



Board Minutes
2016
July

Date:	July 21, 2016
Time:	1:30 – 3:30 p.m.
Location:	1020 West Riverside – Philanthropy Center – Event Room
Meeting attended by:	Board Members: Greg Knight, Pam Tietz, Lynn Kimball, Christine Barada, Kai Nevala, Sharon Fairchild, Tom Martin, Jeff Thomas, Peter Adler, Dean Larsen Staff: Alison Carl White, Hadley Morrow, Colleen Nick, Alisha Fehrenbacher
Next Meeting Date:	August 18, 2016
Next Meeting Time:	12:00 – 4:00 p.m.
Next Meeting Location:	Native Project- 1803 West Maxwell Avenue

1. Welcome, Introductions, and Consent Agenda	Greg
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Consent agenda:

- Approval of June minutes
- Approval of May Dashboard
- Approval of June Dashboard

Motion to approve consent agenda – moved by Christine, seconded by Pam. Approved.

2. ACH Project Selection and Approval	Alison
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- Goal for today is to accept the next set of steps; allowing us to begin pilot of Pathways HUB model and conduct needs assessment and community assessment.
- Good potential for a pilot, but would hate to invest too much until identifying what to target and accomplish.
- There are attributes of Pathways that are potentially duplicative, our core charter is to not to create redundancy.
- Concern about the triage and information role of the Pathways model; the 211 system is a resource for this same work and is funded.
- Potential duplication with the managed care organizations who have invested millions of dollars in case managers, coordinators, IT systems.
- Concern about sustainability of program.
- Before being asked to approve anything that takes money and resources, there should be a defined set of measures.
- IT systems, interoperability between ACHs, is a concern; should be common across the ACHs.
- This model would provide ability to move toward whole person care. Encourage board to separate out the model from the technology platform.
- Have we, as an ACH, had discussions about data infrastructure needed to support our future?
- Are we going to have one infrastructure/repository locally?
- There has been no discussion statewide about what kind of technology would be necessary. The Healthier Washington initiative has just launched the analytics interoperability and management tool.
- There is an opportunity for a pilot, there are a subset of services for high risk, high needs people in our community that there is no coordination for.
- Model would be care coordination between social determinants and healthcare piece
- Strategic question for board is the role of the ACH; is it a neutral convener to radically change health of region but not deliver service; role of community cheerleader; community parent?

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<ul style="list-style-type: none"> • Important to make decision where we are going to be in future in order to decide model. • Do we take the approach of organizing a regional population health improvement, where we organize everyone in our region, that has high success of achieving what we want? Promote adoption, track and evaluate. • If we believe our goal is to incentivize adoption of programs, and allow individual systems and providers to request funding to get where we need to go, we would be administrator of granting. Would still need to get to outcomes in region. • Is the Pathways model the approach? Has been identified and has been successful in other areas. Question is strategically where do we want to go. • Discussed timing of submission of project to the state. • Initial project was the pathways HUB model. If board can agree for us to go forward to experiment on the pathways model with two or three partners (specific population, set of pathways), can submit to the state. • Population is going to be outside of healthcare. Identify areas that are not covered by care coordination. <p>Motion to approve the pathways model as the (roadmap) with the specific population and scope of the pilot to be determined for the ACH pilot – moved by Dean, seconded by Kai. Approved.</p>	
<p>3. Governance Discussion</p>	<p>Alison</p>
<ul style="list-style-type: none"> • Establish governance board committee to identify 2017 officers and board chair. • Recruit two new candidates for a full board of 15. • Recruit a tribal member. • Reviewed Governance Policy Statement; takes into account board input. • Terms of Service and Expectation discussed – board to annually complete self-assessment with input from Leadership Council. Every two years, board will conduct an evaluation on board and member effectiveness. • Will look at HCA CHEC and Board Source evaluation tools. • Anyone being nominated to the board will be required to complete the <i>Board of Directors Candidate Application</i>. • Clarified Board Terms of Service and Expectation question related to evaluation timing. • Motion to approve governance policy statement – moved by Peter, seconded by Dean. Approved. • Motion to approve the board candidate application – moved by Peter, seconded by Pam. Approved. • Motion to appoint BHT Governance Committee with Sharon as Chair and Peter and Kai as members– moved by Dean, seconded by Tom. Approved. 	
<p>4. Community Cares Evolution</p>	<p>Alison</p>
<ul style="list-style-type: none"> • Updated the board on the current status of the Family Assessment Response (FAR) program and the Hotspotters program. • The FAR program is fully funded by EHF, and the Community Health Worker (CHW) is now housed at the Philanthropy Center, and is working closely with Family Impact Network (FIN). • The new supportive housing coming on board offer opportunity for CHW support and care coordination for those people who have typically been part of the Hotspotter population. • Important community resource to steward, and important that there are some documented learnings. 	
<p>5. HCA Value Based Payment Road Map</p>	<p>Alison</p>



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<ul style="list-style-type: none">• Two weeks ago, HCA hosted conference for all ACHs and MCOs.• Roadmap for VBP shared• Design attributes concerned about: incentive money for performance; no plan for sustainability; and suggested alternative model for winners and losers (penalizes lowest performers).• Penalize communities served not the ACHs.• MCOs are putting together very clear written feedback on the roadmap.• Suggest that as a board, should weigh-in as well.• Draft a letter for board review/approval to send to the HCA.	
Follow Up/Action Items:	