



## CPAA Council Meeting Summary: May 10, 2018

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### **I. Welcome and Introductions**

The May 10, 2018, Cascade Pacific Action Alliance Council Meeting was held in Cathlamet, Washington, with more than 25 people in attendance. Executive Director Winfried Danke invited the council and guests to introduce themselves, and then provided an overview of the meeting's proposed agenda items.

### **II. Financial Report**

Winfried reviewed the Financial Report of the first two quarters of Fiscal Year 2017-18, beginning October 1, 2017. The net income for both the Youth Marijuana Prevention & Education Program (YMPEP), a reimbursement-based program, and the Youth Behavioral Health Coordination Pilot Project (YBHCP) is zero. There was a small positive net income for Operations due to interest income. Overall, less revenue was released during the first two quarters of the fiscal year than budgeted due to reduced spending in particular on personnel.

### **III. Summary of Previous Month's Board Meeting Outcomes and Review of Upcoming Business**

Winfried shared the meeting outcomes from last month's Board meeting. No major actions were taken. The board discussed the concept of Centers of Excellence (now referred to as Centers for Transformation) and agreed that the concept is worth exploring, although some questions remain. The board also reviewed the methodology for the first round of funding, and the funding principles that were developed to guide this process.

At today's board meeting, the board will be asked to approve the MTP first-year funds flow, RFP design elements, and adopt payments to tribal partners, as well as partnering providers who participated in the current state assessment.

### **IV. Update on Work Groups, Committees, and Tribal Engagement**

Christina Mitchell, Clinical Director, shared the following Work Group and Advisory Committee updates:

- Bi-Directional Care Integration
  - AIMs Center Bi-Directional Training will be held on May 31<sup>st</sup> in Rochester, WA
  - The work group discussed strategies to increase collaboration with more potential partners
- Opioid Response
  - The program manager is working with Pacific Mountain Workforce Development Council to pursue a grant opportunity
- Chronic Disease
  - The program manager gave a talk about 'Addressing chronic disease through cross-sector partnerships' at the Living Will in Washington State CDSME Expansion Grant Project Final Summit



- Pathways HUB
  - The program manager is aiming to select Care Coordination Agencies by November 2018
  - The work group discussed the possibility of collaborating with Health Homes, and using Peer Support Counselors
  - The CCS Platform is still the software of choice
- ACEs/Reproductive & Maternal/Child Health
  - The work group worked on refining and enhancing the logic model, as well as identifying connections to the Pathways HUB model
  - The HCA has expressed interest with working with the CPAA to identify opportunities to connect primary care providers with the Head Start program to improve well-child visit rates in the region
  - Upstream, USA will present at the next work group meeting
- Clinical Provider Advisory Committee
  - The next meeting is scheduled for May 22<sup>nd</sup>
- Consumer Advisory Committee
  - The committee is working to identify a chair and co-chair
  - Staff is working to recruit additional consumers to join the committee
  - Committee members provided feedback on the CPAA website
  - Committee members also reviewed the transportation presentation which was shared at the last meeting

René Hildebrand, Community and Tribal Liaison, shared the following updates about recent engagement with Tribes and community members in the CPAA region:

- Staff met with three Tribes in the region
- Future meetings have been scheduled with representatives from the Quinault, Nisqually, and Shoalwater Bay Tribes
- René is holding bi-weekly calls with the HCA Tribal Liaison
- Staff have scheduled upcoming meetings with several of the Tribal Health Directors

## **V. Shared Learning: Reproductive Health**

Bre Laughery, Regional Director of Partnerships at Upstream USA, provided an overview of this organization's plan for Washington State.

Upstream USA is a “nonprofit organization that helps health centers across the country eliminate barriers that prevent women from obtaining the full range of contraceptive methods so that all women are empowered to become pregnant only when they want to.”

Upstream's approach has shown promising results. After partnering with the state of Delaware for two years, there was an estimated 15% decreased in unplanned pregnancies among Title X patients.



Upstream USA is offering to provide technical assistance as well as training for providers and support staff in Washington State. Before implementation, Upstream's Quality Improvement (QI) team would conduct a needs assessment at each provider location, register each site with the organization's software platform, and generate a timeline for implementation milestones.

The following is Upstream's planned scope for Washington State:

- Five years of training and technical assistance delivery, starting in 2019
- 40 participating agencies; including FQHCs, Tribal and IHS providers, rural health centers, and private providers serving a high percentage of Medicaid patients
- 300 public and private health sites receive training and technical assistance
- 540,000 women of reproductive age reached by health centers served when project is complete

The Council held small table discussions about the presentation. Participants were interested in the opportunity that Upstream USA is offering. Bre will be providing more information about this opportunity at the upcoming ACEs/Reproductive & Maternal/Child Health work group meeting. Work group members will explore a possible partnership with Upstream and bring more information back to the Council at a later date.

## **VI. Review Modified Funds Flow and RFP Process**

Winfried Danke reviewed a revised proposed Funds Flow for first-year funding allocations under the Medicaid Transformation Project (MTP). \$11.7 million in first-year funds will be distributed as follows:

- 10%: CPAA Management and Administration
- 5%: Contingency (emergency fund)
- 8%: Regional Wellness Fund
- 2%: Special Projects
- 31%: Domain 1 Capacity Building (health systems and community)
- 3%: Domain 1 Capacity Building (health systems and community) – Tribes
- 30%: Provider Engagement
- 3%: Provider Engagement – Tribes
- 8%: Provider Performance

First-year funds are focused heavily on provider engagement; in subsequent years, increasing amounts of funding will be allocated to the provider performance category.



The funds flow was generated with the following principles in mind:

- Support sustainability of project
- Improve health equity/reduce health disparities
- Address social determinants of health to the greatest extent possible
- Provide sufficient incentive for providers (clinical and non-clinical) to participate
- Reward relative contribution to desired outcomes
- Invest in rural and urban areas
- Invest in all seven counties
- Reward truly transformative efforts over marginal improvements
- Establish a regional Wellness Fund (Innovation Fund) to support investments in key health improvement areas

Winfried then provided an overview of a Request for Proposals (RFP) timeline. The RFP process is intended to identify a network of partnering providers that commit to implementing the MTP in the CPAA region. Selected implementation partners will receive the majority of first-year provider engagement and all of provider performance funds. After the board approves the basic RFP design, CPAA will release the RFP on May 30. A Letter of Intent will be due by June 14. RFP responses must be submitted by July 15, and network partners will be officially selected by August 15.

Up to 45 organizations will be selected in two rounds:

- Round One: The highest scoring organizations within each major category (Clinical providers/hospitals, Community-based organizations, Pathways partners)
- Round Two: Remaining slots will be assigned based on strategic considerations by a panel potentially including ACH staff, MCO representatives, and HCA staff.

## **VII. Next Steps:**

- Next Council Meeting:
  - Date: Thursday, June 14<sup>th</sup>, 2018, 12:00pm - 3:00pm
  - Location: Great Wolf Lodge Conference Center, Grand Mound, WA