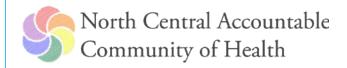


Governing Board Meeting 1:00 PM–2:30 PM, April 6, 2020

<u>Location</u>	<u>Call-in Details</u>
Virtual Meeting Only	Conference Dial-in Number: (669) 900 6833
	Meeting ID: 568 190 9332
	One tap mobile: +16699006833,,5681909332#
	Join Zoom Meeting: https://zoom.us/j/5681909332

TIME	AGENDA ITEM	PROPOSED ACTIONS	ATTACHMENTS	PAGE
1:00 PM	Introductions – Blake Edwards Board Roll Call Declaration of Conflicts Zoom Etiquette Approve Consent Agenda Public Comment	Approval of Consent Agenda	 Agenda, Acronyms & Decision Funds Flow Chart Consent Agenda Minutes Monthly Financial Report 	1-4 5-7 8-11
	Board Governance – Rick Hourigan Board Chair Vote Nominations - Secretary Executive Director Update – Linda	Approval of Blake Edwards as Board Chair	Board motion form	12
	Parlette			
1:25PM	MTP Project Pause Plan – John Schapman	Approval of NCACH Pause Plan Board Motion Form	Board motion form Executive Summary	13-14 15-17
1:35PM	NCACH engagement with LHJs Incident Command Systems – Caroline Tillier and Sahara Suval			
1:45PM	NCACH COVID-19 Community Mitigation Funds – John Schapman	Approval of NCACH Community Mitigation Funding documents	Community Mitigation Funds Flow chart Board motion form & Proposal: LHJ Incident Command System Board motion form &	18 19-22 23-27
2:00PM	NCACH COVID-EO Project – Mariah	Approval of NCACH COVID-	Proposal: Community Supports Board motion form &	28-31
	Brown, Teresa Davis, and John Schapman	EO project	Proposal: COVID-EO Project	
2:10PM	Round Table from Board on COVID-19 experience – Board Members			
2:20PM	NCACH support for Partners associated with COVID-19 Response – Wendy Brzezny & Mariah Brown Board discussion		NCACH Summary Report	32



A Handy Guide to Acronyms within the Medicaid Transformation Project

ACA: Affordable Care Act

ACH: Accountable Community of Health

ACO: Accountable Care Organization

Al/AN: American Indian/Alaska Native

BAA: Business Associate Agreement

BH: Behavioral Health

BH-ASO: Behavioral Health - Administrative Service

Organization

BLS: Basic Life Skills

CBO: Community-Based Organization

CCHE: Center for Community Health and Evaluation

CCMI: Centre for Collaboration Motivation and

Innovation

CCS: Care Coordination Systems

CHI: Coalition for Health Improvement

CHW: Community Health Worker

CMS: Centers for Medicare and Medicaid Services

CMT: Collective Medical Technologies

COT: Chronic Opioid Therapy

CP: Change Plans

CPTS: Community Partnership for Transition

Solutions

CSSA: Community Specialist Services Agency

DOH: Department of Health

DSRIP: Delivery System Reform Incentive Program

EDie: Emergency Dept. Information Exchange

EMS: Emergency Medical Services

FIMC: Fully Integrated Managed Care

FCS: Foundational Community Supports

HCA: Health Care Authority

HIT/HIE: Health Information Technology / Health

Information Exchange

MAT: Medication Assisted Treatment

MCO: Managed Care Organization

MH: Mental Health

MOU: Memorandum of Understanding

MTP: Medicaid Transformation Project(s)

NCACH: North Central Accountable Community of

Health

NCECC: North Central Emergency Care Council

OHSU: Oregon Health & Science University

OHWC: Okanogan Healthcare Workforce

Collaborative

OTN: Opioid Treatment Network

OUD: Opioid Use Disorder

P4P: Pay for Performance

P4R: Pay for Reporting

PCS: Pathways Community Specialist

PDSA: Plan Do Study Act

PHSKC: Public Health Seattle King County

RFP: Request for Proposals

SDOH: Social Determinants of Health

SSP/SEP: Syringe Services Program / Syringe Exchange

Program

SMI: Serious Mental Illness

SUD: Substance Use Disorder

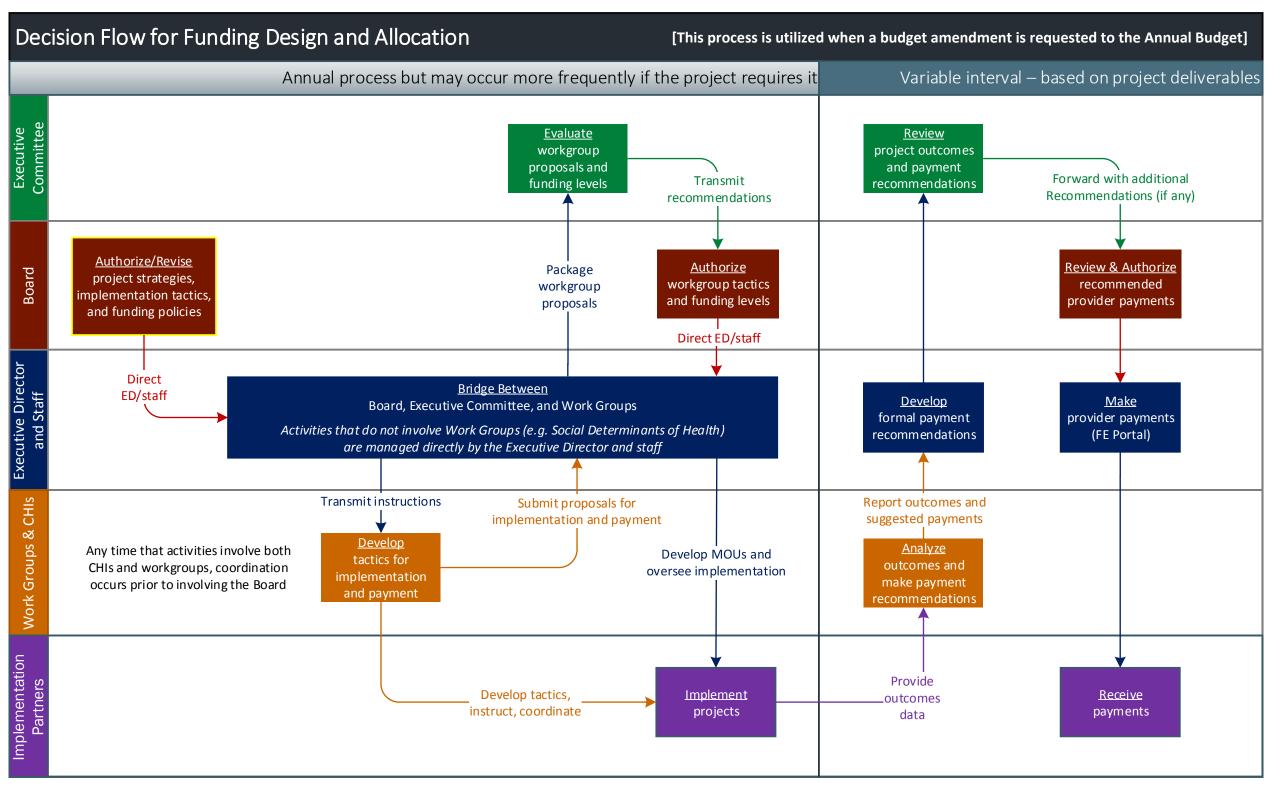
TCDI: Transitional Care and Diversion Interventions

TCM: Transitional Care Management

VBP: Value-Based Payment

WPCC: Whole Person Care Collaborative

LHJ: Local Health Jurisdiction



Packet Page #4



Location	Attendees						
Big Bend Community College 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 – Minute						
Agenda Item	Minutes Control of the Control of th						
 Approval of Consent Agenda Declaration of Conflicts Public Comment 	 Rick Hourigan ★ Ken Sterner moved, Molly Morris seconded the motion to approve the consent agenda, motion passed. Conflicts of Interest: Molly Morris disclosed her affiliation with the Colville Tribes. 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. 						
Executive Directors Report	 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. 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 & 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. Kyle Kellum resigned effective March 1st, 2020; took a new position in Nebraska Traci Miller resigned effective March 1st, 2020; took a new position in Anacortes We still have an at Large Board seat still open 						
Community Based Care Coordination –	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.

Discussion:

- 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.
- 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.
- 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.

CBCC Workgroup Creation

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.

Discussion:

- 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
- 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.

	If we to allocate the entire \$669,000 – Where would that come from? Our annual 2020 budget would go up. There is some extra money from not funding the HUB, as well. John noted that the ask on this decision form is actually through 2021. We are removing the asterisk from the budget line item, and we can have a carryover in 2021 – will come back to the board with a timeline for the expected project spending and how it may look in the current and future 2021 budget. Shooklyn Holton moved, Cathy Meuret seconded the motion to approve and commit up to \$669,000 to support the Colville Confederated Tribes' health improvement efforts starting in 2020 through December 31, 2021. This approval would remove the "*" from the Tribal Investment (Colville Confederated Tribes) line item in the 2020 Budget, and entrust NCACH staff with developing the proposed reporting and funds distribution framework
Recovery Coach Network Budget Amendment	John Schapman In February 2020, the Board approved the Recovery Coach Network program. The original intent was to issue an RFP for an agency to hire a coordinator to manage the recovery coach network. After discussions with numerous agencies affiliated with the CPTS group and the Recovery Coalition - and internal NCACH staff absorbing Christal's workload - we have decided that we would like to hire this position internally. We are asking to move money allocated to this project from the FE Portal into the CDHD Budget to allow for this position. Linda noted that she would like some flexibility with this position if it turns out that the workload does not end up being an FTE position, as she is concerned with her entire staff being overloaded; the Board was in agreement. Doug Wilson moved, Molly Morris seconded the motion to amend the 2020 budget to include the Recovery Coach Network (excluding Evaluation Coordination and Support) in the CDHD budget rather than the Financial Executor Budget, motion approved.
Deep Dive Data Session	Caroline Tillier & Rick Hourigan Caroline and Rick partnered on a presentation, with the goal of drawing on data to inform and engage NCACH Board members. This presentation can be found on our website.
Strategic Plan Update	John Schapman John gave a quick review of the last retreat. Reminded the Board that we did a roundtable to find the key priorities to find alignment. When we did that exercise, we found that we did not have alignment amongst our candidate strategies. Next Steps - draft timeline Chris will reach out to each Board & Staff Member to set up one on one interviews in March in that interview he will Review the mission of the organization to get input Consider potential roles Review potential candidate strategies Ask for additional ideas April Board meeting, we will share results More discussion at the June Board retreat scheduled June 12 th (will have a June 1 st Board meeting, no Board meeting in July)
	Linda noted that we have had a lot of internal discussions that we need to clarify the mission statement. Once we decide what we want to do in the future, it should be easier to get the mission statement solidified.

NCACH Funding & Expense Summary Sheet

	CDHD ACCOUNT						FINA	ANCIA	AL EXECUTOR FUI	JNDS			
Funding Source	SIM/Design/Misc SIM/Design/Misc SIM/Design/Misc								FF F	unds Remaining			
Tunung source		Funds Received	Funds Expended		Funds Remaining	NC	ACH Funds @ FE	FE F	unds Expended	Expended			
SIM Funding*	\$	115,329	\$ 115,329	\$	-								
Transformation Project Funding													
Original Contract K2296 - Demonstration Phase 1	\$	1,000,000											
Original Contract K2296 - Demonstration Phase 2	\$	5,000,000											
Transfer from FE Portal	\$	226,961											
Interest Earned on Demo Funds	\$	228,157											
Transformation Total	\$	6,455,118	\$ 2,933,759	\$	3,521,359								
Workshop Registration Fees/Misc. Revenue*	\$	19,370	\$ 13,720	\$	5,650								
				\$	-								
Financial Executor Funding Project Incentive Funds						\$	15,909,770	\$	6,507,509	\$	9,402,261		
Integration Funds						\$	5,781,980	\$	58,422	\$	5,723,558		
Bonus Funds						\$	1,455,842			\$	1,455,842		
Value Based Payment (VBP) Incentives						\$	300,000			\$	300,000		
Interest Earned in FE Portal						\$	52,957			\$	52,957		
DY1 Shared Domain 1 Funds**						\$	5,811,865	\$	5,811,865	\$	-		
Totals	\$	6,589,817	\$ 3,062,808	\$ \$	3,527,009	\$	29,312,414	\$	12,377,796	\$	16,934,618		

^{*}A portion of funds in this category were collected when CDHD held the SIM Contract

^{**}Automatically paid out through FE Portal from Health Care Authority and therefore not reflected on Financial Executor budget spreadsheet

2020 NCACH Budget: Monthly Summary

CDHD Account Expenses

Fiscal Year: Jan 1, 2020 - Dec 31, 2020

Budget Line Item	Tot	al Budgeted	Jan-19	Feb-19	Totals YTD		% Expended YTD to Budget
^ Salary & Benefits	\$	967,407	\$ 75,850	\$ 76,075	\$	151,925	16%
Supplies							
^Office	\$	9,420	\$ 28	\$ 11	\$	39	0%
Drugs and Medicines	\$	20,000			\$	-	0%
Furniture < \$500	\$	2,400		\$ 538	\$	538	22%
Books, References, & Videos	\$	-			\$	-	
^Software	\$	2,500			\$	-	0%
Computer Hardware	\$	6,000			\$	-	0%
Services							
Legal Services	\$	8,400			\$	-	0%
Computer	\$	9,600			\$	-	0%
Misc. & Contracts	\$	8,000			\$	-	0%
Mileage	\$	57,000	\$ 503	\$ 592	\$	1,096	2%
Professional Travel and Training	\$	9,000	\$ 954		\$	954	11%
Conference - Program Meals/Lodging	\$	26,250	\$ 497		\$	497	2%
Other (Train/Plane/Boat/Parking)	\$	10,200	\$ 22	\$ 608	\$	630	6%
Advertising - Newspapers	\$	3,800			\$	-	0%
Advertising - Other	\$	5,400	\$ 379	\$ 22	\$	400	7%
Insurance	\$	6,000			\$	-	0%
Printing - Office	\$	6,250			\$	-	0%
Printing - Copier	\$	11,000	\$ 386	\$ 672	\$	1,057	10%
Dues and Memberships	\$	3,400	\$ 11		\$	11	0%
Subscriptions	\$	1,280	\$ 54	\$ 2,558	\$	2,612	204%
^Other Expenditures	\$	176,699	\$ 7,657	\$ 8,848	\$	16,505	9%
^CDHD Hosting Fee 15%	\$	202,501	\$ 12,951	\$ 13,488	\$	26,440	13%
Grand total	\$	1,552,507	\$ 99,293	\$ 103,410	\$	202,704	13%

% of Fiscal Year 17%

FE Portal Account Expenses

Fiscal Year: Jan 1, 2020 - Dec 31, 2020

Budget Line Item	Tot	al Budgeted	Jan-19	Feb-19	Totals YTD	% Expended YTD to Budget
Operations						
Project Management and Organizational Development	\$	70,000		\$2,081.3	\$2,081	3%
Program Evaluation	\$	59,700			\$0	0%
Data Analytics	\$	30,000			\$0	0%
Feldsman Tucker Leifer Fidell LLP	\$	40,000			\$0	0%
Workforce Development (Carry over of \$48,500, Approved in 2019)	\$	36,000		\$1,556.3	\$1,556	4%
Workforce Development (2020)	\$	30,000			\$0	0%
Community Engagement and SDOH Capacity Development						
Lead Agencies (CHIs)	\$	150,000		\$3,492.3	\$3,492	2%
CHI Partner Payments (Carry over of \$450,000, Approved in 2019)	\$	350,000			\$0	0%
* CHI Partner Payments (2020)	\$	450,000			\$0	0%
* Community Information Exchange Workgroup	\$	50,000			\$0	0%
^ Tribal Investment (Colville Confederated Tribes)	\$	669,000			\$0	0%
Whole Person Care Collaborative						
Comagine Health	\$	50,000			\$0	0%
CCMI - Advising	\$	78,000		\$19,500.0	\$19,500	25%
Learning Activities	\$	280,000		\$84,457.6	\$84,458	30%
CSI - portal & TA	\$	36,000		\$9,583.4	\$9,583	27%
Learning Community - fixed	\$	1,080,000			\$0	0%
Learning Community - variable	\$	800,000			\$0	0%
Pathways Hub						
Action Health Partners - Hub Lead Agency(January - June 2020)	\$	476,250		\$58,000.0	\$58,000	129
* Community Based Care Coordination	\$	575,544			\$0	0%
Transitional Care and Diversion Intervention						
TCDI Hospital Partner Work	\$	520,000			\$0	0%
EMS Partner Work	\$	230,000		\$51,000.0	\$51,000	22%
Technical Assistance/Training	\$	65,000			\$0	0%
^ Community Partnership for Transition Solutions (Recovery Coach Network)	\$	9,000			\$0	0%
Opioid Project						
Rapid Cycle Applications	\$	100,000		\$5,750.0	\$5,750	6%
Support Opioid Conference Site Teams	\$	80,000			\$0	0%
Training Opportunities (General public, organizations, sector)	\$	15,000			\$0	0%
Public Awareness Contract	\$	30,000		\$3,900.0	\$3,900	139
School Based Prevention Contracts	Ś	120,000		\$20,000.0	\$20,000	179
Opioid Prescriber Coaching Pilot	Ś	28,000		+20,000.0	\$0	09
Grand total		6,507,494	\$0	\$259,321	\$259,321	4%
Grand total	7	0,307,737	90		% of Fiscal Year	17%

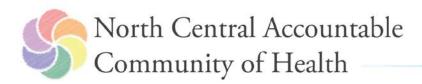
Total Budget \$ 8,060,001 | \$ 99,293 | \$362,731 | \$ 462,024 | 6%

[&]quot;*" asterisks - This means a line item will need to go back to the Board in 2019 for further approval prior to any funds being expended.

[&]quot;^" Budget Amendment Occurred in 2019

Budget Amendments - 2020

Amendment					
Board moved to remove the "*" for the Community Partnership for Transition Solutions program which program cost for 2020 is expected to be					
\$127,972. Motion Passed					
Amend the 2020 budget to include the Recovery Coach Network (ex	cluding Evaluation Coordination and Support) in the CDHD budget rather than the				
Financial Executor Budget:					
Proposal Budget Item Amount	CDHD Budget Line Item				
Salary and benefits \$62,400 (For remainder of 2020)	Salary & Benefits				
Recovery Coach Stipends \$9,200	Other Expenditures				
Training Expenses \$20,000	Other Expenditures				
Equipment \$3,500	Software (\$1000), Office Supplies (\$1,000), Telephone (\$1500)				
Supports for clients \$4,854	Other Expenditures				
CDHD Hosting Fee \$14,993	CDHD Hosting Fee				
Total \$114,947 into CDHD Account. \$9,000 left in FE line	item for evaluation activities				
Thee Board approve and commit up to \$669,000 to support the Colville Confederated Tribes' health improvement efforts starting in 2020 through					
December 31, 2021.					
	Board moved to remove the "*" for the Community Partnership for \$127,972. Motion Passed Amend the 2020 budget to include the Recovery Coach Network (ex Financial Executor Budget: Proposal Budget Item Amount Salary and benefits \$62,400 (For remainder of 2020) Recovery Coach Stipends \$9,200 Training Expenses \$20,000 Equipment \$3,500 Supports for clients \$4,854 CDHD Hosting Fee \$14,993 Total \$114,947 into CDHD Account. \$9,000 left in FE line Thee Board approve and commit up to \$669,000 to support the Colv				



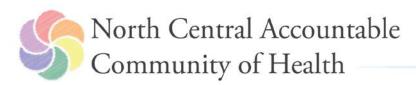
Board Decision Form

TOPIC: Board Chair Election
PURPOSE: Nomination of Blake Edwards to Board Chair
BOARD ACTION:
☐ Information Only
☑ Board Motion to approve/disapprove
BACKGROUND:
Due to the recent COVID-19 Pandemic and the vital role that Public Health is playing in our region,
Barry Kling has notified the Executive Committee that he will be stepping down from the Board Chair
position, effective immediately, though he will continue to fill the Public Health seat as a member of
the NCACH Board. As the Chelan Douglas Health District Administrator, Barry's expertise and
leadership is invaluable to our community during this time.
This leaves a vacant Chair position open and one that should be filled in a timely manner.
PROPOGAT
PROPOSAL:
Nomination of Blake Edwards to fill the NCACH Board Chair role on the NCACH Governing
Board effective 04/06/2020
IMPACT/OPPORTUNITY (fiscal and programmatic):
Blake will fulfill the NCACH Board Chair Seat for the remainder of the current term that is set to
expire December 31 st , 2020.
TIMELINE:
As soon as possible
RECOMMENDATION:

Submitted By: Executive/Nominating Committee

Submitted Date: 04/06/2020 Staff Sponsor: John Schapman

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



Board Decision Form

TOPIC: MTP Partner payments during COVID-19 pandemic					
PURPOSE: Continue to provide financial support to NCACH partners as they respond to the COVID-19 pandemic in their local communities while removing MTP reporting					
obligations.					
BOARD ACTION:					
☐ Information Only					
☐ Board Motion to approve/disapprove					
DACIZODOLIND.					

BACKGROUND:

Due to the current COVID-19 pandemic, North Central Accountable Community of Health (NCACH) has reassessed its priorities to support our partners responding to the current pandemic. In partnership with our Local Health Jurisdictions, NCACH staff have been redirected to focus on COVID-19 activities, thus minimizing all Medicaid Transformation Project work.

NCACH is pausing <u>ALL</u> Medicaid Transformation Project partner requirements until further notice. NCACH staff will re-evaluate the emergency response efforts on an on-going basis. Any meetings or reporting that would normally occur during this time will no longer occur (e.g. Quarter 1 reports due in April will not be required by partners)

NCACH staff recognize that operational changes that have a fiscal implication will need to be reviewed by the Governing Board. NCACH is encouraging Board members to consider the current situation our partners are responding to and allow flexibility in our contracted work during this time. NCACH knows that partners will need additional financial support and flexible timelines for deliverables to be met and believes NCACH should allow partners to receive scheduled payments outlined in partner Memorandums of Understanding while we pause MTP partner reporting activities.

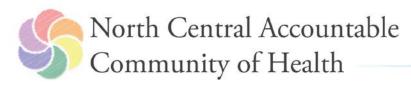
PROPOSAL:

Approve the continued distribution of partner payments as scheduled even though partner deliverables may be removed until June 2020 due to the COVID-19 pandemic

IMPACT/OPPORTUNITY (fiscal and programmatic):

This is budget neutral for NCACH. For our partnering providers, this will provide additional revenue to aid in their community response to the COVID-19 pandemic and ensure they will be in a better fiscal situation to restart MTP activities after the COVID-19 pandemic is under control.

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"

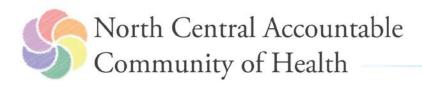


TIMELINE:

- Monthly NCACH Staff will evaluate COVID-19 pandemic response to determine when partners will have capacity to reengage in MTP project work.
- Once partners reengage in MTP work reporting requirements will also be required moving forward.
- If COVID-19 pandemic continues past the June and organizations need to prioritize their response to the pandemic, NCACH staff will bring a request to the Board to extend the pause to partner reporting obligations.

Submitted By: Executive Committee

Submitted Date: 04/06/2020 Staff Sponsor: John Schapman



NCACH Plan for COVID-19 Organizational Plan Executive Summary

Summary

Due to the current COVID-19 pandemic, North Central Accountable Community of Health (NCACH) has reassessed its priorities to support our partners responding to the current pandemic. NCACH staff have been redirected to focus on COVID-19 activities, thus minimizing all Medicaid Transformation Project work. However, NCACH recognizes that we still have a role as an organization to support our partner's COVID-19 efforts either fiscally or making connections with partners regionally and/or statewide. As well, the Washington State Health Care Authority (HCA) acknowledges the current situation and has appealed to CMS for modifications to the 1115 waiver to allow for MTP project modifications. HCA has also articulated their support and encouraged ACHs to work with partners in their communities to address this pandemic.

Below outlines the high level summary of NCACH operational changes and recommendations the Governing Board can enact to support our partners.

NCACH Operational Changes:

NCACH Operations

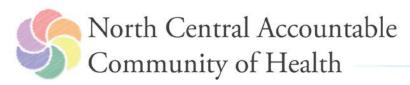
The Washington State Health Care Authority (HCA) acknowledges the current situation and has appealed to CMS for modifications to the 1115 waiver to allow for MTP project modifications. HCA has also articulated their support and encouraged ACHs to work with partners in their communities to address this pandemic. NCACH has minimized ALL Medicaid Transformation Project activities. The staff have been redirected towards two main efforts:

- 1. Provide support to Local Health Jurisdictions in regards to their Community Mitigation Strategies effort (Exact details TBD).
 - a. Currently we are mobilizing support for the Chelan-Douglas Health District and Grant County Health District and reaching out to Okanogan County Public Health to determine where we can be of assistance.
- 2. NCACH will leverage our regional and statewide connections to support NCACH partners around their COVID-19 response.

Partner Projects:

NCACH is pausing <u>ALL</u> Medicaid Transformation Project partner requirements until further notice. NCACH staff will re-evaluate the emergency response efforts on an on-going basis. Any meetings or

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



reporting that would normally occur during this time will no longer occur (e.g. Quarter 1 reports due in April will not be required by partners)

Current contracts will be evaluated and amended appropriately to ensure we can support our partners while remaining in compliance.

If a partner still has capacity to complete project work, NCACH will not impede that effort, but they will also not be required to work.

Recommendations that require Action by Board:

NCACH staff recognize that operational changes that have a fiscal implication will need to be reviewed by the Governing Board. NCACH is encouraging Board members to consider the current situation our partners are responding to and allow flexibility in our contracted work during this time. NCACH staff recommend the following actions for the Board to review and approve:

Recommendation #1: Continue partner payments even though deliverables may be removed until June 2020.

For example: WPCC, CHI Initiative Small project, and Rapid Cycle Opioid application, and all
other partners who have reporting due during this time will continue to receive payments
but will not be required to complete any reporting in the future

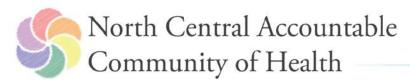
Recommendation #2: Transition all Governing Board meetings to virtual-only for April and May with a focus on NCACH staff COVID-19 response efforts and required NCACH business.

- This will mean that some project deep dives will be rescheduled to later in the year closer to when funding decisions will be made.
- Questions for Executive Committee: Do we suspend Strategic Planning interviews with Board members?

Recommendation #3: With the understanding that this pandemic is testing the viability of NCACH clinical partners, the NCACH staff and Executive Committee will work to identify the areas NCACH can support our regional our partners and when appropriate develop a funding allocation process for NCACH to financially support partner with their ongoing Covid-19 response.

 Executive Committee members will meet weekly (Fridays at 7AM) to get updates on NCACH COVID work and discuss how NCACH can continue to support partners.

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"

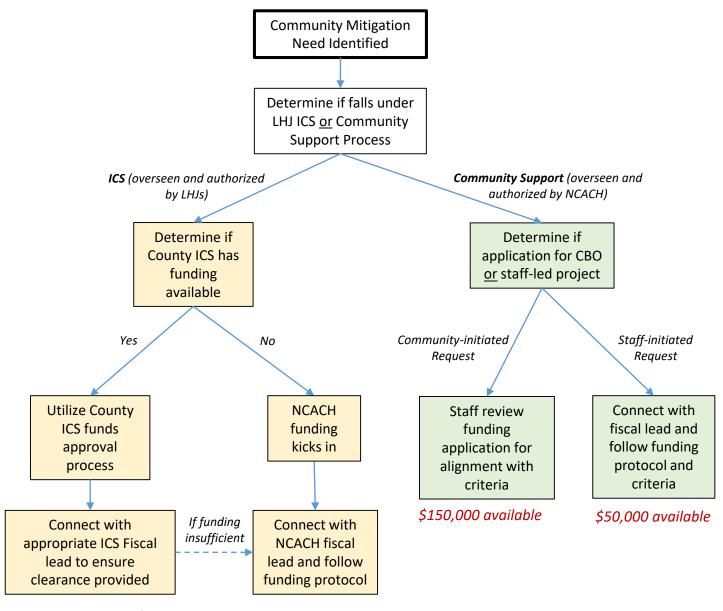


A Detailed report outlining how NCACH is pausing MTP project plans can be found at the following link: http://www.mydocvault.us/uploads/7/5/8/6/7586208/ncach_plan_for_covid-detailed_plan.pdf

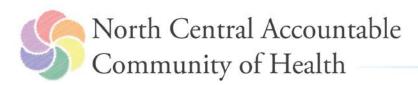
NCACH COVID-19 Community Mitigation Funds



Total Funding: \$250,000



\$50,000 available



Board Decision Form

TOPIC: NCACH COVID-19 Community Mitigation Funds: LHJ Incident Command System
(ICS)
PURPOSE: Approve a process that allows NCACH staff to identify areas in our COVID-19 response work that requires additional NCACH financial support and provide that support in
a quick and timely manner.
BOARD ACTION:
☐ Information Only
▼ Board Motion to approve/disapprove

BACKGROUND:

NCACH is directly participating with all County/LHJ Incident Command Systems. Each one of those Incident Command Centers have their own financial processes and funding available to support the work in their community. However, there will be times where that fund is inadequate to meet the response needs of the community.

Therefore, NCACH has developed a funding mechanism to support basic operational costs in situations where there is additional funding needed to support the Community Mitigation efforts of partners in the NCACH region where Incident Command funding falls short.

This funding process is only for NCACH involvement in the Incident Command System process. NCACH has a separate funding process to support our partners to support their Community Mitigation efforts.

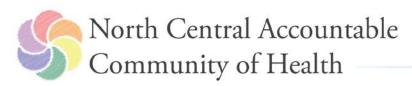
PROPOSAL:

Approval of the "NCACH COVID-19 Community Mitigation Funds: LHJ Incident Command System (ICS)" process up to \$50,000.

IMPACT/OPPORTUNITY (fiscal and programmatic):

- The work and support needed to manage the spread of COVID-19 is moving at a faster pace than normal NCACH Operations. Approval of this process will allow NCACH staff and Executive Committee to respond to needs of our partners and community in the rapid timeframe needed for approval.
- NCACH staff will increase the CDHD other expenditure budget line item by \$50,000 to reflect expenditures related to COVID-19 LHJ Incident Command System work

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



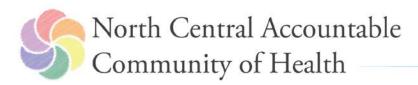
TIMELINE:

We anticipate this response will go through June 2020. As more information is known about the COVID-19 pandemic, NCACH staff will bring updates to the Governing Board, including additional funding requests when applicable.

RECOMMENDATION:

Submitted By: NCACH Staff/Executive Committee

Submitted Date: 04/06/2020 Staff Sponsor: John Schapman



NCACH COVID-19 Community Mitigation Funds: LHJ Incident Command System (ICS)

Charge: NCACH is directly participating with all County/LHJ Incident Command Systems. Each one of those Incident Command Centers have their own financial processes and funding available to support the work in their community. However, there will be times where that fund is inadequate to meet the response needs of the community.

Therefore, NCACH has developed a funding mechanism to support basic operational costs in situations where there is additional funding needed to support the Community Mitigation efforts of NCACH where Incident Command funding falls short.

This funding process is only for NCACH involvement in the Incident Command System process. NCACH will develop a separate funding process to support our partners through NCACH as part of the COVID-19 pandemic

Local Health Jurisdiction(s): NCACH is supporting the following LHJs: Chelan-Douglas Health District, Grant County Health District, Okanogan County Public Health, and Tribal Public Health

Funding Amount:

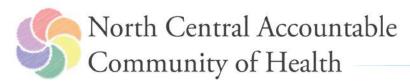
- 1. Allocate up to \$50,000 total for NCACH to respond to the COVID-19 Pandemic
 - NCACH Executive Director will authorize any expenditures across the four Local Health Jurisdiction in support of their Incident Command efforts.
 - The NCACH Executive Director would bring any updates to the NCACH Executive Team to review on a weekly basis to review and provide feedback on expenditures.

Funding Criteria

NCACH will support funding needs based on the following criteria.

- NCACH staff needs to go through the Local Health Jurisdiction ICS to ensure the appropriate approval
 processes have been completed and utilize the funding available as part of the ICS response, prior to
 requesting funds from NCACH.
- NCACH Staff need to determine if partners are willing to donate as an option for supplies needed to help control purchasing cost (e.g. PPE Facemasks are currently getting donated by stores)
- Funds need to be directly associated with NCACH's support of Incident Command Tasks (e.g. we will not give an agency money to pay for gas to transport food/items to socially isolated individuals)
- Funding is for physical or technological supply purchases

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"

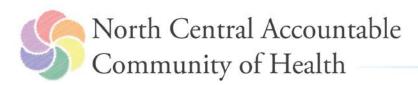


Internal NCACH Funding Process

All NCACH funding requests will be evaluated against the above criteria. If the above criteria are met, staff will follow the following process:

- 1. NCACH staff outline the supplies needed, purpose, cost estimates, supply source and/or purchase locations.
- 2. Email information to Fiscal lead (John Schapman) with request for funding.
- 3. NCACH fiscal lead will share updates with the NCACH staff team weekly on funds available.
- 4. NCACH fiscal lead will approve funding.
- 5. Each week, NCACH Executive Committee will be updated on expenses of NCACH in support of region's Incident Command efforts.

Note: The details of the funding process may be adjusted based on charging needs/responses. Intent of funding will not change.



Board Decision Form

TOPIC: NCACH COVID-19 Community Mitigation Funds: Community Supports

PURPOSE: Approve a process that allows NCACH staff to identify areas in our COVID-19 response work in the community that requires additional NCACH financial support and provide that support in a quick and timely manner.

BOARD ACTION:

☐ Information Only

☑ Board Motion to approve/disapprove

BACKGROUND:

NCACH is directly participating with all County/LHJ Incident Command Systems. Through this process, NCACH is hearing from partners who are stretching their existing resources to respond to their community's COVID-19 pandemic needs.

In an effort to support regional partners responding to the COVID-19 pandemic, NCACH has developed the "COVID-19 Community Support Fund" which provides basic operational costs to support the success of Community Mitigation efforts undertaken by NCACH and community organizations in the NCACH region.

Community Mitigation is defined as how this work is providing support for those individuals in community isolation or practicing social distancing, including the support of essential employees.

This funding process is broken down into two main categories: NCACH projects that support Community Mitigation across the North Central Region and funding for community partners to support their organization's community mitigation efforts.

PROPOSAL:

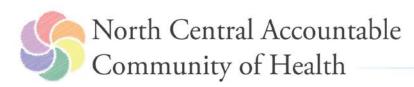
Approval of the "NCACH COVID-19 Community Mitigation Funds: Community Support" Processes as attached up to \$200,000.

IMPACT/OPPORTUNITY (fiscal and programmatic):

.Funding Amount: \$200,000

- Up to \$150,000 to support community organizations across North Central Washington to respond to the COVID-19 Pandemic
 - \$50,000 (\$150,000 total) to each public health region (Chelan-Douglas, Grant, and Okanogan Counties), open to community based organizations to submit requests
- UP to \$50,000 total for NCACH to respond to the COVID-19 Pandemic community needs(outside of NCACH's role in the regions Incident Command Systems)

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



The work and support needed to manage the spread of COVID-19 is moving at a faster pace than normal NCACH Operations. Approval of this process will allow NCACH staff and Executive Committee to respond to needs of our partners and community in the rapid timeframe needed for approval.

NCACH staff will increase the CDHD other expenditure budget line item by \$50,000 to reflect expenditures related to COVID-19 work and create a COVID-19 Budget line item in the Financial Executor Portal of \$150,000.

TIMELINE:

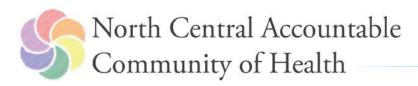
We anticipate this response will go through June 2020. As more information is known about the COVID-19 pandemic, NCACH staff will bring updates to the Governing Board, including additional funding requests when applicable.

RECO	MMEN	NDA	TION:
------	------	-----	-------

Submitted By: NCACH Staff/Executive Committee

Submitted Date: 04/06/2020

Staff Sponsor: Sahara Suval & John Schapman



NCACH COVID-19 Community Mitigation Funds:

Community Supports

Summary of Need: NCACH is directly participating with all Local Health Jurisdiction Incident Command Systems (*Chelan-Douglas Health District; Grant County Health District; Okanogan Public Health; Tribal Public Health*) in response to the pandemic COVID-19 (novel coronavirus). Through this process, NCACH is hearing from partners who are stretching their existing resources to respond to their community's COVID-19 pandemic needs.

In an effort to support regional partners responding to the COVID-19 pandemic, NCACH has developed the "Draft Covid-19 Community Support Funds" which provides basic operational costs to support the success of Community Mitigation efforts undertaken by community organizations in the NCACH region.

.Funding Amount: \$200,000

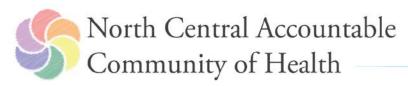
- 1. Allocate up to \$150,000 to support community organizations across North Central Washington to respond to the COVID-19 Pandemic
 - \$50,000 (\$150,000 total) to each public health region (Chelan-Douglas, Grant, and Okanogan Counties), open to community based organizations to submit requests
 - All requests are a maximum of \$5,000, for discrete needs to support COVID-19 response,
 specifically efforts that support individuals who are required/encouraged to shelter in place
- Allocate up to \$50,000 total for NCACH to respond to the COVID-19 Pandemic community needs(outside of NCACH's role in the regions Incident Command Systems)
 - NCACH Executive Director will authorize any expenditures in support of NCACH's efforts to support Community Mitigation efforts.
 - o The NCACH Executive Director would bring any updates to the NCACH Executive Team to review on a weekly basis to review and provide feedback on expenditures.

Funding Criteria

NCACH will support needs based on the following criteria.

- This opportunity is open to
 - Community based organizations
 - Community groups who have mobilized in response to COVID-19 (with the support of a fiscal sponsor)
 - o Education institutions and providers
 - This funding opportunity is not open to organizations that receive funding through North Central Accountable Community of Health's Whole Person Care Collaborative or Transitional Care and Diversion Intervention projects

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



- Provides critical equipment or resources that support communities practicing social isolation, providing connection, access to resources, and supports necessary for distancing measures as created by COVID-19. This fund would cover discrete costs associated with:
 - The delivery of vital information (e.g. design and printing costs; video production costs)
 - Essential or basic needs supplies to support vulnerable and low income populations (e.g. food, diapers, and toilet paper)
 - Associated costs or technology to continue providing or receiving education while practicing social isolation (e.g. Zoom account; Chromebook)
 - Associated costs or technology for grassroots community mitigation response efforts (e.g. website development; gas vouchers for volunteers)
 - Associated costs or technology to improve and adapt vital program delivery in response to COVID-19 (e.g. mental health support; legal services)
- Must demonstrate how it is providing support for those individuals in community isolation or practicing social distancing, including the support of essential employees.
- Must articulate why other funding channels that are offering COVID-19 relief funding (e.g. the
 Community Foundation of NCW; WA State Healthcare Authority; CMS) are not a good fit for their
 proposed need (e.g. donated PPE) before submitting an application.

COVID-19 Community Support Funds are not intended to:

- Reimburse indirect costs (e.g. staff time) for cancelled events or services, or the projected loss of income from those cancelled events or services
- Pay down deficits
- Reimburse previously incurred expenses due to COVID-19

Funding Request Process

All funding requests will be evaluated against the above criteria. If the above criteria are met, staff will follow the following process:

- 1. Funding request will be accepted on a rolling basis until May 29, 2020, or until all funds are expended.
- 2. Funding request outline the supplies or services needed, purpose, cost estimates, and alternative funding research.
- 3. Email information to program lead (TBD) with request for funding.
- 4. Program lead will confirm there is appropriate funding left in the budget for the specific public health region (up to \$50,000 each). Program lead will bring to NCACH fiscal lead for approval.
- 5. NCACH fiscal lead will approve funding request and handle disbursement of funds.
- 6. Funds expended through FE Portal on rolling basis.
- 7. Each week, NCACH Executive Committee will be updated on expenses of NCACH

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



NCACH COVID-19 Community Support Funds

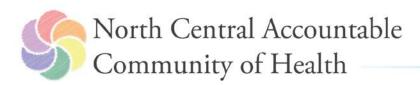
Please email completed applications to [Insert name here]

•	• •
Organization:	UBI Number:
Primary Contact:	Fiscal Sponsor (If applicable):
Which public health	region are you located in (Chelan-Douglas, Grant, or Okanogan):
Target Population De	scribe the population that you expect to support with this project.
	description of how you plan to utilize these funds to provide support for individuals by isolation or practicing social distancing, (Can include support for essential employees).
Why are other funding	es: Tell us a bit about your research into other funding opportunities to meet this need. g channels that are offering COVID-19 relief funding (e.g. the Community Foundation of or your proposed need?

Budget: Please outline basic budget expenses

EXPENSES	Amount (\$)
Equipment	
Supplies	
Printing	
Other Expenses (itemize):	
Total Requested	

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



Board Decision Form

TOPIC: COVID-EO Contest

PURPOSE: This video contest is designed to engage K-12 students throughout Chelan,
Douglas, Grant and Okanogan Counties around proper social distancing and hygiene
practices amid the COVID-19 pandemic

BOARD ACTION:

☐ Information Only

☐ Board Motion to approve/disapprove

BACKGROUND:

The North Central Washington COVID-EO Contest originated with the intent of engaging youth in demonstrating the importance of CDC and local public health guidelines in order to reduce the spread of Coronavirus and to "flatten the curve." These preventative measures include: social distancing, hand washing, cleaning and disinfecting frequently touched surfaces, and staying home when you are sick. This video contest is designed to engage K-12 students throughout Chelan, Douglas, Grant and Okanogan Counties.

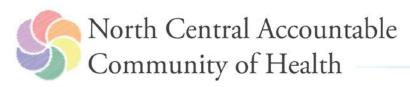
Digital Media Northwest, LLC has offered to partner in the campaign, providing the following: creation of the contest platform, promotion and sharing of the campaign via email and social media, communication with local school districts and NCESD, reviewing and approving video submissions, and coordinating with NCACH to notify winners.

The Executive Committee reviewed the original proposal from the NCACH team and approved up to \$5,000 to spend on the project. The Executive Committee recommended that the remaining balance should be brought to the Governing Board for approval.

PROPOSAL:

Approve an additional \$187 of NCACH expenditures above the \$5,000 approved by the Executive Committee for the North Central COVID-EO Contest to increase the total NCACH expenditures to \$5,187.00

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



IMPACT/OPPORTUNITY (fiscal and programmatic):

- \$5,000 was approved by the Executive Committee towards this project per their authority. If the Board approves the remaining funds, the total amount will be increased to \$6,187
- This will be an increase in the other expenditures category of the CDHD budget of \$6,187
- Confluence Health and CVCH have each committed to contribute \$500 to the project, therefore the total cost to NCACH will be \$5,187.

Total Prize Allocation		5,150.00
Digital Media Northwest Contract		1,037.00
Total Budget		6,187.00
Sponsorship from Confluence Health & CVCH		(1,000.00)
Total cost to NCACH	\$	5,187.00

TIMELINE:

COVID-EO Contact Start date is Monday April 6th

COVID-EO Contest end date is Friday May 1st

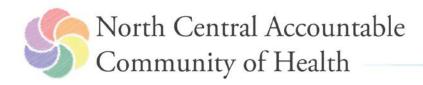
Prizes awarded May 15th

RECOMMENDATION:

Submitted By: Executive Committee

Submitted Date: 04.06.20

Staff Sponsor: Teresa Davis, Mariah Brown, John Schapman



North Central Washington COVID-EO Contest

Background

The North Central Washington COVID-EO Contest originated with the intent of engaging youth in demonstrating the importance of CDC and local public health guidelines in order to reduce the spread of Coronavirus and to "flatten the curve." These preventative measures include: social distancing, hand washing, cleaning and disinfecting frequently touched surfaces, and staying home when you are sick.

This video contest is designed to engage K-12 students throughout Chelan, Douglas, Grant and Okanogan Counties.

The contest will be conducted through a social media campaign utilizing an online platform called Woobox - https://woobox.com/. Digital Media Northwest, LLC has offered to partner in the campaign, providing the following: creation of the contest platform, promotion and sharing of the campaign via email and social media, communication with local school districts and NCESD, reviewing and approving video submissions, and coordinating with NCACH to notify winners.

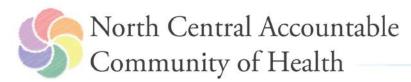
Contest Guidelines

Participants will submit videos to the contest platform and undergo a screening process based on key criteria outline below, prior to being posted and shared via social media. In order for submissions to be put in the running, contest entries must include the following information: contestant name, contact information, age, grade, and name of school. Contestants will be required to provide a consent and release form, and those under the age of 18 will be required to submit a parental consent and release form in order to participate.

Video submissions must meet the following criteria to be approved:

- Must be an <u>original video</u> created exclusively by the individual or group (If a group video is submitted, social distancing requirements—at least 6 ft. between individuals—must be modeled in the video.)
- Must be filmed with a smart phone or tablet
- Must be created by the student not an adult
- Duration of two minutes and under
- Must include an emphasis on <u>at least one</u> of the CDC and local public health recommended measures to prevent the spread of Coronavirus including: social distancing, hand washing, cleaning and disinfecting frequently touched surfaces, and staying home when you are sick
- Does not include foul language, violence, nudity, or display hazardous, inappropriate, or unlawful behavior

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



Contest Period

The video contest opens for submissions on Monday, April 6, 2020 and closes on Friday, May 1, 2020.

After the contest period has concluded, videos will be scored based on the following:

- The number of votes originated on the contest platform
- A panel of judges utilizing a selection criteria (in development)

Contest winners will be notified by May 15, 2020. Prizes will be awarded to first, second and third place winners in each age group, in each of the four counties.

Age Categories:

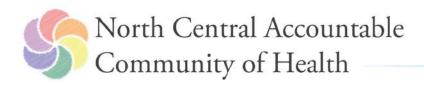
- K-2nd
- 3rd-5th
- 6th-8th
- 9th-12th

COVID-EO Contest Budget:

Line Item	Description	Price Per Unit		# of Units	Total	
1st Prize 1 Each of the 4 Counties K-2	Choice - Chrome Book / Smart Watch / Wireless Earbuds	\$	200.00	4	\$	800.00
1st Prize 1 Each of the 4 Counties 3-5	Choice - Chrome Book / Smart Watch / Wireless Earbuds	\$	200.00	4	\$	800.00
1st Prize 1 Each of the 4 Counties 6-8	Choice - Chrome Book / Smart Watch / Wireless Earbuds	\$	200.00	4	\$	800.00
1st Prize 1 Each of the 4 Counties 9-12	Choice - Chrome Book / Smart Watch / Wireless Earbuds	\$	200.00	4	\$	800.00
2nd Prize 1 Each of the 4 Counties K-2	\$50.00 Gift Card (Retail)	\$	50.00	4	\$	200.00
2nd Prize 1 Each of the 4 Counties 3-5	\$50.00 Gift Card (Retail)	\$	50.00	4	\$	200.00
2nd Prize 1 Each of the 4 Counties 6-8	\$50.00 Gift Card (Retail)	\$	50.00	4	\$	200.00
2nd Prize 1 Each of the 4 Counties 9-12	\$50.00 Gift Card (Retail)	\$	50.00	4	\$	200.00
3rd Prize 1 Each of the 4 Counties K-2	\$25.00 Gift Card (Retail)	\$	25.00	4	\$	100.00
3rd Prize 1 Each of the 4 Counties 3-5	\$25.00 Gift Card (Retail)	\$	25.00	4	\$	100.00
3rd Prize 1 Each of the 4 Counties 6-8	\$25.00 Gift Card (Retail)	\$	25.00	4	\$	100.00
3rd Prize 1 Each of the 4 Counties 9-12	\$25.00 Gift Card (Retail)	\$	25.00	4	\$	100.00
Random entry drawings 50 prizes	\$10.00 Gift Card (\$5 visa gift card charge)	\$	15.00	50	\$	750.00
	Total Prize Allocation				\$	5,150.00

Total Prize Allocation	\$ 5,150.00
Digital Media Northwest Contract	\$ 1,037.00
Total Budget	\$ 6,187.00
Sponsorship Received from Confluence Health & CVCH	\$ (1,000.00)
Total cost to NCACH	\$ 5,187.00

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"



COVID-19 WPCC/TCDI Check-ins

Summary of Partner Conversations:

NCACH staff reached out to Whole Person Care Collaborative (WPCC) and Transitional Care and Diversion Intervention (TCDI) partners to understand how they are responding local to the COVID-19 pandemic, what was their organizations main concerns, and if they have any recommendations on how NCACH can support the region during this pandemic. Below is a summary of those conversations. Individual notes are attached on separate pages.

Needs/Barriers Identified by Partners (Not in order of priority):

Below are bullet points summarizing the key themes that emerged from conversations

- Technology and telehealth support
 - Zoom for providers
- Supporting clients in community that will fall through the cracks (those without phones, technology)
- Funding, several smaller agencies are struggling or concerned about cash flow due inability to provide services (e.g. general surgery).
- Testing for COVID-19
- Personal Protective Equipment (PPE)
- Continuing Education credits affected

Role of NCACH:

Below are a few roles NCACH could play to support partners COVID-19 response

- Connecting BH organizations
 - Offered to connect BH orgs; only 3 responded possible due to staff overwhelmed. Can try again next week
- Serving as a liaison with HCA
 - Advocating for telehealth reimbursement for RHC and FQHCs (currently not eligible)
 - Senator Parlette has been working with RHC and HCA on this issue.
- Connecting organizations as needed
- Advocacy as needed
- Improved regional communication
 - Everyone is overwhelmed for actual meeting.
 - Forwarding training opportunities around telehealth.
- Potential funding package to keep smaller EMS agencies viable through this pandemic

"BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON"