



## CPAA Council Meeting Summary: October 11, 2018

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

The October 11, 2018, Cascade Pacific Action Alliance (CPAA) Council meeting was held in Rochester, Washington, with more than 40 people in attendance. Program Director Jennifer Brackeen invited the council members and guests to introduce themselves, and then provided an overview of the meeting's proposed agenda items.

### **II. Review Board Meeting Agenda**

John Masterson, Interim Director, reviewed the board meeting outcomes for October. At today's board meeting, the board will receive an update on the ED recruitment, review and approve IGT Shared Domain 1 allocation, review frequency of council and board meetings, review performance dashboard, and review and approve the funds flow mechanism for year two.

John also reviewed an update on the ED search. Ed Rogan, Lead Search Consultant for the ED recruitment, has received over 200 application responses and is moving forward with the interview process. There have been four identified candidates, with two alternates. There is a meeting scheduled for the Executive Search Committee to interview candidates on October 22, 2018.

### **III. Announcements**

CHOICE welcomed Sara Rainer, the new Opioid Response Manager. She joins us from Alaska and is excited to start working with the Opioid Response Program. Later this month, CHOICE Regional Health Network, in partnership with Pacific Mountain Workforce Development Council (PacMtn), will be announcing three grant opportunities. The Opioid Use Reduction & Response (OIRR) Alliance will build scalable, replicable models that address the economic and workforce impacts associated with opioid use disorder through new interventions and innovative strategies. More information about these opportunities is available at <http://crhn.org/RFP>.

The Health Care Authority is hosting a Learning Symposium on October 24<sup>th</sup>, 2018. The event will bring together people from Accountable Communities of Health (ACHs) from all over the state. The event is free but attendees must register [here](#).

Jennifer also announced that CPAA successfully submitted the Implementation Plan after weeks of hard work. CPAA also earned 30/30 on the semi-annual report which means that our region earned the maximum amount of funding available.

### **IV. Finance Update**

Samantha Tatum, Operations Director, announced that CPAA has received 27 out of 44 completed contracts as of October 10, 2018. Samantha recognizes that some organizations must go through a lengthy review process before contracts can be completed, and she acknowledges that as an important process. Once contracts are received, providers will receive payment based on the HCA portal payment



dates, usually two weeks. However, the portal will be closed from 11/9 - 12/16 for IGT Shared Domain 1 Incentive Processing.

Samantha then reviewed the process of uploading information to the Financial Executor Portal. Every partner must be loaded into the portal to receive payment. If partners have not done so, the link can be found [here](#).

Samantha also reviewed the Funds Flow Mechanism Year 2, found [here](#). The foundation is based on DY1 funds flow with some minor changes. There is a reduced percentage allocated to project management and domain 1 and a new category set aside for outcome based payments in year 1 and 2 for care coordinating entities. Also, the multi-project bonus pool distribution has been changed to a more equal distribution. Partners will now receive \$8,995 per project area if participating in more than one.

There was a question about Centers of Transformation, and what this will look like. CPAA will rejuvenate this idea in 2019 when there is a new Executive Director in place. There was also conversation around adding/dropping of projects and partners. CPAA clarified that there have been negotiations in contracts and some partners have scaled back, but they do not know yet what this will look like. After discussion, the Council was in favor of the proposal.

Samantha also went through CPAA's Dashboard Performance, found [here](#). This is an internal document that tracks CPAA performance measures by project and overall Medicaid Transformation. The performance will be reported to the Council and Board quarterly and semi-annually.

## **V. Consumer Stipend Proposal**

Jennifer reviewed the Consumer Stipend Proposal, found [here](#). The consumers have asked for a \$100 stipend increase and an extra \$250 for the chair and co-chair. The council clarified that this \$100 would be monthly, as the proposal is a bit unclear. The proposal was previously taken to the support team and there were concerns about the increase affecting consumer benefits, the council agreed. The amount could be a barrier for people during the recruiting process and CPAA would have to figure out the legalities tied to the new amount.

The council recommended to make attendance mandatory to receive the stipend, and wants to focus on the connection and value the Consumer Advisory Committee brings to CPAA. After much discussion, the council agreed to move forward to the board the \$100 stipend with the option for consumers to opt out if their benefits are affected. The council decided to table the chair and co-chair conversation until the Consumer Advisory Committee has a structure for those positions in place.

## **VI. Frequency of Council and Board Meetings**

Jennifer proposed that the Council and Board move to a bi-monthly meeting structure, found [here](#). The structure change reduces from 12 to 6 meetings a year. With the proposal, CPAA staff would have more time to prepare for efficient meetings and the new Executive Director will have more time to learn their position and settle in their role.



Jennifer asked the council for feedback, and there was worry that less meetings would lose work that is not surrounded by the Medicaid Transformation, such as Social Determinants of Health (SDOH). There was a suggestion to possibly create a sub-committee that focuses on SDOH, or to keep meeting monthly but divide time where half is spent on transformation work and half focuses on social determinants of health. There was another suggestion that the council and board meet every other month but host online shared learnings on the off month.

After thorough discussion, the council decided to propose to the board that they cancel the November meetings and discuss this topic further at the December meeting.

## **VII. Local Forum Document Update**

Jennifer reviewed the updates to the Local Forum draft document, found [here](#). She asked the Council to provide feedback:

- Add the responsibility of electing council members on their behalf
- Clean up language, because CPAA did not create local forums
- Remove the term “all” documents being sent to CPAA

## **VIII. Shared Learning: Insurance Enrollment Access Panel**

CPAA hosted guest speakers; Susanna Lopez, Patient Financial Advocate at Mason General Hospital, Matt Sanders, Navigator Program Manager at CHOICE Regional Health Network, and Joan Altman, Associate Director of Legislative & External Affairs at Washington Health Benefit Exchange to discuss their roles in health insurance access and enrollment.

The panel discussed the changes in the national landscape and how that affects the state environment, the preparation for the 6<sup>th</sup> upcoming open enrollment, and some of the challenges and question that our navigators and consumers are facing.

After the panel, the speakers were each asked to join a table for group discussion.

1. How do we best engage people without health insurance to enroll?
  - Proactive outreach
  - Incentivize people to be engaged (laundry, gas car, etc.)
  - Mobile enrollments/clinics
2. Are there activities we can do better to educate the community about health insurance?
  - Go where your audience spends the most time
  - Education – fear component, take the fear away
  - Target audience – go where the people are
  - Outreach and added information on health plans and teach the language of healthcare
  - Utilize social media outlets to reach bigger audience
  - How to engage millennials – lady’s night, focus on children, generational differences



3. How do people who don't have health insurance impact our regional Health Improvement Plan?
  - Higher cost of care – uninsured no data
  - Purposeful use of data
  - Access to health insurance
  - Quality metrics will be impacted by those with no insurance

### **IX. Next Steps:**

- Next Council Meeting:
  - Date: Thursday, December 13<sup>th</sup>, 2018, 12:00pm - 3:00pm
  - Location: Great Wolf Lodge Conference Center, Grand Mound, WA