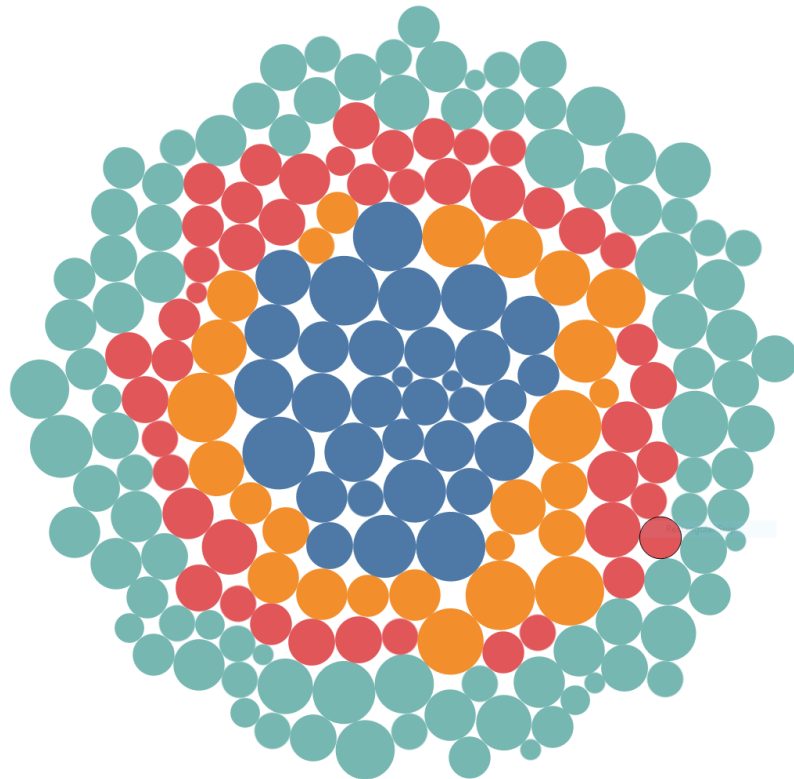
PHBH Implementation Partners by Change Plan Type

	Partner	NCC	Primary Care	Behavioral Health	Hospital
1	Bogachiel and Clallam Bay Primary Care Clinics	Clallam			
2	Olympic Personal Growth	Clallam			
3	Reflections Counseling Services Group	Clallam			
4	Peninsula Behavioral Health	Clallam			
5	West End Outreach Services	Clallam			
6	Jamestown Family Health Clinic	Clallam			
7	North Olympic Healthcare Network	Clallam			
8	Sophie Trettevick Indian Health Center	Clallam			
9	Forks Community Hospital	Clallam			
10	Olympic Medical Center, Hospital	Clallam			
11	Olympic Medical Center (OMP)	Clallam			
12	Beacon of Hope, Safe Harbor Recovery	Jefferson			
13	Discovery Behavioral Health	Jefferson			
14	Jefferson Healthcare	Jefferson			
15	Northwest WA Family Medical Residency	Kitsap			
16	Harrison Health Partners Primary Care Clinics	Kitsap			
17	Kitsap Children's Clinic	Kitsap			
18	Kitsap Medical Group	Kitsap			
19	Peninsula Community Health Services	Kitsap			
20	Port Gamble S'Klallam Wellness Center	Kitsap			
21	Kitsap Mental Health Services	Kitsap			
22	Kitsap Recovery Center	Kitsap			
23	West Sound Treatment Center	Kitsap			
24	Harrison Medical Center	Kitsap			

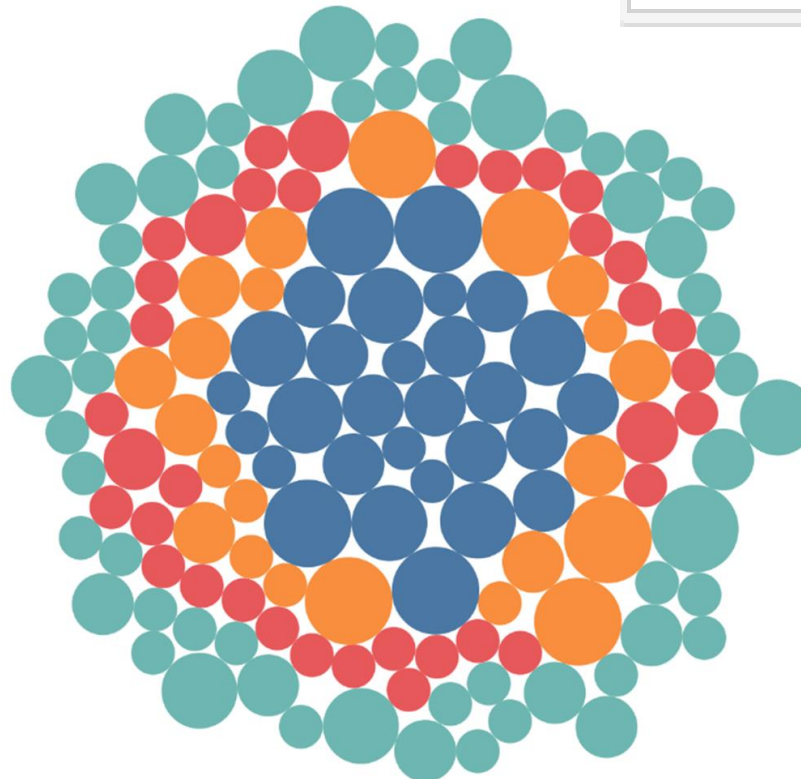
PHBH Change Plan Tactics

Domain

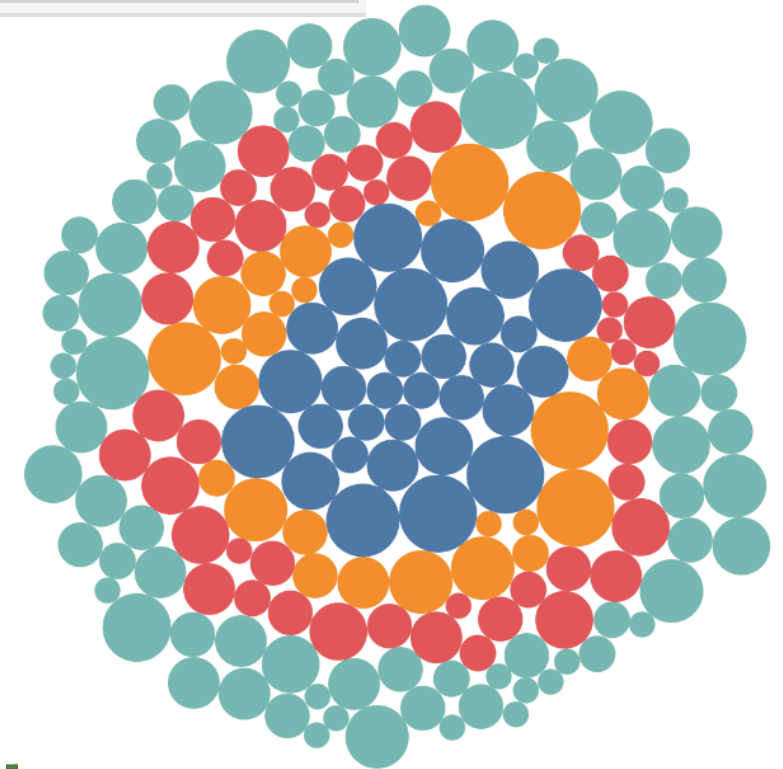
- Care Coordination
- Care Integration
- Care Transformation
- Care Infrastructure



CLALLAM

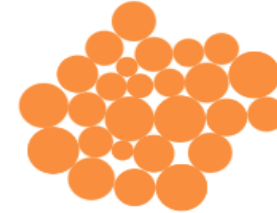
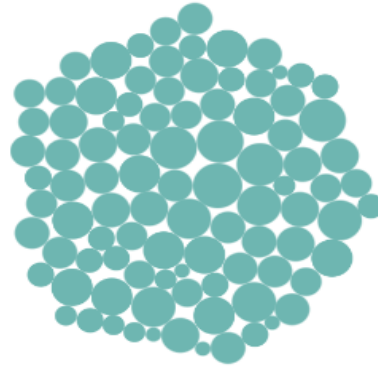
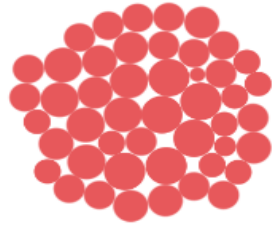


JEFFERSON

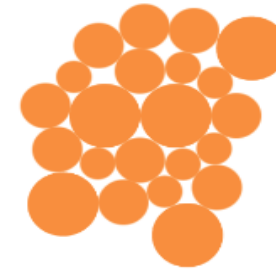


Care Coordination Care Integration Care Transformation Care Infrastructure

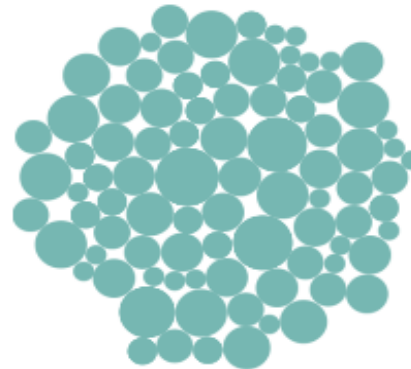
Clallam



Jefferson



Kitsap



Domain

- Care Coordination
- Care Integration
- Care Transformation
- Care Infrastructure

Olympic Reporting and Community Activities (ORCA)



Community Highlights

Resource Center

About Us

Help

My Profile

Logout



Communities > My Communities > OCH > OCH Change Plan

Manage

Physical Health Behavioral Health Change Plan

Type

Behavioral Health

Organization

Reflections Counse

Year

2018

Domain

Care Coordination

Change Plan

Progress to Date

Care Coordination : 2018

Save Change Plan



Focus Area

Outcomes

Start Date

Target Date

Tactic

Sub Tactic

1) Population Health Management

A) Population-based platform is systematically utilized to follow subpopulations for more efficient and effective care

9/1/2017



6/30/2019



4 items checked



1) Population(s) of focus:

16 items checked



Physical Health Behavioral Health Change Plan

Type

Behavioral Health ▼

Organization

Organization

Year

Year

Domain

Care Coordination ▼

Change Plan

Care Coordination : 2018

Focus Area

Outcomes

1) Population Health Management

A) Population systematic subpopulation effective ca

Reflections Counse ▼

Olympic Personal Growth

Peninsula Behavioral Health

Peninsula Community Health Services

Port Gamble S'Klallam Tribe

Reflections Counseling Services Group

Sophie Trettevick Indian Health Center

West End Outreach Services

West Sound Treatment Center

2018 ▼

Save Change Plan



Target Date

Tactic

Sub Tactic

6/30/2019



4 items checked ▼

1) Population(s) of focus:

16 items checked ▼

Physical Health Behavioral Health Change Plan

Type

Behavioral Health ▼

Organization

Reflections Counse ▼

Year

2018 ▼

Domain

Care Coordinatio

Change Plan

Progress to Date

Care Coordination : 2018

Focus Area

Outcomes

Start Date

Target Date

1) Population
Health
Management

A) Population-based platform is systematically utilized to follow subpopulations for more efficient and effective care

9/1/2017



6/30/2019



- ☒ 1) Standardize identification of and track sub-populations needing more efficient management and effective care based on conditions and/or risk levels
- ☒ 2) Track those with targeted conditions and/or at high-risk to ensure continued engagement and that conditions are treated to target
- ☒ 3) Empanel patients/clients to a care team
- ☒ 4) Disaggregate patient/client data by subpopulations to identify and track inequities

4 items checked ▼

1) Population(s) of focus:

16 items checked ▼

Physical Health Behavioral Health Change Plan

Type

Behavioral Health ▼

Organization

Reflections Counse ▼

Year

2018 ▼

Domain

Care Coor ▼

Change Plan

Progress to Date

Care Coordination : 2018

Focus Area

Outcomes

Start Date

Target Date

1) Population Health Management

A) Population-based platform is systematically utilized to follow subpopulations for more efficient and effective care

9/1/2017



6/30/2018

- ☒ a) Substance Use Disorder
- ☒ b) Opioid Use Disorder
- ☒ c) Co-occurring Mental health and Substance Use Disorder
- ☒ d) Behavioral health and chronic disease
- ☒ e) Depression
- ☒ f) Pediatric oral health
- ☒ g) Adult oral health
- ☒ h) Asthma

16 items checked ▼

Physical Health Behavioral Health Change Plan

Type

Behavioral Health ▼

Organization

Reflections Counse ▼

Year

2018 ▼

Domain

Care Coo ▼

Change Plan

Progress to Date

Care Coordination : 2018

Focus Area

Outcomes

Start Date

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1) Population
Health
Management

A) Population-based platform is systematically utilized to follow subpopulations for more efficient and effective care

9/1/2017



6/30/201

- ☒ a) Substance Use Disorder
- ☒ b) Opioid Use Disorder
- ☒ c) Co-occurring Mental health and Substance Use Disorder
- ☒ d) Behavioral health and chronic disease
- ☒ e) Depression
- ☒ f) Pediatric oral health
- ☒ g) Adult oral health
- ☒ h) Asthma

16 items checked ▼

Physical Health Behavioral Health Change Plan

Type

Behavioral Health ▼

Organization

Reflections Counse ▼

Year

2018 ▼

Domain

Care Coordination ▼

 Manage ▼

 Report Data

 Sites

 User Assignments

Change Plan

Progress to Date

Care Coordination : 2018

Save Change Plan



Focus Area

Outcomes

Start Date

Target Date

Tactic

Sub Tactic

1) Population
Health
Management

A) Population-based platform is systematically utilized to follow subpopulations for more efficient and effective care

9/1/2017



6/30/2019



4 items checked



1) Population(s) of focus:

16 items checked



Change Plan Entries

This page allows you to view Drivers entered for all Organizations. It also allows you to see all entries at one glance. To export all Drivers into an Excel format, simply click on the corresponding tab at the top of the page and then select Export to CSV.

Drivers		All Entries		
Jamestown Family Health Clinic	Change Plan	2018	8/17/2018 6:52:58 PM	
Jamestown Family Health Clinic	Change Plan	2018	8/17/2018 9:09:18 PM	
Jamestown Family Health Clinic	Change Plan	2018	8/17/2018 9:11:22 PM	
Jefferson Healthcare, H	Change Plan	2018	8/20/2018 4:50:15 PM	
Jefferson Healthcare, H	Change Plan	2018	8/20/2018 4:58:49 PM	
Jefferson Healthcare, H	Change Plan	2018	8/20/2018 5:02:01 PM	
Jefferson Healthcare, H	Change Plan	2018	8/30/2018 6:48:09 PM	
Jefferson Healthcare, H	Change Plan	2018	8/30/2018 6:49:41 PM	
Jefferson Healthcare, PC	Change Plan	2018	8/20/2018 3:47:14 PM	

	A	B	C	D	E	F	G	H	I	J	K	L	N	P	Z	AA	AB	AC
1	Organizati	Primary C	Behaviora	Hospital	Year	Quarter	Domain	Focus Area	Outcomes	Start Date	Target Dat	Tactic	SubTactic	SubTactic	SubTactic	SubTactic	SubTactic	SubTact
2	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	A) Populati	10/1/2018	1/1/2019	1) Standard	b) Opioid U	Population				
3	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	A) Populati	10/1/2018	1/1/2019	1) Standard	c) Co-occu	Population				
4	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	A) Populati	10/1/2018	1/1/2019	1) Standard	p) High uti	Population				
5	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	A) Populati	10/1/2018	1/1/2019	1) Standard	q) High uti	Population				
6	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	A) Populati	10/1/2018	1/1/2019	2) Track th		NA				
7	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	A) Populati	10/1/2018	1/1/2019	3) Empane		NA				
8	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	B) Social d	10/1/2018	1/1/2019	3) Patients	a) Housing	Social Dete				
9	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	B) Social d	10/1/2018	1/1/2019	3) Patients	b) Employr	Social Dete				
10	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	B) Social d	10/1/2018	1/1/2019	3) Patients	c) Transpo	Social Dete				
11	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	B) Social d	10/1/2018	1/1/2019	3) Patients	d) Food ste	Social Dete				
12	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	B) Social d	10/1/2018	1/1/2019	3) Patients	e) Educatio	Social Dete				
13	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	C) Care co	12/1/2018	1/1/2019	1) Organiz	b) Patients	Population				
14	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	C) Care co	12/1/2018	1/1/2019	1) Organiz	c) Patients	Population				
15	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	C) Care co	12/1/2018	1/1/2019	1) Organiz	d) Patients	Population				
16	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	C) Care co	12/1/2018	1/1/2019	1) Organiz	h) All patie	Population				
17	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	C) Care co	12/1/2018	1/1/2019	1) Organiz	i) Coordina	Population				
18	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	C) Care co	12/1/2018	1/1/2019	3) Sign Bus		List Partne	DBH	JHC	OlyCap	Superior
19	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	1) Populati	C) Care co	12/1/2018	1/1/2019	4) Create a		NA				
20	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	2) Shared (A)	Streamli	10/1/2018	1/1/2019	1) Impleme		NA				
21	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	2) Shared (A)	Streamli	10/1/2018	1/1/2019	2) Sign inte		List Partne	DBH	JHC	OlyCap	Superior
22	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	2) Shared (A)	Streamli	10/1/2018	1/1/2019	5) Establis		NA				
23	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	3) ED Dive	B) Organiz	6/1/2017	6/2/2017	3) Create r		NA				
24	Beacon of	FALSE	TRUE	FALSE	2018	Change Pla	Care Coord	3) ED Dive	C) Patients	7/15/2017	#####	5) Follow-u		NA				

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14

Thank you, Phil!

16 Domain

17 Care Coordination

18 ED Diversion

19 Jail Diversion

20 Individuals utilizing the criminal justice system are linked to a patient-centered medical home and appropriate services to treat mental health, substance use disorders and/or co-occurring disorders

21 Services are provided to individuals to keep them out of jail

22 Population Health Management

23 Care coordination protocols that include screening, appropriate referral, and closing the loop on referrals are developed to connect specific subpopulations to clinical or community services

24 Population-based platform is systematically utilized to follow subpopulations for more efficient and effective care

25 Social determinants of health (SDOH) are assessed and integrated into standard practice

26 Shared Care Management

27 Streamlined process is in place for information to be shared in a timely manner for shared patients/clients

28 Care Integration

29

30

README Raw Data Master Data Master Pivot OCC Team Pivot Data + Dummy Orgs

	B	C	D	E	F
Beacon of Hope, Safe Harbor Recovery					
Bogachiel and Clallam Bay Primary Care Clinics					
Discovery Behavioral Health					
Forks Community Hospital					
Harrison Health Partners Primary Care Clinics					
	26	33	19	26	21
	4	3	3	8	3
	1	0	0	0	0
	0	0	0	0	0
	1	0	0	0	0
	18	29	13	16	14
	7	11	4	8	3
	6	13	5	1	8
	5	5	4	7	3
	3	1	3	2	4
	3	1	3	2	4
	15	18	5	0	18



COMMUNITY of HEALTH

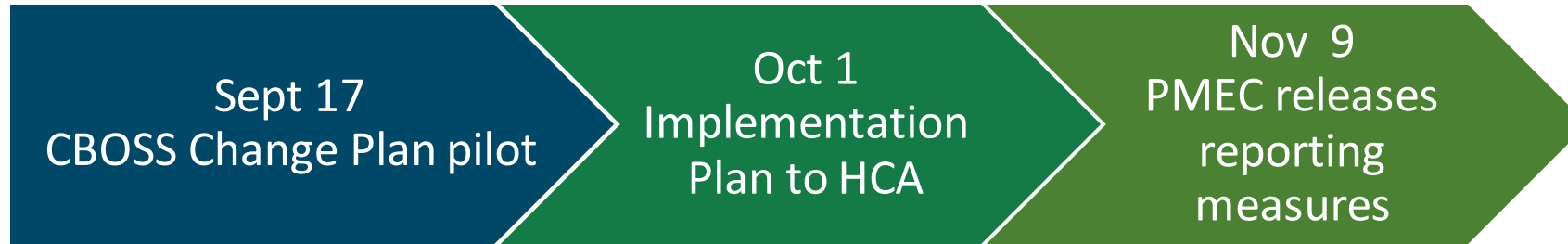
Clallam • Jefferson • Kitsap

Using ORCA

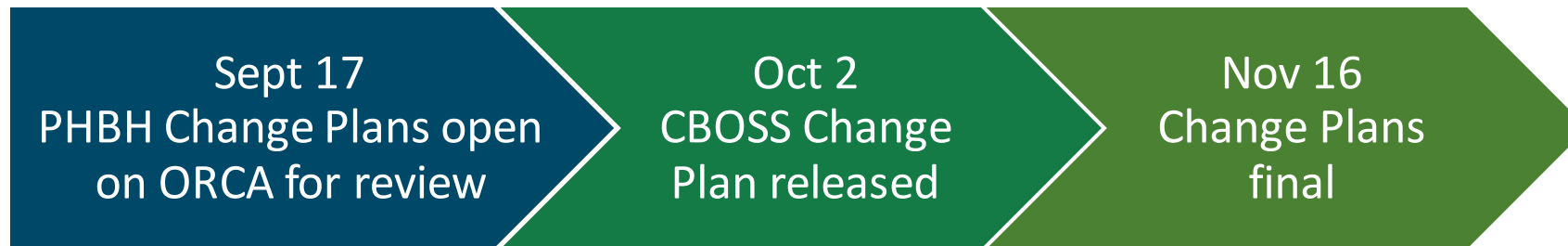
- Analyze Outcomes and Tactics data to evaluate:
 - Technical assistance needs
 - Training needs
 - HIT/E and other infrastructure needs (i.e. Digital HIT Commons)
 - Identify potential/necessary partnerships
 - Popular Tactics that were selected
 - Gaps in Outcomes or Tactics that need addressing
- Communities: interactive information sharing and learning
- Reporting Function and Quality Improvement Plan (Dec)

Timelines

Internal



External



MTP Fund Allocation

First Installment

Elya Prystowsky, PhD
Executive Director
Olympic Community of Health

Dan Vizzini
Policy Analyst and Financial Modeling Consultant
Oregon Health Sciences University

Transformation Vision

1. Accessible, patient-centered healthcare system that effectively integrates physical, behavioral and dental health services
2. Effective linkages between primary care, social services and other community-based service providers
3. Common data metrics and shared information exchange
4. Provider adoption of value-based care contracts

Olympic Region “up-to” MTP amounts

Category	\$
Clallam Natural Community of Care	\$5,200,000
Jefferson Natural Community of Care	\$2,800,000
Kitsap Natural Community of Care	\$9,300,000
Regional Infrastructure and Training (6BBs, Commons, Dental Van)	\$1,700,000
Project Management and Coordination	\$3,600,000
Reserves and Contingencies	\$1,200,000
Total “Up-To” MTP Revenue	\$23,800,000

Estimated 2018-2021 “up-to” incentives by NCC and Change Plan

	Clallam 28%	Jefferson 16%	Kitsap 55%	Total 100%
Primary Care Change Plans	\$2,603,000	\$1,498,000	\$5,063,000	\$9,164,000
Behavioral Health Change Plans	\$1,464,000	\$843,000	\$2,848,000	\$5,155,000
Community Based Organization Change Plans	\$404,800	\$233,200	\$787,700	\$1,425,700
Reserves & Contingencies	\$168,700	\$97,200	\$328,200	\$594,100
Total Potential MTP Revenues	\$4,640,500	\$2,671,400	\$9,026,900	\$16,338,800

Hospitals: Up to \$100,000 per hospital per year (total \$1,600,000) not included in NCC estimates above

PH/BH Implementation Partners

Clallam NCC

Bogachiel and Clallam Bay Primary Care Clinics	PC
Forks Community Hospital	HOS
Jamestown Family Health Clinic	PC/BH
North Olympic Healthcare Network	PC/BH
Olympic Medical Center, PC	PC/HOS
Olympic Personal Growth	BH
Peninsula Behavioral Health	BH
Reflections Counseling Services Group	BH
Sophie Trettevick Indian Health Center	PC/BH
West End Outreach Services	BH

Jefferson NCC

Beacon of Hope, Safe Harbor Recovery	BH
Discovery Behavioral Health	BH
Jefferson Healthcare	PC/HOS

Kitsap NCC

Harrison Health Partners PC Clinics	PC
Kitsap Children's Clinic	PC
Kitsap Medical Group	PC
Kitsap Mental Health Services	BH
Kitsap Recovery Center	BH
NW Washington Family Medical Residency	PC
Peninsula Community Health Services	PC/BH
Port Gamble S'Klallam Tribe	PC/BH
West Sound Treatment Center	BH

Estimated PC/BH Incentives for 2018

- Preliminary estimates based on submitted change plans, attributed lives (PC partners) and encounters (BH partners).
- Lives and encounters are still subject to final confirmation, and changes plans are subject to further review and discussion with partners.

	First Payment	Second Payment	Total
Clallam NCC			
Bogachiel and Clallam Bay Primary Care Clinics	\$31,000	\$32,000	\$64,000
Jamestown Family Health Clinic	\$185,000	\$170,000	\$355,000
North Olympic Healthcare Network	\$87,000	\$101,000	\$190,000
Olympic Medical Center, PC	\$141,000	\$124,000	\$266,000
Olympic Personal Growth	\$6,000	\$12,000	\$19,000
Peninsula Behavioral Health	\$77,000	\$65,000	\$142,000
Reflections Counseling Services Group	\$7,000	\$12,000	\$20,000
Sophie Trettevick Indian Health Center	\$4,000	\$19,000	\$23,000
West End Outreach Services	\$11,000	\$10,000	\$23,000
Jefferson NCC			
Beacon of Hope, Safe Harbor Recovery	\$22,000	\$39,000	\$62,000
Discovery Behavioral Health	\$83,000	\$65,000	\$149,000
Jefferson Healthcare	\$217,000	\$217,000	\$435,000
Kitsap NCC			
Harrison Health Partners PC Clinics	\$27,000	\$54,000	\$83,000
Kitsap Children's Clinic	\$98,000	\$80,000	\$179,000
Kitsap Medical Group	\$11,000	\$53,000	\$65,000
Kitsap Mental Health Services	\$235,000	\$194,000	\$430,000
Kitsap Recovery Center	\$23,000	\$35,000	\$59,000
NW Washington Family Medical Residency	\$308,000	\$253,000	\$563,000
Peninsula Community Health Services	\$338,000	\$349,000	\$687,000
Port Gamble S'Klallam Tribe	\$22,000	\$51,000	\$73,000
West Sound Treatment Center	\$23,000	\$16,000	\$39,000

Summary 2018 MTP Payments

Estimated 2018 Payments from Financial Executor Portal	\$
Total funds available for distribution available now	\$5,600,000
Pay-for-Reporting revenue available November 2018	\$2,900,000
MTP payments to Primary Care and Behavioral Health Implementation Partners	\$3,665,00
MTP payments to Hospital Implementation Partners	\$400,000
MTP payments to CBO and Social Service Implementation Partners	\$357,000
MTP payments to Olympic Community of Health (food)	\$10,000
MTP payments for Six Building Blocks (opioid response)	\$220,000
Carry Over <i>for future MTP payments and reserves</i>	\$4,068,000

Caveats

- Amounts are subject to change once we settle on final measurements of scale for all partners and change plans
- Implementation Partners may opt out when they see these figures
- Implementation Partners will have two windows to amend and finalize their Change Plans.
 - Sept 17-28
 - Nov 6-16
- Second payment will depend on the final Change Plans.

Board Retreat Update

Elya Prystowsky, PhD
Executive Director
Olympic Community of Health

Board Retreat: Overview

Goal

Planning a renewed direction

Date

November 2

Location

Port Gamble S'Klallam

Attendees

Board Members and Alternate Members

Forecast

Five years from now (2019-2023)

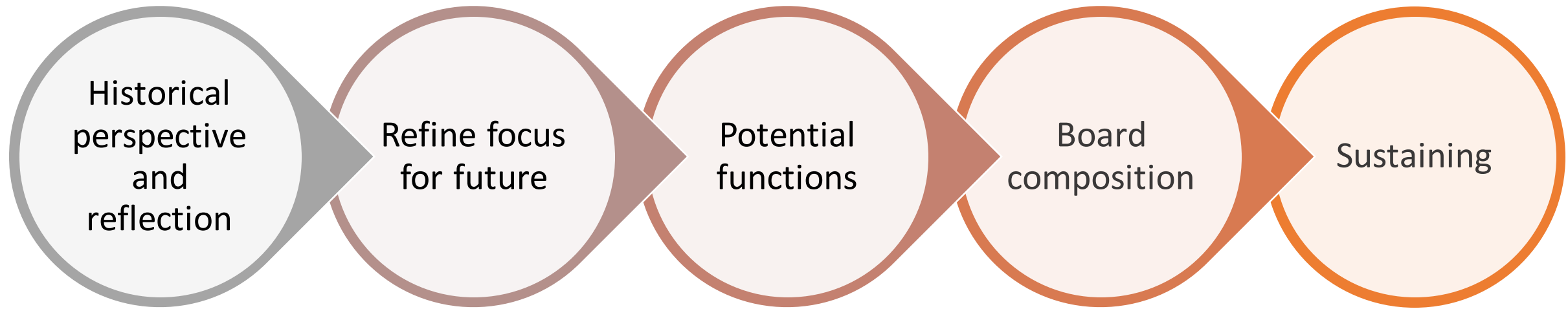
Agenda

Board Business: 11 am to 12 pm

Lunch: 12 to 12:30 pm

Board Retreat: 12:30 to 4 pm

Board Retreat: Objectives



Oral health access
End-of-life planning
Housing
Chronic disease prevention
Health equity

Convening
Collaborative action
Advocacy
Resource development
Sharing best practice
Leveraging resources
Monitoring, analysis and reporting
Data governance
Community and Tribal engagement

Membership
Public-private partnership
Philanthropy
Services

Adjourn

You are all welcome to join us for a Welcome Banquet for
Director Sue Birch from the WA Health Care Authority



שנה טובה
Shana Tova!