# Health Care Reform/Health System Integration Planning Team

**October 24, 2011**
**2:00 to 3:00 p.m.**
**401 5th Ave, Seattle - Room 1113**

**Attendees:** Rosemary Aragon (phone), Jodi Brown, TJ Cosgrove, Rosemary Cunningham, Jerry DeGrieck, Sharon Farmer, Greg Francis, Charissa Fotinos, John Gilvar, Kathie Huus, Darcy Jaffe, David Johnson (phone), Betsy Jones, Doug Whalen, Susan McLaughlin, Alan Painter, Amnon Shoenfeld, Karen Spoelman, Rachel Quinn, Janna Wilson, Holly Rohr Tran.

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**Introductions and Announcements** 2:00

Dual Eligibles Focus Group on October 28: After a round of introductions, John Gilvar noted that King County's work with DSHS is progressing to co-sponsor a dual eligible forum on Friday, Oct. 28, 1-3 p.m. in Federal Way. The forum will focus on 2 groups: beneficiaries and practitioners/administrators. Feedback will inform the State's planning for dual eligibles. There is still room for additional beneficiaries to participate in this meeting – please contact John with nominations or any other questions.

Communities Connect event on November 7: Communities Connect is hosting an event *Continuing Our Ascent Community Strategies Summit* on Nov. 7 in Olympia. Jonathan Seib is planning on attending to talk about what's happening at local/regional level. All are welcome, and this team is encouraged to attend. **Note: subsequent to this Oct. 24 meeting, a cancellation for the event was announced; "Thank you for your interest in attending the November 7 Communities Connect Summit. Due to travel restrictions and the focus on the upcoming special session, many local teams were unable to attend. Therefore, we are canceling the event. Please keep in touch regarding your local activities and stay tuned for another opportunity to convene in 2012."**

**Next Phase of Work with Reform Planning Team (Discussion & Input)** Janna Wilson & Susan McLaughlin 2:15

Discussion about the next phase of work for this Health Care Reform Integration Planning team covered these points (see slides attached):

1. Review Current Status
    - Recap of "vision statement" we developed in September
    - Review the State context
2. Clarify the next phase of work and objectives for the Reform Planning Team
3. Given our objectives, what initial questions do we need answered (and why)

The group noted the following points which need further clarification from the State: better understanding of Medicaid Health Home opportunity plus its relationship to the dual eligibles design work; what are the parameters for local/regional planning; how does the state envision

connections with local systems and human services; and further clarification on the definitions of "case management" and "care." Some participants said they had been hearing about a concept of "managed fee-for-service" as a model and the group asked for clarification on what that means.

A handout was distributed (see attached) listing current membership. The group discussed expanding membership to include representatives of other segments of the safety net health and human service systems that will be affected by health care reform and who have a stake in models of integration. Staff will follow up to identify appropriate individuals and extend invitations for them to join. Staff will also contact the State to work on an appropriate way to better engage them in our planning work. If Integration Team members have any further suggestions, please let Susan & Janna know.

The group agreed to revise their regular meeting schedule to meet for 2 hours once a month – the meetings will occur on either the 2nd or 4th Mondays of each month from 1-3 p.m. or 2-4 p.m. – to be determined.

The following needs were identified as this group moves forward with design work:

- Clinical workflow design needs to precede the financing flow
- Map of who is providing which services. This can be used to start conversation of "what do you do best?"
- What is the current demographic of the population currently served in the health/behavioral health safety net, and what is the profile of those who will be served in the future under Medicaid expansion? What agencies and providers are currently serving the population and what services are they getting/not getting? Can we push to identify where there may be duplication? Looking at data sets may uncover this, as will getting frontline staff in the room to discuss care processes. PRISM data may be a place to start, and there also might be insights drawn from the places in the system where people first seek care (I&R lines, access/outreach programs).

*Next Steps:*

Specific data questions to be refined in order to effectively inform this work going forward. Planning team members should send any additional input to Susan & Janna.

**Upcoming Meetings:** Nov. 14, 2-3 p.m.; Dec. 12, 2-4 p.m.; 4th Monday of ea. month starting Jan. 23, 2012

**Planning Team Members *& Staff*:**

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