

Olympic Community of Health
Agenda (Action items are in red)

Board of Directors Meeting
September 12, 1:00-3:00 pm
OCH HQ

Key Objective: To collaboratively advance the work of Olympic Community of Health

#	Time	Topic	Purpose	Lead	Attachment
1	1:00	Welcome, introductions, land acknowledgement, housekeeping	Welcome	Mike Maxwell	
2	1:15	Consent agenda	Action	Mike Maxwell	1. BOD Minutes from August 8, 2022 2. September Executive Director Report 3. Letter to HCA Procurement
3	1:20	Public Comments (2-minute max)	Information	Mike Maxwell	
4	1:25	Board Member Elections	Action	Celeste Schoenthaler	4. SBAR
5	1:45	Cross-ACH Statewide Association & Lobbyist	Action	Celeste Schoenthaler	5. SBAR
6	2:10	Care Connect Overview	Information	Ren Mack-Hazelwood & Miranda Burger	6. Care Connect Flyer
7	2:20	Expanding the Table funded projects	Information	Miranda Burger	7. Expanding the Table Summary
8	2:35	Fourth Coffee Break Video	Information	Amy Brandt	
9	2:55	Good of the Order – Board member and public comments (2-minute max)	Information	Mike Maxwell	
10	3:00	Next meeting & Adjourn October 10 Location: <u>7 Cedars Hotel & Casino</u> Lunch provided prior to the meeting, and everyone is welcome at a post-meeting happy hour.	Information	Mike Maxwell	

Board of Director's Meeting Minutes

Date: 08/08/2022	Time: 1:00 PM	Location: 7 Cedars Hotel, Jamestown S'Klallam
Chair In-Person: Michael Maxwell, <i>North Olympic Healthcare Network</i> Members Attended In-Person: Bobby Beeman, <i>Olympic Medical Center</i>; Brent Simcosky, <i>Jamestown S'Klallam Tribe</i>; Caitlin Safford, <i>Amerigroup</i> (virtually until 1:17); Cherish Cronmiller, <i>Olympic Community Action Programs</i>; Stephanie Lewis, <i>Salish Behavioral Health Administrative Services Organization</i>; Wendy Sisk, <i>Peninsula Behavioral Health</i> Members Attended Virtually: G'Nell Ashley, <i>Reflections Counseling</i>; Heidi Anderson, <i>Forks Community Hospital</i>; Kim Freewolf, <i>Port Gamble S'Klallam Tribe</i>; Laura Cepoi, <i>Olympic Area Agency on Aging</i>; Lori Kerr, <i>St. Michael Medical Center</i>; Stormy Howell, <i>Lower Elwha Klallam Tribe</i> Non-Voting Members Attended In-Person: Jim Novelli, <i>Discovery Behavioral Healthcare</i>; Jolene Kron, <i>Salish Behavioral Health Administrative Services Organization</i>; Laura Johnson, <i>United Healthcare Community Plan</i> Non-Voting Members Attended Virtually: Beth Johnson, <i>Coordinated Care</i>; Derek Gulas, <i>United Healthcare</i>; Laurel Lee, <i>Molina Healthcare</i> Guests and Consultants Attended Virtually: Lori Fleming, <i>Jefferson County Community of Health Improvement Plan</i>; Thomas Dingus, <i>DZA</i> OCH Staff: Amy Brandt, Celeste Schoenthaler, Debra Swanson, Miranda Burger		

Minutes

Facilitator	Topic	Discussion/Outcome	Action/Results
Mike Maxwell	Welcome, introductions, land acknowledgement, housekeeping		
Mike Maxwell	Consent agenda	1. BOD Minutes from June 13, 2022 2. August Executive Director Report 3. Recent Board Attendance 4. HCA response regarding interpretation of VBP P4P data	Minutes APPROVED unanimously Consent Agenda APPROVED unanimously

Mike Maxwell	Public Comments (2-minute max)		
Tom Dingus Dan Cleveland	2021 Financial Audit	5. OCH Financial Statements 2021 6. OCH Board Communication Letter 96% of OCH expenses are spent on programs and initiatives. The clarity of the presentation is helpful, thank you to DZA. Thank you to Nathanael and Debra for a smooth audit.	Board of Directors accepts the 2021 Financial Audit as presented. APPROVED unanimously.
Mike Maxwell	Nominating Process for September Board Elections	7. SBAR 8. Current Board Roster	The Board of Directors approves the process for nominating Board members to current vacant seats and those with terms ending in September of 2022. APPROVED unanimously.
Mike Maxwell	Letter to HCA regarding upcoming procurement of MCOs	9. Letter 10. Email for context HCA says they intend to decrease the complexity, but each additional plan creates an administrative burden. People move from county to county, so the plans need to be statewide. Yet the complexity of too many has been difficult. For tribes it is very difficult. Jamestown has asked to have just one for the tribes. But then it becomes difficult to find where to go for care. More plans should create competition, but did it ever really create competition?	Motion made to approve the letter, with the addition of new notes added by Celeste. APPROVED MCO's abstained.

		-It depends on the region, less competition in the smaller regions. If the 5 MCOs were distributed in a specific way, it may reduce the burden. This needs to be thought through more. In larger regions, they need more MCOs. The number of plans need to be reduced while still providing a choice. These are the competing realities.	
Miranda Burger	Update: Action Collaboratives	Has the VBP workgroup conversation changed? – No, we still earn the 2021 dollars in 2023. HCA clarified that they chose the wrong metric, and it has affected our region. JD has been an active member on the VBP workgroup. There are not any VBP incentives for 2022. HCA has not clarified how the renewal waiver dollars will be earned. Bidirectional integration will still be important, but it is unclear how it will affect funding. The action collaboratives will encourage broader engagement and locally driven priorities. We are very good at identifying the problems, but will action collaboratives work to find solutions and action steps? -Yes, the next series of	

		meetings will focus on creating intentional action items. This will be presented to the board in December by the workgroups.	
Amy Brandt	Third Coffee Break Video	This format is very affective. The authenticity and passion come across well. These videos tell an important story very well. Jamestown had a lot of opposition for building The Healing Clinic and realized they needed to stop fighting and keep telling our story, keep educating people. OlyCAP had experiences with opposition to affordable housing and shelters. People did come around sometimes after they learn more. The next video will focus on trauma informed care.	
Mike Maxwell	Good of the Order – Board member and public comments (2-minute max)	The Healing Clinic opened on July 6. They had 40 intakes in a month, which is much more than expected. Almost every patient had fentanyl in their system. This is difficult to treat, requiring higher doses. There is an open house on August 20th 12-3. Everyone is welcome. OlyCAP's open air shelter with mobile shower is up and running. The permanent shelter will open in November with 40 spaces available. OlyCAP still has COVID funds available.	

		PBH bought a hotel with 26 housing units. The bureaucratic barriers have been challenging but they are hoping to occupy the site this year. KMHS hired a new CEO. NOHN is renovating a 1930's building on Front St. There is no access to vision care for those on Medicaid in the region. NOHN is hiring to fill that gap. CMS came through for OMC and they can now bring more Medicare services back to Sequim. Forks Hospital is going to expand their bed license and long-term care license. They have lost 5 million because Medicaid does not reimburse enough. For the current residents, nothing will change, they will still be covered by Medicaid. Forks have raised wages to remain competitive.	
Mike Maxwell	Next meeting & Adjourn September 12 Location: OCH HQ in Port Hadlock Board/Partner Celebration to follow at HJ Carroll Park in Chimacum – come one, come all! Have you RSVPd? Note: NO lunch prior, so plan ahead		

Monthly Executive Director report to the OCH Board of Directors – September 2022

- Hot Topics
 - OCH staff are preparing for **site visits with all contracted partners**. OCH staff will travel across the Olympic region to learn about partner successes and ways to support the great work happening. Site visits will be conducted for partners contracted with OCH for MTP Year 6, Expanding the Table, and Youth Engagement.
 - OCH is hosting a **regional Care Coordinator convening** on September 22. The purpose of this convening is to bring together the regional health and human services workforce that connects people with resources they need to lead healthy lives. Bringing the on-the-ground workforce together will empower a larger community of care across Clallam, Jefferson, and Kitsap counties. [Learn more and register here.](#)
- Strategic Plan Focus Areas & Action Collaboratives.
 - **Together, recovery is possible** – Met on August 16 to review work to date and prioritize actions.
 - **Individual needs are met timely, easily, and compassionately** – Met on August 24 to review work to date and prioritize actions.
 - **Access to the full spectrum of care** – Met on August 17 to review work to date and prioritize actions.
 - **Everyone housed** – Met on August 30 to finalize a universal regional result and brainstorm possible actions.
- Subcommittee reports/updates
 - **Executive Committee** – Met in late August to review the agenda for the September Board meeting.
 - **Finance Committee** – September meeting was canceled due to Labor Day. Will meet on October 3.
 - **Funds Flow Workgroup** – will meet again in the summer of 2023.
 - **Visioning Taskforce**- Committee is on hold.
- Upcoming meetings and events
 - Value-Based Purchasing Workgroup – September 13 – Port Hadlock
 - Regional Care Coordinator Convening – September 22 – Port Gamble
 - Executive Committee – September 27 – Virtual
 - Finance Committee – October 3 - Virtual
- Administrative & staffing updates
 - No key updates this month.

August 10, 2022

Jason McGill
Assistant Director, Medicaid Programs Division
Health Care Authority
626 8th Ave SE
Olympia, WA 98501

Dear Jason,

Thank you for sharing the announcement in early May regarding the process and timeline for the upcoming procurements for Medicaid Managed Care Organizations (MCOs) and the new low-income uninsured product. In regard to the goals outlined for procurement of Apple Health managed care contracts, Olympic Community of Health (OCH) recommends that HCA procure a baseline of three contracts, with each serving the whole state. Additional MCOs could be procured for the more populous areas of the state.

This type of system would better meet the needs of Medicaid beneficiaries, a population that tends to be transitory. A baseline of MCOs would help to ensure the patient is at the center of the system and could support more consistent coverage and care for the state's most vulnerable patients.

Based on provider interest, OCH is convening a *Value-Based Payment Action Group* in 2022. This group is comprised of local providers, managed care partners, and HCA staff. The group shares the purpose of identifying challenges and gaps to advocate for creative solutions to expand and improve value-based purchasing (VBP) efforts across the three-county region. The group will soon offer to present its findings to HCA regarding local challenges and potential solutions to streamline VBP and administrative stability in the region. As of 2022, the Olympic Region (the smallest region based on percent of Medicaid beneficiaries) now has all five MCOs providing services in the region. This has proven a significant administrative burden in a region with many small providers and it is unclear how the region has benefited from having multiple MCO competitors. The current system limits the region's ability to establish and implement VBP mechanisms in place for panels with small numbers. This has far-reaching impacts in our region, as we have very few large health systems and most providers have small patient panels in context with the rest of the state. If there were fewer MCOs in the region, there could be more VBP arrangements in the region, leading to lower cost of care and improved health outcomes for our region's most vulnerable community members.

Providers (Traditional & Tribal) in the region stand ready to discuss this further as HCA has interest. We appreciate the opportunity to share our feedback and look forward to continued partnership with both HCA and managed care.

Sincerely,



Michael Maxwell, Board President
CEO, North Olympic Healthcare Network



Celeste Schoenthaler
Executive Director, Olympic Community of Health

Olympic Community of Health

SBAR 2022 Board Member Elections

Presented to the Board of Directors on September 12, 2022

Situation

Election of OCH Board members occurs annually, each September.

Background

Director Elections: Per OCH bylaws, "...each Director's term of office shall be for two (2) years, which shall end on the latter of the date of the annual meeting or succession of a new director. At the end of three (3) consecutive terms, each sector has the option to nominate the same Candidate or to nominate a new Candidate to represent the sector on the Board. Term of Office does not apply to Tribes."

"Candidates for Sector Board members shall be nominated by each Sector. Candidates for At-Large representatives will be nominated by the individual interested in participating on the Board. The nominations will be referred directly to the Board for approval. In the event a Sector or At-Large seat cannot nominate a representative within thirty (30) days, the Board, either directly or through a committee, will solicit, receive, and vet nominations, and recommend a representative to the Board."

"Tribes may appoint alternate representatives as desired on the Board of Directors. Tribal representation on the Board of Directors is voluntary."

Board seats with terms ending September 2022:

Sector/At-Large	Current Representative(s)	Notes
Mental Health Treatment	Wendy Sisk Jim Novelli	Wendy is Past President
Private/ Not for profit hospital	Keith Sprague Lori Kerr	

Additional open Board seats:

Open Seat	Current Representative(s)	Notes
Community At-Large	Tom Locke	Tom is retiring and is ready to step back from his seat. Term for this seat ends 9/2023.
Makah Tribe	N/A	Seat is open due to turnover at the Tribe.
Quileute Tribe	N/A	Seat is open due to turnover at the Tribe.

Action

- The mental health treatment sector is re-nominating Wendy Sisk (primary) and Jim Novelli (alternate).
- The private/ not-for-profit sector is re-nominating Keith Sprague (primary) and Lori Kerr (alternate).
- Nominations for the at-large community seat:
 - Roy Walker, Retired, Jefferson County
 - Ciela Meyer, Behavioral Health Coordinator, Olympic Educational Service District, Region
 - _____

Staff next steps:

- Staff will update the Board roster and associated calendar invites.
- Staff will connect with new Board members for paperwork and an orientation to Board operating procedures and norms.
- Staff will connect with the Makah and Quileute Tribes once they've hired new staff to learn if they'd like to have representation on the Board.

Recommended Motions

Motion 1: The Board of Directors elects Wendy Sisk and Jim Novelli to a new two-year term in the mental health treatment sector through September 2024.

Motion 2: The Board of Directors elects Keith Sprague and Lori Kerr to a new two-year term in the private/ not-for-profit hospital sector through September 2024.

Motion 3: The Board of Directors elects _____ to complete the term for the community at-large seat through September 2023.

Motion 4: The Board of Directors directs staff to implement next steps as described above.

Olympic Community of Health

SBAR: Cross-ACH Lobbyist & Statewide Association of ACHs

Presented to the OCH Executive Committee on August 23, 2022

Updated and presented to the OCH Board of Directors on September 12, 2022

Situation

The nine Washington ACHs have collaborated, strategized, and coordinated on an informal basis since 2018. In 2019, the WA ACHs collectively released an RFP to hire a consultant group to strengthen and solidify the partnership. At this time, the ACHs are ready to formalize the partnership by hiring a shared lobbyist and forming a statewide association of ACHs (a new legal entity). The OCH Executive Director seeks approval from the Executive Committee and Board of Directors to participate and allocate dollars accordingly.

Background

Most WA ACHs were established as independent, non-profit organizations in 2017. An informal network of ACH coordination was established in 2018 including regular meetings of the Executive Directors/CEOs, and other ACH affinity groups (communications leads, data leads, etc.). In 2019, the ACHs released an RFP to hire a cross-ACH consultant group to provide a level of formality to the collaborative. The contract for this is held by Better Health Together (Spokane ACH) and each ACH pays a monthly fee for the contract, prorated on a tiered system largely based on the number of Medicaid beneficiaries in a region. In 2022, OCH pays approximately \$1500 per month for this contract. The consultants provide facilitation and for the Executive collaborative and for the many subgroups. They also provide helpful subject matter expertise in a variety of areas.

As the ACHs have grown as independent organizations and will now be included in a second five-year 1115 waiver, we believe it is time for continued evolution of the ACHs in a more formalized way. To this end, we've agreed to hire a part-time lobbyist and to ultimately form a new legal entity as a statewide association of ACHs. Given the timing of the renewal waiver, there is not have time to establish an association prior to hiring a lobbyist, so an RFP for a shared lobbyist was released in mid-August with decisions expected by the end of September. Given the importance of the lobbyist supporting each ACH equally, we've decided to split this cost equally, **for a monthly cost to OCH of approximately \$556 starting in October 2022**. This cost is not in the OCH budget, so approval by the Board is required. It's important for the ACHs to have our own voice in Olympia, as the Health Care Authority, other state agencies, the Governor's office, and legislators do not yet understand the value proposition of ACHs. For the time being, North Sound ACH will hold the contract with the TBD lobbyist and a formal MOU outlining communication and decision-making norms will be signed by each ACH.

Over the coming months, the ACHs will take steps to form a statewide association (likely a 501(c)6). This will begin with a legal consult to understand the various pathways for an association and the steps to establish a new entity. While there are still many details to work out, we expect that the association will hold the consultant contract mentioned above (currently held by BHT), the lobbyist contract (to be held temporarily by NSACH), and to eventually serve as a membership organization of the 9 ACHs, likely with the 9 Executives holding the Board seats. The costs for 2023 are expected to be approximately \$355k.

Draft Estimated 2023 Budget for the ACH Association			
Cost	Annual Amount for all 9 ACHs	Estimated OCH contribution	Notes
Lobbyist contract (12 months)	\$60,000	Annual: \$6,667 Monthly: \$556	Cost to be divided by 9, each ACH pays the same amount <u>Cost begins in October 2022.</u>
Artemis contract (12 months)	\$220,000	Annual: \$18,000 Monthly: \$1500	Cost is currently divvied on a tiered system, largely based on the number of Medicaid lives in a region.
Quarterly in-person meetings of ACH Executives	\$25,000	TBD (at most=\$2780/year)	Assume this will be a tiered payment system
Legal/filing costs	\$10,000	TBD (at most=\$1,112/year)	Assume this will be a tiered payment system
Administrative costs	\$40,000	TBD (at most=\$3,333/year)	Assume this will be a tiered payment system
	\$355,000	At most=\$32,000/year	

Based on an initial conversation with the OCH Executive Committee in July, the OCH ED has shared that clarification and clear processes in the following areas is a must:

- Formal agreement about shared decision making, especially for smaller, more rural ACHs
- Established communications norms, especially during session and to ensure “we’re all rowing in the same direction” as a group of ACHs and also in support/alignment with Board member needs/desires.
- Determining the role for the 9 Boards of Directors in determining a statewide legislative agenda. The OCH Board will review and approve all legislative agenda items.

The ACHs have also met and agree that there are a myriad of other elements to fully understand and discuss as the association is being formed (tax and legal implications, what type of org to establish, etc.)

Action

The OCH ED recommends that the Executive Committee and Board of Directors approve this action. The other 8 ACHs will move forward with or without OCH, so the extra cost is likely worth it. The ED recommends reviewing the work and progress of the lobbyist and association in one year to determine a future path forward.

Recommendation

The OCH Board of Directors approves having OCH participate in a statewide association of ACHs in 2023 as outlined for an annual up-to amount of \$32,000.

The OCH Board of Directors asks that the OCH ED report back regularly and to bring a summary back in one year (August 2023) so the Board can determine a path forward for 2024 and beyond.



Care Connect Washington

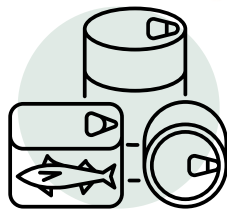


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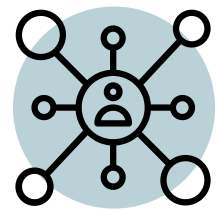


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For more information:

visit olympicch.org/care-connect
email care@olympicch.org
call 360-302-6046

Olympic Community of Health
Expanding the Table Summary

Partner	Sector	Project(s)	Alignment with MTP Year 6	Action Collaborative(s)
Clallam				
Clallam County Health and Human Services	Public Health	SUD-P in Syringe Services Program - Partner with REdicCOVERY program (Olympic Peninsula Community Clinic) to offer SUD-P services during Syringe Services Program hours to improve care and reduce overdoses. Clients will receive immediate warm handoff to treatment and continued recovery services.	• Reduce stigma of substance use disorder • Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	Together, recovery is possible
Clallam Resilience Project	Community-based organization	Handle With Care - Partner with schools, first responders, and other local partners to implement national initiative to coordinate care and employ trauma informed care practices for children experiencing trauma.	• Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	Individual needs are met timely, easily, & compassionately
Olympic Peninsula Community Clinic	Clinical	Re-entry services- Re-entry and wrap around services for incarcerated individuals.	• Reduce stigma of substance use disorder • Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	Together, recovery is possible
Port Angeles Fire Department	First responder	Streamline communication- Technological and communications upgrades (rugged portable computers equipped with EHR technology) to enable 911 crews to contact, refer, and/or dispatch community paramedics and securely and efficiently transfer patient information. In field diagnostic tests- Equip community paramedics with ISTAT machines to complete in-field diagnostic tests.	• Address the health-serving workforce crisis • Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	• Access to full spectrum of care • Individual needs are met timely, easily, & compassionately

Olympic Community of Health
Expanding the Table Summary

Sequim Food Bank	Community-based organization	Lot improvement- Upgrade lots to accommodate mobile fleets of regional partners including NOHN, mobile shower trailer, and more. The improved lot will allow ease of access to clients seeking services, and more space for more services to be provided.	Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	Individual needs are met timely, easily, & compassionately
Serenity House	Community-based organization	Medical respite- Partner with Clallam County Health and Human Services, Olympic Peninsula Community Clinic, Olympic Medical Center, NOHN, and Port Angeles Fire District Community Paramedics to pilot shelter program for unhoused patients in need of a safe place to recover from illness or injury discharging from hospital.	Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	Everyone housed
Jefferson				
Believe in Recovery	Clinical	Mobile SUD Clinic- Partner with Olympic Peninsula Health Services, Jefferson County Behavioral Health Consortium, OlyCAP, and others to provide essential resources and meet clients where they are (rural, high-barrier, isolated community members).	- Reduce stigma of substance use disorder - Address the Health-serving workforce crisis - Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health.	Together, recovery is possible
Kitsap				
City of Poulsbo	First responder	Expanding behavioral health outreach programs - Strengthen local partnerships and improve processes to meet client and local partner needs.	Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	- Access to full spectrum of care - Everyone housed
Eagles Wings	Community-based organization	Process Group Project - Bring landlords, neighbors, and tenants together to combat SUD stigma. Next Steps - Renovation and repairs of 6-bedroom transitional home.	- Reduce stigma of substance use disorder - Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	Everyone housed

Olympic Community of Health
Expanding the Table Summary

Health Connections (Virginia Mason Franciscan Health)	Clinical	Expanding Health Connections and Health Homes - Expanding care coordination programs to Kitsap County via Health Homes and Health Connections.	• Collaborate with at least one local organization or Tribe to enhance community-clinical linkages through care coordination or other strategies that address the social determinants of health	• Access to full spectrum of care • Individual needs are met timely, easily, & compassionately
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