

Governing Board Meeting

Monday, March 5, 2018 1:00 – 3:00 PM Samaritan Healthcare, Moses Lake WA

Board Attendance: Barry Kling, Bruce Buckles, Molly Morris, Scott Graham, Kate Haugen (replacing Kayla Down)

Board Phone Attendance: Brooklyn Holton, Blake Edwards, Rick Hourigan, Michelle Price, Ray Eickmeyer,

Absent Board Members: Nancy Nash Mendez, Theresa Sullivan, Sheila Chilson, Mike Beaver, Senator Warnick, Doug Wilson

Public Attendance: Amanda Rosales, Ken Sterner, Gwen Cox, Rosalinda Kibby, Deb Miller, Karen McMaster White

Phone: Laurel Lee, Donny Guerrero, Maddy Osborne, Kris Davis, Teresa Davis, Jerry Perez, Carly Levitts, Ramona Hicks, Rosalinda Kibby

Staff: Sahara Suval, John Schapman, Caroline Tillier, Linda Evans Parlette Minutes: Teresa Davis

Approval of Minutes Public Comment: Conflicts of Interest:	 MCO Sector has decided that Kate Haugen will replace Kayla Down on the Board for today until they can decide on a permanent replacement. Minutes: Scott Graham moved to approve the February minutes, Molly Morris seconded the motion, no further discussion, motion passed. No public comment. No conflicts of interest disclosed.
Treasurer's Report:	 Barry discussed the idea of having a Finance Committee. The Executive Committee feels that they can serve as the Finance Committee. Scott said that the Finance Committee generally protects the Executive Committee, but believes for now it will work. John noted that we will be taking formal minutes at the Finance Committee meetings. Monthly Financial Report: John went over the January monthly financials, he has conferred with Sheila and she does not see any concerns. Molly Morris moved to approve the January financial report, Rick Hourigan seconded the motion, no further discussion, motion passed.
Executive Directors Report	 There is legislation around the B & O Tax. Linda has asked the Department of Revenue to do a White Paper after the decision has been made. Kayla Down has resigned from her position at Coordinated Care and in turn the NCACH Governing Board. Sue Birch will be a speaker at our summit on April 20th. She is coming a day ahead of time and Linda plans to take her to a few locations and possibly set up a conference call with providers so that she can hear our region's prospective early on.
Board Election	Nomination of Rosalinda Kibby for Grant County CHI Seat. Bruce Buckles moved to accept the nomination of Rosalinda Kibby for the Grant County CHI Seat, Scott Graham seconded the motion, no further discussion, motion passed.



*	Scott Graham moved, that Rick Hourigan serve as the Vice Chair of the Executive Committee, Bruce Buckles seconded the
	motion, no further discussion, motion passed.

- Blake Edwards moved that Brooklyn Holton serve as Secretary of the Executive Committee, Rick Hourigan seconded the motion, no further discussion, motion passed
- Discussed the need for a renewal of the conflict of interest disclosures, please email them to Brooklyn.

Finance and Budget Update

NCACH received 100% on the project plan application.

Dollars going directly to NCACH:

Breakdown of Funds Earned	Amount
Project Incentive Funds:	\$5,151,550
Integration Funds	\$2,312,792
Bonus Funds	\$1,455,842
Total Funds	\$8,920,184

Timeline to Receive Funding	Amount
March 2018	\$7,691,357
May 2018 (Funding affected by IGT)	\$1,228,827

Dollars going to IGT Contributors and Their Partners:

Funding Paid out to IGT Contributors (Shared Domain 1 Investments) in May:		
	\$2,048,045	

• IGT Funding - Barry gave an overview of the IGT Funding and how it affects our ACH.

Bruce Buckles moved, Molly Morris seconded that The Governing Board approves the payment of \$2,048,045 to partnering providers as allocated under the Shared Domain 1 Investments worksheet to be distributed when the funding is placed in the NCACH account under the Shared Domain 1 Investment Category held by the Financial Executor in May of 2018.

The above approval is contingent on Health Care Authority (HCA) adhering to the following conditions:

- HCA will indemnify NCACH against potential claims by including hold harmless language.
- HCA will provide NCACH with the opportunity to partner directly with IGT Contributors for Shared Domain 1 Investment selection.
- HCA will explore opportunities with NCACH to explore other Eastern WA IGT Contributors.
- O HCA will provide in writing a clear process on how funds flow, fiduciary responsibilities and authorizations will work.

Discussion: Molly asked if there will be monthly report outs. This is money in and money out. We are not responsible for monitoring the payments. This will continue for the 5 years. No further discussion, motion passed.

The Opioid work group has adopted two cycles for funding...Rapid Cycle funding and Annual Cycle Funding. Workgroup is revising the funding application, OHSU is assisting in refining this application. The application period for the 2018 rapid cycle funding will start in early April and close in May, will be open during the annual summit. Both approaches will tailor to the strategies that are outlined in the toolkit. Barry added that in the past the Board has been approving items piece meal. We want to eventually get to a point that we go through the demonstration funding. We will discuss the overall demonstration budgeting at a Board Retreat on April 13th, each Board member can bring one additional staff person to the retreat, Teresa will reach out to get names. Examples of funding: Drug take back boxes, education, law enforcement training, and needle exchange. Opioid project is already a little ahead because there were already local groups started. The workgroup vetted all of the strategies and will select from the narrowed down strategies. Scott noted that this is not a lot of money for the amount of work that needs to be done. Will be bringing requests for additional funding in 2019.

Scott Graham moved to allocate \$100,000 to the Opioid Project in 2018 for partners to implement approaches that are in alignment with the Medicaid Transformation Project Toolkit. Ray Eickmeyer seconded the motion, no further discussion, motion passed.

Staff Updates

• John Schapman gave an update on TCDI, Eric Skansgaard has agreed to be the workgroup chair. Went over the funding model, the group has decided to use a model similar to the WPCC but it is still being refined. Will be looking at what partners would receive funding, and how we can help partners that would not be receiving funding. Creating two smaller groups this month: Ray is convening a group of EMS providers to discuss community para medicine program, another group to discuss a regional model to transitional care that we can use to present to HCA in place of the model that they have given us. ED diversion: will be sending a survey to assess what is happening in our region. Goal is to have approaches finalized in the next month, funding principles by May, application by June and implementation by October.



	 Sahara Suval: Summit registration is now open on our website and will share via Mail Chimp newsletter. She has worked directly with all three CHI's. They have convened a leadership council and have had one group call and plan on more. The CHI Leaders have requested Board support and would like them on the calls. Caroline reported out on the Pathways Community HUB, had our first workgroup meeting. Created a lead agency RFP sub group to develop a process for selecting the lead agency. Next meeting we will dig into data to see how the HUB will intersect with the other projects. SDOH Focus groups: Will have three meetings in Moses Lake, Omak, and Wenatchee. These meetings will be facilitated by our consultant at OHSU. Focus will be on transportation and housing.
WPCC	Caroline gave an update on the WPCC, Learning Community Kick off is on March 24th. The WPCC Learning Community charter specifies eligibility criteria, including the requirement that eligible partners must "serve a significant volume of Medicaid Beneficiaries (based on parameters set by the WPCC Workgroup prior to contracted work)". In order to resolve the definition of "significant volume" sooner rather than later, Peter Morgan asked the broad WPCC body to make a recommendation at their February meeting. After a brief discussion focused on making the parameters inclusive but targeted, it was proposed that eligibility include dual parameters: organizations would be eligible if they serve at least 300 beneficiaries and 1000 encounters. This motion was unanimously passed at the WPCC meeting in February 2018. The Board's action today would formally approve this decision. Scott Graham moved to approve 300 Medicaid beneficiaries and 1000 Medicaid encounters as the parameters defining "significant volume" in the eligibility criteria of WPCC Learning Community charter. Bruce Buckles seconded the motion, no further discussion, motion passed. Discussion: Who would not qualify? The single provider practices and IHS. We are mindful that we need to figure out a way of pushing out the information to the smaller agencies. It was communicated that most clientele will be that of a qualifying organization and that future re-examination for tribal inclusion is an option.
Roundtable	Discussion around the date of the Board Retreat. Many in the room can't make it on April 13th. Teresa will send a Doodle Poll to the Board with two options 4/13 and 4/27. Teresa will also send a save the date to the Board for the April 20th Summit.
Adjourn	Meeting adjourned at 2:45 PM, Next meeting April 2nd at the CTC in Wenatchee, WA