

Location	Attendees
<b>Virtual Meeting</b>	<p><b>Workgroup members:</b> Michael Beaver, Tammara Byers, Elaine Bandy, Rhonda Piner, Molly Morris, Jackie Weber, Misty Queen. Richard Donaldson, Laurie Bergman, Ray Eickmeyer, Kelly Steffin, Kelly Allen, Deb Miller, Vicki Polhamus, Chenia Flint, Dina Goodman, Megan Collyer, Jerry Perez</p> <p><b>NCACH Staff:</b> John Schapman, Wendy Brzezny, Linda Evans-Parlette, Mariah Brown, Sahara Suval, Caroline Tillier, Teresa Davis – Minutes</p>
Agenda Item	Minutes
<b>Minutes</b>	<p>❖ <b>Rhonda Piner moved, Elaine Bandy seconded the motion to approve the June minutes, motion passed.</b></p>
<p>Confluence Health – Confluence at Home Project Request – follow up from June Meeting <b>Megan Collyer and Dr. Charles McCormick</b></p>	<p>John provided background from the last meeting. After Megan Collyer and Dr. McCormick left the June meeting, the workgroup had a discussion. John provided the discussion details to them and they are responding today.</p> <ul style="list-style-type: none"> <li>• <b>Partnership with outside agencies:</b> Working with local EMT service to provide service to patients in home. Working out details re: transportation needs for imaging and blood draws. Also working with the geriatric care centers in the area. Hoping with the CAH program, they will be able to grow these relationships and expand services and hours.</li> <li>• <b>Utilization of labs:</b> 80-90% of geriatric draws are already provided at the home. With this plan, they hope to be able to provide same day lab draws.</li> <li>• <b>Updated Budget:</b> This is their best efforts to apply to current patient population.</li> <li>• <b>Duplication of service concerns:</b> Dr. McCormick – this is a primary care service. Nurse and social worker visits in the home are non-billable, this is just a service that they want to provide.</li> <li>• <b>Expansion of Services from Wenatchee to Greater NCW Region:</b> This is a goal, currently because we have so many resources here, we are hoping to prove success of program and grow in other areas.</li> </ul> <p>Discussion:</p> <ul style="list-style-type: none"> <li>• Deb - Would like more clarification on partnerships with community partners, specifically Health Homes. How do we partner with Health Homes to provide the social services which their care coordinators are required to provide.</li> <li>• Jackie – agrees with what Deb said. There are several agencies that provide the care coordinator services.</li> <li>• Collection of 23% - EMR is able to provide this information by PCP. Does not account for patients in rehab facilities that present to the ER from those skilled nursing facilities because they have a different PCP.</li> <li>• Utilization has been down compared to Pre-COVID numbers.</li> <li>• One of the key things that they discussed last time “the ask” was \$275,000 due to budget concerns, they have changed their request for funding to \$39,000.</li> <li>• Vicki noted that all organizations received a certain amount through the TCDI Workgroup, is there any way to provide them the entire \$67,000, so that they get the same amount as each partner? John replied the Confluence was offered that option, but they are keeping the request at \$39K and we can be flexible at a later date.</li> <li>• Linda noted that she thinks it would be fair to increase</li> </ul>

❖ *Vicki Polhamus moved, Rhonda Piner seconded the motion to approve the \$39,000 allocation to the Confluence at Home project, with the flexibility to increase to up to \$65,000 for additional needs identified, with appropriate documentation. Additional requests to come back to workgroup for approval, motion passed.*

TCDI Workgroup 2020 & 2021 planning **John Schapman**

Do partners feel comfortable jumping into MTP work? Are you going to be able to do the proposal that you applied for with the MTP work?

- Move forward with flexibility to make alterations.
- Vicki feels that we can continue on. There are portions that include other organizations ie: Law Enforcement, we need to be flexible if the partnerships can't happen right now.
- Rhonda agrees with Vicki, 2/3 of plan can be accomplished.
- Ray noted that 1/3 his plan also relies on other partners
- Shoshannah majority of project can proceed. The piece that includes collaboration with outside partners, will just depend on availability of others.

John reviewed the 2020 project plan/budget. We have about \$130,000 that we have not and do not plan to use in 2020. John opened it up for discussion for ideas on how we could utilize these funds.

Discussion:

- Ray suggested using toward Tele Medicine, Laurie agreed it is worth looking into.
- During COVID, the rules have been loosened in order to bill for home / tele visit.
- Ray thinks that project money could be used toward tele health and produce some powerful results.
- Deb noted that there are other programs that can be offered virtually and that would require some infrastructure changes. They are looking for a HIPPA compliant video platform. Laurie suggested Doxy.me as a HIPPA compliant and user friendly platform.
- Lauri – is there a potential need for partners to have a platform to send via smart phone. Ray responded that if there is a need then we should trial different ways of doing this work and measure patients health. This can mean different things for different areas and populations.
- HCA needs to look at releasing more money for these visits as it is keeping people out of the hospitals and ER's. Elaine noted some kind of infrastructure would be great – the simpler the better.
- Rhonda -A lot of the rural areas do not have internet, phone service etc.
- Shoshannah noted that she has the same issues regarding internet and users not knowing how to work the devices. It is going to come down to reimbursement.

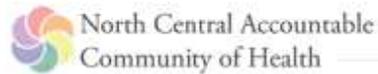
John said he and Ray will work on coming up with some ideas and bring back to the group.

The NCACH Governing Board is going through strategic planning to decide what our work looks like post MTP. We are trying to figure out how to add value to this region in a sustainable and affordable way. .

John shared the following NCACH guiding principles (see packet for more in depth description):

1. NCACH addresses health equity and improves the wellbeing of all people in the North Central Region.
2. NCACH advances social, emotional, physical, and behavioral health as embodied in the principles of whole-person care.
3. NCACH catalyzes the success of other entities by making complementary efforts and maintaining an environment of collaboration and community benefit.
4. NCACH unifies regional efforts by coordinating and promoting collaboration across sectors.
5. NCACH helps groups focus on cross-cutting priorities, pursues durable solutions, and prioritizes efforts that deliver systemic improvement

John shared the budget slide below showing two options. Split the budget between the three payment line items on top or combine them into one funding process to support collaboration.



### TCDI 2021 Budget Discussion

Budget Category	2020 Board Approved	2021 Budget Recommendation
TCDI Hospital Partner Payments	\$520,000	<b>\$815,000</b> (All under 1 funding process)
EMS Partner Payments	\$230,000	
Training/Consultants Reserved funds for both EMS and Hospital partners*	\$65,000	
Recovery Coach Network	\$57,972	\$129,770
<b>Total TCDI Budget</b>	<b>\$872,972</b>	<b>\$944,770</b>

\*May vary based on when NCACH Staff is hired.

\*\* Remaining balance was originally allocated for Three Rivers hospital and Confluence health (\$65,000 each)

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	<ul style="list-style-type: none"> <li>• In 2021 – Based on conversations at the last meeting, it has been recommended to use the funding that we have available toward collaborative partnerships</li> <li>• Rhonda supports making it one collaborative line item in the budget.</li> <li>• Recovery Coach Network falls under the TCDI Workgroup. Deb noted that there are similar programs like the Chronic Disease Self-Management. She would like to get more clarification as to where those other programs would fall in the MTP projects.</li> </ul>
<p>Upcoming meetings &amp; Adjournment</p>	<p><b><i>Group approved moving TCDI meetings to every other month starting July, 2020 instead of quarterly to finalize 2021 project plans. Shoshannah would like to look into moving the meeting time to 11:00-12:30 due to a conflict, group agreed.</i></b></p> <p>Next Meeting: Thursday September 17th, 2020 Time: 11:00 AM – 12:30 PM Location: Virtual</p>