

PUBLIC HEALTH IMPROVEMENT PARTNERSHIP

PUBLIC HEALTH - HEALTH CARE DELIVERY SYSTEM PARTNERSHIP

DECEMBER 16, 2013 Meeting

PARTICIPANTS

<i>Co-Chairs</i>	Gary Goldbaum (Snohomish); Bruce Gray (NWRPCA)
<i>DOH Lead</i>	Sue Grinnell
<i>Members Present</i>	Janna Wilson (Seattle-King); Janis Koch (Clark); Joan Brewster (Grays Harbor); Joel McCullough (Spokane); Regina Delahunt (Whatcom); Rachel Wood (Thurston); Lloyd David (The Polyclinic); Scott Forsland (Premera Blue Cross); Thomas Varghese (Harborview); Thomas Trompeter (HealthPoint); Teresa Litton (WHA); Tom Martin (Lincoln Hospital); Tao Kwan-Gett (NWCPHP); Ann Christian (WCMHC); Candace Goehring (DSHS); Charissa Fotinos, Kat Latet (HCA); Christine Gilbert (WHBE); Claudia Sanders (WSHA); Kathleen Clark (WCMHC); Karen Jensen, Janna Bardi, Maria Courogen, Martin Mueller, Jane Lee, Simana Dimitrova (DOH)
<i>Facilitator</i>	Eric Svaren
<i>Guests</i>	John Wiesman (DOH); Robert Crittenden (Governor's Office); Dorothy Teeter (HCA)

WELCOME

Gary Goldbaum and Bruce Gray, Co-Chairs

The Co-Chairs welcomed all participants. They introduced the meeting's purpose by highlighting the major changes health care is undergoing right now and how some new developments will affect the future direction of this partnership's efforts.

MESSAGE FROM LEADERSHIP – TAKING ADVANTAGE OF A WINDOW OF OPPORTUNITY

John Wiesman, Secretary of Health; Dr. Robert Crittenden, Governor's Office; Dorothy Teeter, Health Care Authority

The Secretary of Health John Wiesman kicked off the message from the leadership. He thanked all members of the group for joining this endeavor and stressed that right now there is an opportunity to narrow the chasm between clinical care and public health. He commended the members of this partnership for their willingness to guide the future with their expertise. This being an uncharted territory, Secretary Wiesman urged the group to use its time and efforts most effectively by engaging in the health care innovation planning happening in Washington now and by helping that process move forward. Secretary Wiesman also expressed his appreciation for the strong support from the Governor's Office and partnership with the Health Care Authority in leading this important work.

Dorothy Teeter, Director of Health Care Authority (HCA), reiterated that this is an opportune time for state government leadership to take an important step ahead. As HCA develops the State Innovation Model (SIM), one of the key themes that has emerged is the requirement to transform cross expertise and cross partnerships to increase quality of health care. Dorothy accented the importance of making linkages and obvious connections to help bridge the divide between public health and health care delivery system. She felt that the collective expertise of this group is the perfect venue where some ideas brought in the State Innovation Model can be refined.

Dr. Robert Crittenden thanked this group on behalf of the Governor. He related the Governor's goal for better quality and better outcomes of health and his support of this new partnership and what it's chartered to do. Dr. Crittenden also shared that he is looking forward to hearing what this key group comes up with about how we redesign procurement of integrated services to fund health outcomes.

STATE HEALTH CARE INNOVATION PLAN PRESENTATION

Sue Grinnell, DOH Lead and Kat Latet, Health Care Authority

Sue Grinnell and Kat Latet presented a high level overview of the Washington State Health Care Innovation Plan which shows why it is critical for this group to become engaged in this work and process immediately:

- The State Health Care Innovation Plan was initiated by a pre-testing grant
- Initial feedback from the federal government has revealed that more refinement work is needed on the plan's vision and scope (i.e., plan must be both broader and more comprehensive, must address physical health/mental health integration, must be more encompassing of the population)
- Plan objectives
 - Test model for innovation to lower cost
 - Raise community health status
 - Use levers for policy changes
- Goals for transformation
 - Healthy people and communities
 - Better care
 - Affordable care
- Strategies
 - Drive value-based purchasing across the community, starting with the state as first mover
 - Improving health overall by building healthy communities and people through prevention and mitigation of disease throughout the life course
 - Improve chronic illness care through better integration of care and social supports, particularly for individuals with behavioral and physical co-morbidities
- Foundational building blocks
 - Build a culture of robust quality and price transparency
 - Activate and engage individuals and families in their health and health care
 - Regionalize transformation efforts
 - Create *Accountable Communities of Health*
 - Leverage and align state data capabilities
 - Provide practice transformation and support
 - Increase workforce capacity and flexibility

- *Accountable Communities of Health* – enhance what is already going on locally, apply regional perspective, and develop regional health improvement plans. No more than 9 regional structures are anticipated, collaboration between the state and counties where existing responsibilities can fit into a regional scheme.
- Revised plan will be submitted to the federal government by the end of December 2013
- Legislation is in process - needed around set up and support for the *Accountable Communities of Health*
- Second grant may be available early next year, but no specifics announce yet
- 2014 will be a year of planning for implementation

Proposal to the group – Use this *window of opportunity* to create a comprehensive framework that will be a companion tool to the Washington Health Alliance’s Public/Private Transformation Action Strategy which is primarily focused on hospitals and ambulatory care settings. The comprehensive framework will be a bridge to population health, will support the Washington Health Alliance goals, and will build an infrastructure to support these goals.

DISCUSSION

Dr. Goldbaum pointed out that the start date for the upcoming legislative session is fast approaching. If this group wants to have any influence on legislation, it must work fast.

Implications from adopting the proposal of this new direction would be holding focused all day monthly work sessions between February and May to develop and deliver set of recommendations which will be used as a guide for policies made at the local level in regards to *Accountable Communities of Health*. It was brought up that we must work on the missing pieces and see how we can improve health beyond the health care delivery system.

In addition to recommendations, the group discussed the need to identify other issues, gaps and questions.

Many beyond this group are working on further clarification of the *Accountable Communities of Health*, and we don’t need to repeat that work.

This is a priority work for the Department of Health and the Health Care Authority. Question was raised about including the Department of Social and Health Services as an additional sponsor.

In order to move quickly and efficiently the work may include surveys, interviews, small groups and bringing in content experts when needed.

Participants were requested to actively share this work while it is in process with their constituents and bring back feedback.

Discussion regarding other voices that may be needed in this work:

- Medicaid plans
- Community liaison
- Regional Health Improvement Coalition (Yakima?)
- Housing development representative
- Department of Early Learning
- Developmental disabilities representative
- Welfare Administration representative

- Geriatrics representative
- Employers
- County/city officials

The Public Health – Health Care Delivery System Partnership approved unanimously the new direction of efforts.

REFINEMENT OF CHARTER

Eric Svaren, Facilitator

The group quickly reviewed changes made to the charter to reflect the new focus of the work. A couple of quick suggestions were made to align the charter with the newest direction of this group. After incorporating the feedback from today, the charter will be finalized and shared with the group.

NEXT STEPS

- Doodle poll for the 4 meetings
- Next meeting will be had in February, date TBA
- Clarify the scope of the project
- Staff will begin developing a workplan
- Staff will determine what additional representatives are needed (this is iterative as the work evolves)
- Staff will meet with the Washington Health Alliance to learn of the work in developing the Public Private Transformation Action Strategy
- An update of this group's progress will be made to the Executive Management Advisory Council

Evaluation

- Work put into preparing the meeting
- Audio was good
- Having food is appreciated
- Good size group
- Parallel virtual worked well
- Location in Kent is best for in person meetings

PARKING LOT

- How will the State Health Care Improvement Plan objective be measured?
 - How will the regions for the *Accountable Communities of Health* be defined?
- What are the benefits? Implications?
- Define physical health
- Define Medicaid procurement
- How will Primary Care Transformation Centers and *Accountable Communities of Health* be funded?
- Clarify the Regional Support Networks (RSN) issues and what they mean to this work