CPAA Support Team Meeting Summary: June 1, 2016

Welcome and Introductions

The June 1st Support Team meeting of the Cascade Pacific Action Alliance was held at Providence Professional Center in Centralia, WA. The goals of the meeting were to learn about operational updates, review and edit CPAA policy talking points, prepare questions for next week's Health Care Authority (HCA) presentation at the Council meeting, debrief last month's shared learning session and further develop a shared learning syllabus, and work on developing a driver document (compass document) for the RHIP work. Additionally, guests from Providence CORE were present to give a demonstration of their data dashboard that is in development for the Accountable Communities of Health (ACHs).

Operational Updates

Youth Behavioral Health Coordination Pilot

Staff shared that HCA has requested an additional $50,000 from Center for Medicare & Medicaid Innovation for "early win" projects for each ACH. Approval should occur in 30-60 days. The CPAA Council voted last month to submit the Youth Behavioral Health Coordination pilot project as the region's "early win" demonstration. Pilot sites are working developing implementation plans.

Communication and Engagement Plan

Backbone staff also shared that they will be reviewing communications and engagement analysis and gaps to bring to the next Support Team meeting. As part of this analysis, staff is seeking technical assistance for community engagement, and a regional meeting is being planned for late June with representatives from the region's seven tribes to discuss tribal engagement.

ACH Quarterly Convening

An invitation was given for one more CPAA representative to go to the ACH Quarterly Convening coming up at the end of June. A draft agenda of the convening included a focus on financial sustainability. More information should be distributed from HCA soon.

Legal Entity Update

CHOICE leadership met with HCA leaders Dorothy Teeter and Nathan Johnson to discuss CPAA legal entity options. HCA leadership deemed that having the CPAA be a program of CHOICE as an unviable option because of concerns that the CHOICE Board is not representative of the wider CPAA stakeholder council. The LLC option seems feasible to them, especially given the established collaboration and CHOICE infrastructure in the region. HCA's feedback focused on ensuring that the ACH decision-making body is what is accountable for any global waiver funding decisions in the region. The group agrees that the CPAA Council should not take any action yet as far as preparing for global waiver until a global Medicaid waiver is confirmed. The group recommended for staff to conduct research about what steps and financial resources are needed in order to incorporate the LLC, including legal consult; and drafting articles of incorporation, bylaws, and conflict of interest policies. The Council meeting next week will include a brief update on the legal entity options conversation.

Policy Talking Points

The Support Team reviewed a draft document outlining talking points for stakeholders to use when discussing ACHs and the CPAA with local and state policymakers..

The intended audience is local and state elected officials from county commissioners to state legislators.

- The group suggests adding a purpose statement or clear request for involvement. For example:
    - Please consider policy that supports cost-saving across multiple sectors.
    - Please attend a Council meeting to see our day-to-day work.
    - Please consider policy that supports the expansion of our Youth Behavioral Health Coordination pilot project.
    - Please attend our upcoming policymaker summit, which will orient our local decision-makers to the purpose and goals of the CPAA.
- It may be a good idea to include some pre-emptive talking points addressing controversial or political issues that may come up around ACH-related activities. For example:

The timeline for talking to legislators may be influenced by the global entity decisions and by the progress of RHIP strategy development, so plans for a policymaker summit will continue to be discussed in coming months. In the meantime, the group agrees that it is a good idea to start one-on-one meetings with specific policymakers.

HCA Global Waiver Team Visit – Questions

The group reviewed the list of questions compiled from the last two CPAA Council meetings as priorities to bring forth to the HCA during their presentation at the June 9th Council Meeting. Staff requests that updates and changes be made by Friday, June 3rd so that the questions can be sent over to the HCA team in preparation for the Council meeting. The group made several suggestions to add to the list of questions that will be added to the questions document.

The Support Team also suggested sending a copy of the current RHIP along with the questions, so that the HCA Team can have all the information needed for making connections between global waiver transformation projects and the CPAA's RHIP activities.

BHO Shared Learning

The Support Team expressed appreciation for the layout and timing of the shared learning panel, and the entire May Council meeting, saying that alternating between presentations and small group discussions created good pacing and engagement. Specific to the Early Adopter panel, the group was impressed with how broad the data for the Southwest Region early warning system was, and is interested in learning how the Southwest partners are gathering the data for that.

The group recalled that Federico Cruz-Uribe mentioned during the panel that the ACH in SW should have played more of a driving role in integration. The Support Team recognizes that if there is a way that CPAA can help the state define what role ACHs should play in this transition, that would be helpful in preparation for statewide integration by 2020. One observation is that there may be a gap in addressing

social determinants between the Behavioral Health Organizations (BHOs) and the Managed Care Organizations (MCOs), and that may be where the ACHs could play an important role. These questions will be taken into account during planning of the June Shared Learning Panel with Mark Bollinger and Mark Friedman of the BHOs. The group would like the Council meeting to include discussion of the basics of BHOs, the role of ACHs in integration, a review of the learnings from Southwest Region integration, what it all means for the CPAA's future.

Shared Learning Draft Syllabus

The group reviewed the draft syllabus document, and agreed that this would be a helpful guide for planning future shared learning sessions. The group had a few suggestions for additions to the syllabus and will be incorporated.

Council members will prioritize the course topics and suggested detail topics at the Council meeting.

Regional Health Improvement Plan

Center for Outcomes Research and Evaluation (CORE) Data Presentation:

Bill Wright, Phd., Director of Providence CORE, gave the group a brief overview of what CORE is and what work they have been doing in Oregon and starting to do in Washington. CORE is working to bridge research and data with real-time decision making, and has contracted with HCA and DOH to develop a Healthier Washington data dashboard for the ACHs. Each ACH has the opportunity to influence the development of the public statewide dashboard, in terms of what capabilities it should have, as well as possibly working directly with CORE to develop customized dashboards with region-specific capabilities. The dashboard's purpose is to explore the questions of what drives health in communities and how can that information be used to improve health in the state. Bill then demonstrated several of the dashboard's current capabilities and explained some features that are in development:

- Current dashboard data represents the state's Medicaid population from Provider One data.
- The dashboard currently has demographic data, and will later have diagnosis categories.
- The dashboard could be customized to have program enrollees and place attributes, which would allow users to filter by program and compare to non-enrollees to potentially see the health impact of a program or activity.
- The data is refreshed by HCA on a monthly basis, with a 2-3 month lag.
- Cost data is not available in the public ACH version. The Support Team agrees that cost data will be crucial for the ACHs to work towards activities that will generate cost savings as well as improve health. The group discussed the challenge of needing a data sharing policy infrastructure for the state agencies and ACHs in order to make this feasible.
- The CORE dashboard is different from and is complementary to the Washington Health Alliance dashboard, which is more of a scorecard tool, while the CORE dashboard is more of an interactive building block.

The CORE dashboard was supposed to be released June 2, 2016 to ACH leads. However, that date has been moved to June 6, 2016.

RHIP "Driver Document"

The Support Team reviewed the first draft of a document intended to assist the RHIP work groups and CPAA Council with moving the RHIP priorities forward. Staff developed the first draft along with help from work group leads Michael O'Neill and Caitlin Safford, and decided to move away from the term "driver document" and instead use "compass tool." The group agreed that this could be a good tool for organizing the RHIP work and communicating it in a succinct way to the full Council. The next step will be for the RHIP work groups to fill out the tool with an example strategy to try out its capabilities. The Support Team also suggests that the Council should agree upon the defined goal metrics, using CORE's examples taken from the state's 52 measure set as a starting point.

Next Steps

- ☐ Staff will send an email to the CPAA Council with details about the ACH Quarterly Convening.

- ☐ Staff will get further information about the steps and resources needed to incorporate the CPAA as an LLC.

- ☐ The Support Team will continue to discuss which policymakers to start talking to, and which CPAA representatives will be the messengers. Staff will update the talking points to include clear requests and purpose.

- ☐ Support Team members should send additional questions for the HCA presentation by Friday morning, June 3rd. The list of questions will be sent to the HCA team that day.

- ☐ The next CPAA Council Meeting will be **June 9, 2016, 1:00PM–4:00PM** at Summit Pacific Medical Center.