## Attendees
Gail Goodwin, Malcolm Butler, Christal Eshelman, John Schapman, Brett Pack, Caroline Tillier, Jim Wallace, Jackie Weber, Roxanne Cates, Kate Haugen, Jill McCullough, Andrea Carter, Dawn Barton, Rick Stillwell, Christy O'Neal

## Review Funded Applications
- Christal went through the 11 funded applications.
- MOU’s have been signed and funding has been distributed to partners.
- Reporting Requirements:
  - Final Report (template to be provided by NCACH) including:
    - Description of how funds were utilized
    - Milestones achieved
    - Barriers and challenges encountered
    - Lessons learned
    - Successes
    - Report on project specific metric outcomes (specified in MOUs)
- Verbal report at an Opioid Workgroup meeting
- Verbal report at a partner meeting
- Action item: Prepare a news release

## NCACH Project Updates
Caroline Tillier gave an update on the WPCC Learning Community made up of 17 outpatient clinics. Change plans are due end of July. Change plan is specific to their workflows. They are encouraged to redesign their practice to improve their opioid prescribing practices.

What would the workgroup want to know from the change plans?
- We would like an overview of the projects ie: 4 organizations have an aim in prevention and those tactics are... This would help guide us to areas that are not already being addressed.
- Would like to see if change plans call out partnerships.

John Schapman gave an update on the Transitional Care and Diversion Interventions workgroup.

Approaches
- ED Diversion
Transitional Care Services
Will have one application for both approaches. Hospitals can apply for one or both process improvement projects. We are in the process of finalizing the application and will be bringing it for approval to the Board on July 27th. Target population is 5+ ED visits in the past 12 months. Application is planned to go out Mid-August for scoring in September or October.
Working with the NCECC to convene the 10 EMS agencies. NCECC is surveying the 10 EMS agencies to assess their needs. Work plan is due August 31st.

Christal gave an update on the Pathways Community HUB. Community Choice is the HUB lead agency that was selected through an RFP Process. In June, there was strategic design workshop where we selected the target population of 3 or more ED visits in Moses Lake (specifically the zip 98837). Expected to Launch October 1st, Chelan Douglas mid 2019, Okanogan end of 2019. They are in the process of identifying care coordination agencies and developing a referral system.

The ACH is providing the startup funding for the HUB. The lead agency is responsible for creating contracts with other payers to become sustainable.

### Budget Allocations

<table>
<thead>
<tr>
<th>Project Funding</th>
<th>Total</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>WPCC (Project 2A &amp; 3D)</td>
<td>$10,900,000</td>
<td>57%</td>
</tr>
<tr>
<td>Project 2B Pathways Hub</td>
<td>$5,000,000</td>
<td>26%</td>
</tr>
<tr>
<td>TCDI (Project 2C &amp; 2D)</td>
<td>$2,400,000</td>
<td>12%</td>
</tr>
<tr>
<td>Project 3A Addressing the Opioid Crisis</td>
<td>$1,000,000</td>
<td>5%</td>
</tr>
<tr>
<td><strong>Total Project Budget</strong></td>
<td><strong>$19,300,000</strong></td>
<td><strong>100%</strong></td>
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### Funding Process

Opioid Budget is $1,000,000 through 2021.
Christal went over three options of how to use the funding (see meeting packet for graph).

**Discussion:**
- Would support any regional approach - consistent messaging - Option 3 we would probably aim for 50% participation of partners. Malcolm believes that we would need to hire somebody to do this work. The funding could go to contracting that work out to an agency that does have the capacity to do that work.
• Hearing support for regional projects, we could have multiple small programs. We could put out an application for agencies to apply for regional projects. Gail said that there is no way that they could take on a regional project. Malcolm said that there are agencies like OHSU and UW that have programs that could come into the area and do the work.
• John noted that the TCDI group selected 3 approaches.
• Julie said if it was more collaborative than regional it would be easier for agencies to take on.
• NCACH could create a structure with a regional plan and funded counties to take bits and pieces on.
• Dental providers are going to be hard to crack. It is going to take some external group with some authority in the subject.
• Pick an approach that other workgroups aren't already focusing on. Fill the gaps where the change plans aren't addressing. Jails, schools, law enforcement, pharmacies.
• Problem with pharmacies is that there are national policies that may not allow participation in NCW.
• A few years ago Confluence and CVCH had a conference about creating a consistent message on opioid prescribing. It was impactful but the folks that you want to attend are the ones that won't attend.
• Regional Opioid Conference that has something relevant to each sector. Cons - agencies may not be able to commit to more than 30% attendance.
• Pathways to Prosperity Conference offered through WSU - NCACH will look into this and also talk to OHSU.
• Brett likes the idea of the conference but worries that dentists will not actually attend. Would get more bang for our buck by going through the Dental Society.
• Maybe we should do two projects one geared towards dentists and another for other agencies. There are many funding opportunities for take back boxes etc.
• Idea hold 3 conferences so that others attend because of word of mouth
• Educational session the first year then focus on grant programs following years.

Next steps - come up with a budget for holding these conferences. One at Big Bend, one in Wenatchee, one in Okanogan.

Talk to WSU Extension about making their conference about Opioids, then we would not have to fund the conference.

### Assignments

- Prepare news release about Opioid awards
- Contact WSU Extension about their annual conference and discuss the Pathways to Prosperity conference