

Location	Attendees
<b>Big Bend Community College</b> 7662 Chanute Street NE Moses Lake WA 98837	Governing Board Members Present: Rick Hourigan, Doug Wilson, Cathy Meuret, Ken Sterner, Molly Morris, Jorge Rivera, Brooklyn Holton, Blake Edwards, Ray Eickmeyer (Quorum Met - 9 present / 8 absent) Governing Board Members Absent: Daniel Angell, Senator Warnick, Rosalinda Kibby, David Olson, Carlene Anders, Barry Kling, Nancy Nash Mendez, Ramona Hicks Public Attendance: Kelsey Gust, Kayelee Miller, Loretta Stover, Kaylin Bettinger, Amelia Davis, Chenia Flint, Rachael Petro, Jamie Hilliard, Jerry Perez, Melodie White, Deb Miller, Mike Lopez, Allison Ball, Meleah Butruille NCACH Staff: Linda Parlette, John Schapman, Caroline Tillier, Wendy Brzezny, Tanya Gleason, Sahara Suval, Mariah Brown, Teresa Davis – Minutes
Agenda Item	Minutes
<ul> <li>Approval of Consent Agenda</li> <li>Declaration of Conflicts</li> <li>Public Comment</li> </ul>	<ul> <li>Rick Hourigan</li> <li>Ken Sterner moved, Molly Morris seconded the motion to approve the consent agenda, motion passed.</li> <li>Conflicts of Interest: Molly Morris disclosed her affiliation with the Colville Tribes.</li> <li>Public Comment – Meleah Butruille from WVC Nursing Program Care Coordination Program – spoke on behalf of Upper Valley Mend, a human services organization in Leavenworth. They provide a free clinic, food bank and emergency services. She spoke about the Care Coordination model of Mend. They were excited to partner with Action Health Partners in the Pathways HUB then found out that the funding is being pulled for that program. She is asking that we reconsider the decision that NCACH is making on Pathways. They had applied for the Molina and Group Health grants and were unsuccessful due to their size. They welcome any help obtaining grant funding to keep this program going.</li> </ul>
Executive Directors Report	<ul> <li>Linda Parlette <ul> <li>Executive Directors met at SeaTac: discussed what all of the MCOs are interested in, learned that we need to work on a shared communication plan.</li> <li>Topics that the Executive Directors are working on with Artemis Team: sustainability, cross ACH Collaboration, CIE exchange efforts, vision for Community Based Care Coordination, HIE &amp; HIT. Linda referenced the sustainability report attached to her letter, and noted that the report will help guide us as we try to decide our future.</li> <li>Kyle Kellum resigned effective March 1st, 2020; took a new position in Nebraska</li> <li>Traci Miller resigned effective March 1st, 2020; took a new position in Anacortes</li> <li>We still have an at Large Board seat still open</li> </ul> </li> </ul>
<ul> <li>Community Based Care Coordination –</li> </ul>	John Schapman and Caroline Tillier John explained that, over the last few months, NCACH staff and Board has been evaluating what we want to do with Project 2B Care Coordination. In the beginning, HCA gave us only one option; the Pathways HUB model. We have been working with Action Health Partners (AHP) to build out the model and have hit many barriers including HCA shifting support to Health Homes, lower than expected enrollment, IT challenges, and struggles with training and expanding the model. We are presenting a decision form to discontinue the contract with AHP. We have been working with AHP to create a wind down plan to ensure a warm handoff for the clients, and to discontinue current contracts that AHP has already entered

	into with others.
	John said that we do not anticipate any budget amendments over the current budgeted amount of \$476,250. Brooklyn noted that we are still working with AHP to close out all of their contracts and there may be some financial obligations to get them out of some of the contracts that they entered into. John replied that if that happens, we will bring decision forms back to the Board if a budget amendment is needed.
	<ul> <li>Discussion:</li> <li>Absorbing lessons learned – what will the path forward be? We need to make decisions by June to preserve funding from HCA. Caroline plans to work closely with Deb. While the model may have failed, there are key components that may need to be preserved.</li> <li>Linda noted the Elya at Olympic ACH did not adopt this model due to being too rural. MCOs were not excited about Pathways HUB model from the beginning.</li> </ul>
	Doug Wilson moved, Ken Sterner seconded the motion to discontinue funding support of the Pathways Community HUB through Action Health Partners as of June 30, 2020, motion passed.
	<b>CBCC Workgroup Creation</b> Intention to create a Community Based Care Coordination workgroup to chart out the future of Project 2B and submit a project modification to the Health Care Authority by the end of June. Caroline Tillier plans to have intense half day strategy sessions in April. Goal is to bring input back to Board in May, will also get input from other partners and groups, hopefully will have some solid recommendations back for a decision at the June Board meeting or retreat.
	Molly Morris moved, Blake Edwards seconded the motion to form a Community Based Care Coordination workgroup charged with providing insights and recommendations to guide the direction of community-based care coordination during the remainder of the MTP, motion passed.
• Tribal Investment Proposal	Caroline Tillier and Molly Morris Through many months of work between the Colville Tribes and the NCACH, we have come up with the proposal that is in the decision packet. The proposal primarily focuses on infrastructure and capacity building investments. Caroline proposes a reporting framework that is both retrospective and prospective, every quarter. The Colville Tribes would report on what they are working on, including challenges / successes. Then they would have an opportunity to talk about what they plan on working on in the next quarter (including milestones and measures) and how much funding that would take. Caroline advocates as staff that the Board entrusts us to come up with a reporting mechanism, so that we do not have to come back every time with a new MOU and scope of work when there are changes to the original plan.
	<ul> <li>Discussion:</li> <li>Brooklyn – Budget is over \$500K / why are you not asking for the full amount of the budget? Caroline did not feel as staff she could ask for that, but would support that if the Board feels that they would like to. Brooklyn feels that we should just approve the full \$669,000</li> <li>Ray asked about BHT support? They are supporting Care Coordination similar to WPCC (noted on Page 23 of the packet). Brooklyn noted that the decision that we make to fund a partner shouldn't be based on what another ACHs funded.</li> </ul>

ere would that come from? Our annual 2020 budget would go up. There is some extra money from not the ask on this decision form is actually through 2021. We are removing the asterisk from the budget 2021 – will come back to the board with a timeline for the expected project spending and how it may t. Meuret seconded the motion to approve and commit up to \$669,000 to support the Colville provement efforts starting in 2020 through December 31, 2021. This approval would remove the "*" <i>ville Confederated Tribes</i> ) line item in the 2020 Budget, and entrust NCACH staff with developing the distribution framework
Recovery Coach Network program. The original intent was to issue an RFP for an agency to hire a n network. After discussions with numerous agencies affiliated with the CPTS group and the Recovery bing Christal's workload - we have decided that we would like to hire this position internally. We are oject from the FE Portal into the CDHD Budget to allow for this position. Linda noted that she would like s out that the workload does not end up being an FTE position, as she is concerned with her entire staff ment. <b>Tis seconded the motion to amend the 2020 budget to include the Recovery Coach Network (excluding oport) in the CDHD budget rather than the Financial Executor Budget, motion approved.</b>
tion, with the goal of drawing on data to inform and engage NCACH Board members. This presentation
t. Reminded the Board that we did a roundtable to find the key priorities to find alignment. When we at have alignment amongst our candidate strategies. Member to set up one on one interviews in March in that interview he will eation to get input egies e results d retreat scheduled June 12 <sup>th</sup> (will have a June 1 <sup>st</sup> Board meeting, no Board meeting in July)