



## Governing Board Meeting Summary

November 1, 2018, 1:00 p.m. – 4:00 p.m.

King County Elections, 919 Southwest Grady Way Renton, WA 98057

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*Members Present: Teresita Batayola (International Community Health Services), Elizabeth “Tizzy” Bennett (Seattle Children’s Hospital), Molly Carney (Evergreen Treatment Services), Elise Chayet (Harborview Medical Center), Kristin Conn (Kaiser Permanente of Washington), Shelley Cooper-Ashford (Center for Multicultural Health), Steve Daschle (Southwest Youth and Family Services), Ceil Erickson (Seattle Foundation), Patty Hayes\* (Public Health – Seattle & King County), David Johnson (Navos), Cathy Knight (Seattle Aging and Disability Services), Laurel Lee (Molina Healthcare), Betsy Lieberman (Betsy Lieberman Consulting), Daniel Malone (Downtown Emergency Service Center), Michael Myint (delegate for Sherry Williams – Swedish Medical Center), Jihan Rashid (Somali Health Board), Erin Sitterley (Sound Cities Association), Andrea Yip (delegate for Jeff Sakuma – City of Seattle), Giselle Zapata-Garcia (Latinos Promoting Good Health)*

*\*denotes remote participation*

*Members Not Present: Roi-Martin Brown (Washington Community Action Network), Sybill Hyppolite (SEIU1199NW), Stephen Kutz (Cowlitz Indian Tribe), Esther Lucero (Seattle Indian Health Board)*

*Staff: Myani Guetta, Thuy Hua-Ly, Michael McKee, Susan McLaughlin, Tamar Puckett Kelsey Robinson (HealthierHere), Christina Hulet (Hulet Consulting), Dan Lessler (HealthierHere Consultant)*

*Guests: Sue Birch (HCA), Ruth Bush (CLW), Samantha Clark (Multicare), Adam Davis (Puget Sound Fire), Andrea Davis (Coordinated Care), Elisa Del Rosario (Asian Counseling & Referral Service), Katie Escudero (KCHA), Allan Fisher (United Healthcare), Whitney Howard (Molina), Marissa Ingalls (Coordinated Care), Laura Johnson (United Healthcare), Isabel Jones (HCA), Kat Latet (CHPW), Stephen Lucas (Council of Large Public Housing Authorities), Marcela Maguire (CSH), Jason McGill (WA Governor’s Office), Ben Miksch (United Healthcare), Cicily Nordness (SHA), Marguerite Ro (Public Health – Seattle & King County), Caitlin Safford (Amerigroup), Ingrid Ulrey (Public Health – Seattle & King County)*

## Welcome & Introductions

Betsy Liberman (*Betsy Lieberman Consulting*) Governing Board (GB) co-chair, welcomed everyone and the board and public briefly introduced themselves.

## Board Business

Betsy opened a motion to approve the 10/4 minutes. Elise Chayet (*Harborview*) was mistakenly noted as absent from the 10/4 meeting though she was present. The minutes were approved with this correction.

Abstentions: Michael Myint (*Swedish*)

## Conversation with the Health Care Authority

Susan McLaughlin (*HealthierHere*) introduced Sue Birch, Director of the Health Care Authority (HCA). Sue thanked the board and described her unique perspective and nursing background. She had high praise for the ACH partnerships and is excited about the cross-sector alignment that is being created in the region. Moving forward Sue plans to do more work around the social determinants of health, health equity metrics and data gathering/synthesis. The focus of the next legislative session is building a modern behavioral health system. A series of mental health bills will be brought forward at the next legislative session. Susan thanked Sue and opened the floor for the board to provide feedback.

Lena Nachand (*HCA*), Tribal Liaison for Medicaid Transformation, reviewed her slide deck “An overview of the Indian Health Care Provider (IHCP) projects and how they fit within the Medicaid Transformation Project (MTP).” Lena described King County’s engagement with the Cowlitz, Muckleshoot, Snoqualmie, and the Seattle Indian Health Board and recognized that indigenous people “possess the culturally relevant knowledge and expertise to address and enhance the overall health and well-being of all American Indian and Alaska Native people across the country.”

The specific IHCP projects include:

- Integrating physical and behavioral health purchasing and service delivery to better meet whole person needs
  - Behavioral health integration, traditional healing, start/expand a Tribal 638 clinic, dental integration
- Support provider capacity to adopt new payment and care models
  - Tribal FQHC, telemedicine, community outreach
- Implement population health strategies that improve health equity
  - Workforce development/CHAP Board, public health, integrate behavioral health and law enforcement, childcare

### Community Voice/Public Comment

The floor was opened for public comment – no comment was made.

## Finance Committee Business

Susan took a moment to remind the board of the conflict of interest policy (COI). Elise Chayet recused herself in advanced of the discussion. Steve Daschle (*SWYFS*) and Thuy briefly reviewed the Inter-Governmental Transfer (IGT) decision memo (DM). The purpose of the DM was to request the GB’s approval of the second IGT payment distribution for Health System Capacity (Shared Domain 1) activities. The first IGT contributor payment distribution was presented and approved at the February 1, 2018 Governing Board meeting. This mechanism helps the state mitigate a \$300M shortfall in the overall financing of the 1115 waiver.

It was recommended that the Board approve this DM because the statewide IGT contributor financing approach needs all ACHs to approve the payment distributions, otherwise the incentive funds pool will be recalculated and fewer dollars will be available to ACHs. Approval of this DM allows all ACHs to receive the maximum incentive dollars available.

A motion was made to approve the IGT decision memo – the motion was approved.

Recusals: Elise Chayet



Thuy reviewed the draft 2019 administrative budget and projected revenues. The budget incorporates and accounts for cost of living/merit increases and two additional staff. There is an overall increase of about 9% from the previous year. Thuy and Susan welcomed any feedback or suggestions regarding budget line items (there was a concern that our staff training allocation was low).

## Fully Integrated Managed Care Transition

Isabel Jones (*HCA*) updated the board on the HCAs transition to fully integrated managed care (FIMC). They have completed readiness reviews of the managed care plans and the King County BHO. Everyone is on track for the January 1 transition. Moving forward, the HCA is focusing on broad communications to clients regarding coverage changes and increasing call center staff to address client questions. Furthermore, the Early Warning System (EWA) workgroup had recently agreed upon a few key indicators to track outcomes. Providers have been very receptive and appreciative of the efforts by the HCA.

The representatives of the five managed care organizations (MCOs) and Karen Spoelman (*King County BHO*) shared the status of their transition to FIMC. All 5 MCOs have contracted with King County to serve as Network Manager for the King County Integrated Care Network (KCICN). KCICN will manage the behavioral health provider network under contract with the MCOs for Medicaid-covered outpatient and residential services for SMI/SED populations and all Medicaid-covered SUD services. King County will also manage the behavioral health administrative service organization (BH-ASO) contract, and act as the payer for crisis services and other non-Medicaid funding sources such as block grants. BH services will not look substantially different to King County-contracted BH providers; MCOs may also contract directly with these providers. They are continuing to do client outreach and communication, provide continuous care for clients in active treatment, work with BH providers and monitor the community impacts via the EWS. Moving forward they are working on clinical integration, establishing measures that promote integration/value-based care and more learning with KCICN.

The meeting was adjourned.