CASCADE PACIFIC ACTION ALLIANCE
IMPROVING COMMUNITY HEALTH & SAFETY

Regional Health Improvement Plan – Compass

The purpose of the Cascade Pacific Action Alliance is to improve community health and safety while advancing the Triple Aim: improving the patient experience of care, including quality and satisfaction, improving the health of populations, and reducing per capita health care costs.

Regional Health Improvement Plan "Meta" Goals		
Improve Health	Whole Person Care	Smarter Spending
Improve health equity and health outcomes for all residents in our communities, with a focus on addressing the social determinants of health.	Keep residents healthy as long as possible and address all health needs with a focus on prevention and early interventions.	Reduce per-capita health care costs while improving the quality of care provided to residents in our communities.

Shared Regional Health Priorities

Priority areas to achieve goals including specific activities, programs, policies, and system change strategies to bring about change.


Improve Healthcare Access


Improve Care Coordination & Integration


Prevent & Manage Chronic Disease


Prevent and Mitigate Adverse Childhood Experiences (ACES)


Enhance Economic & Educational Opportunities

Health Care Needs, Health Disparities, and Social Risk Factors

- Adult and adolescent smoking and obesity rates for the overall population are higher than the state average; residents have less access to exercise opportunities and healthy foods.
- Heart disease is the second largest leading cause of death in our region across all counties. The management of chronic diseases, including obesity and heart conditions, places a huge burden on our health care system.
- Mental health is also a concern, with adults and adolescents reporting higher rates of poor mental health than statewide. Adolescent depression is of particular concern, with 35-41% of adolescents within CPAA's counties reporting depression symptoms within the past year.
- Adequate health care access is a problem throughout our region, but is particularly severe in our rural communities where the number of health care providers is well below the Washington State average.
- Dental utilization is lower for the overall and Medicaid population of all ages.
- Emergency department utilization is also higher than statewide, potentially reflecting challenges for or with members who have no other access to care, (approximately 16% of ED visits are potentially avoidable, higher than the statewide rate).
- Our health care system is highly fragmented, resulting in poor transitions of care and reduced health outcomes as patients struggle to navigate a confusing health system. Care for individuals with complex health needs, who require assistance from multiple service systems (medical, behavioral health, and social services), is a significant challenge in this fragmented system. Service providers often do not know of each other, share relevant information, or work together to improve health outcomes. This is of particular concern for individuals suffering from mental health and chemical dependency issues who require cross-sector assistance.
- Our region has a high burden of ACEs, which are likely contributing to the prevalence of chronic disease and other poor health outcomes.
- Teen pregnancy and unintended pregnancy rates are higher than statewide, and the percent of CPAA's population using LARC is lower than statewide.
- Lack of education and high rates of unemployment are contributing to poor health. Five of the seven counties rank in the top ten worst counties for unemployment rates in Washington State (RWJF, County Health Rankings).
- The median household income for our rural communities is nearly a third lower than the Washington State average.

Criteria used for Project Selection

Alignment
- Does it align with CPAA mission, value, and need?

Actionable
- Is it an "actionable" strategy (what is being changed and where will that happen)?

True Need
- Does it connect to a maginutude of need (without duplication of existing efforts)?

Impact Potential
- Is there a demonstrated impact on regional health systems transformation that advances health equity?

Role Clarity
- Does CPAA have a clearly identified role?

Improve Healthcare Access	Improve Care Coordination & Integration	Prevent & Manage Chronic Disease	Prevent and Mitigate Adverse Childhood Experiences (ACES)	Enhance Economic & Educational Opportunities
Top Identified Strategies "Prior to the Demonstration"				
• Activity: Joint regional recruitment plan • Program: Develop ARNP residency program • Systems: Develop Tele-medicine network	• System: Care Traffic Control • System: Behavioral Health Integration • Program: Community Care Center • Program: Wellness Center • System: Community Based Paramedicine • System: Community Health Workers	• Systems: Improve access to chronic disease self-management programs	• Activity: Coordinate NEAR Speakers bureau • Systems: Increase access to home visiting programs • Systems: Expand Kinship Care Program • Systems: Develop Trauma Informed Communities	• Systems: Support individuals in obtaining & maintaining employment and livable income
Current Implemented Strategies Align with RHIP				
	• Youth Behavioral Health Coordination Pilot	• Youth Marijuana Prevention and Education Program		
Medicaid Transformation Demonstration Project Areas Align with RHIP				
• Access to Oral Health Services	• Bi-Directional Integration of Care and Primary Care • Community Based Care Coordination • Transitional Care • Diversion Interventions	• Chronic Disease Prevention & Control • Addressing the Opioid Health Crisis	• Reproductive and Maternal/Child Health	

Medicaid Transformation Demonstration Project Areas and Activities Identified 8/1/2017

Bi-Directional of Care & Primary Care	Community Based Care Coordination	Transitional Care	Diversion Interventions
•Use collaborative care model to integrate behavioral health into primary care and primary care into behavioral health	•Develop Regional Pathways Hub	•INTERACT 4.0 •Transitional Care Model •The Care Transitions Intervention	•Community Paramedicine

Opioid Response	Reproductive and Maternal/Child Health	Access to Oral Health	Chronic Disease Prevention & Control
•Prevention: Prevent Opioid Use and Misuse •Treatement: Link Individuals with OUD with Treatment Services •Overdose Prevention: Intervene in Opoid Overdoses to Prevent Death •Recovery: Promote Long-Term Stablilization & Whole Person Care	•10 Recommendations to improve womens health before conception •Home Visiting Programs for pregnant high risk first time mothers. •Bright Futures or EMHI	•Oral Health in Primary Care •Mobile/Portable Dental Care	•Chronic Care Model

Medicaid Transformation Demonstration Supports & Investments	
Health & Community Systems Capacity Building	
Financial Sustainability through Value Based Payment	Invest in provider readiness so that providers are able to enter into value-based contracts. Work with Qualis and the Practice Transformation Hub to prepare providers and leverage the work of the Clinical Provider Advisory Committee to meet state goals.
Workforce	Connect with state workforce resources, providers, MCOs, the Practice Transformation Hub, CPAA Consumer Advisory Committee, and the Enhancing Education and Economic Opportunities Work Group to address workforce implications for the Demonstration. Potential investments include implementing telehealth, training and expanding the number of community health workers, and training providers in trauma informed practices, cultural competency, tribal affairs, and health equity.
Systems for Population Health Management	Invest in the interoperability of existing systems to enhance data sharing. Potential alignment areas include One Health Port, Clinical Data Repository, and connecting partners to EDIE/PreManage systems, EPIC, and HIT/HIE systems to support streamlined data sharing and improved efficiencies for providers.

Alignment of strategies, projects, policies, system changes and dedicated investments to sustain the needed infrastructure will lead to improved health outcomes.