

COC Steering Committee | MINUTES

Meeting date | time July 29, 2015 | Meeting location Share Fromhold

Facilitator Amy Reynolds
Note taker Becky Morgan

Attendees:

Andy Silver, Peggy Sheehan, Sierk Bram, Kate Budd,
Amy Reynolds, Bunk Moren, Scott Conger, Kathy
Neary

AGENDA TOPICS

Agenda topic | Minutes | Presenter | Amy Reynolds:

Sierk motioned to approve minutes. Andy seconded. Minutes approved.

Agenda topic | Overview of Clark County Action Plan and how new taskforces will accomplish some of the work | Presenter | Andy Silver:

Andy handed out some possible task force ideas for the COC.

1. Employment Task Force- this task force would work on filling the gaps in getting folks ready for work. This would be a pilot.
2. Housing First Cohort- we have done a big shift into housing first and this has been a challenging model for us. This cohort would provide on-going learning and collaborations for those who have housing first programs.
3. Youth Crisis Response Task Force – The community has identified a need for short-term crisis beds targeted to 18-25 year olds.
4. Youth Supportive Housing Task Force – this group could focus on site based transitional housing for under 18 year olds.

Andy suggests we move forward with 2 or 3 of these task forces. Amy said that Olivia from Housing Solutions has already offered to take that on the Housing First Cohort, Andy will follow up with Olivia to get that started. There was some discussion around the youth task force. As the next step, it was decided that the youth group would determine which of the identified needs (short-term crisis beds vs. site based transitional housing) had the greatest momentum in the community. This would be the task force that would be developed. The discussion around the Employment Task Force resulted in Kate taking a lead role in spearheading that group.

Agenda topic | HUD update on the FY 2015 Process | Presenter | Andy Silver:

This year HUD is has stated that they may not renew all programs; they may purposely not fund all of the tier II programs. Andy believes they are doing this in an effort to put more pressure on local funding sources. Peggy asked when the application is due, and Andy replied that they do not have it out yet.

Agenda topic | COC Monitoring | Presenter | Kate Budd/Scott Conger/Kathy Neary:

Kate said that they have completed all monitoring visits; they have looked through files and talked to agencies. The Monitoring Committee hopes to have the scoring tallied for the next COC meeting. Kathy said that she was a bit disappointed in the lack of punctuation skills and attention to detail. Scott thought everyone did a good job and found the process interesting and liked learning what other folks do. Scott

especially felt that looking at the different ways that files were organized was informative. Sierk felt that there could be a best practice developed through this. Andy encourages the group to stop consolidating grants, if HUD continues this way it is better organizationally to loose one grant and not both. Kate among the housing programs they also fund the HMIS and COC planning, and those cannot be assessed in the same way as the housing programs are. The committee developed unique matrices to use for those programs as well as surveys. People were encouraged to fill out the surveys that CFTH has sent out if they have not already.

Agenda topic | Behavioral Health System | Presenter | Bunk Moren:

Bunk gave a handout (Washington State Medicaid Funding) that shows a diagram of how services work currently and what the changes will look like after- how Medicaid healthcare payments might make a change for the people we serve. Currently the way Medicaid payments are structured is that a state organization gives the money for primary care to for-profit NCO's, like CUP and Molina. The money is then distributed in the form of per member per month rate. The state also gives Clark County money, and SWBH (RSN) this is a single payer for all the mental Health Medicaid being spent in Clark County. The theory is that everything is going to better starting April of 2016. Clark County is going to several managed care organizations and the rest of the state is staying single payer. The theory is if you integrate payment then you have only one organization looking at all the claims, outcomes, etc they can hold a care coordination conference and talk to all in one without releases of information because they are the payer. Overall, this could bring better healthcare and better outcomes for less money. Peggy asked where the RSN's are. Bunk said they would be gone. Kathy said if you are a patient do you now have two care providers? Bunk said the delivery level doesn't seem to be changing; it's more behind the scenes. Everyone asks what the downside could be. Bunk said on the mental health and health service side some procedures are duplicated currently and this will no longer be the case with coordination. Polypharmacy will be a thing of the past with the coordinated service and less money spent. Bunk said those things could happen but it has a potential downside. Integrate the payment first and the integrated care follows. The downside is the transition. The biggest potential impact on the folks we serve is the way that the county is structured right now and the way the RSN is structured right now is they serve the county not a group of covered lives. Managed care organizations look trends and fix trends in claims. They do not look at community wide issues like homelessness or incarceration rates and then try to address those. Currently when we have an issue we go to one payer, the RSN, in the future who do we go to if there is 3 health plans, and our folks are all on different health plans, it might complicate an approach of community reform. Peggy asked what will Clark County DCS role be. Bunk said to counteract is they have a theory for accountable communities of health, they are local collaborative, of stakeholders', providers, and some of the folks from COC possibly, that entity can say we are having problems and can be reported directly to the HCA. We are not sure who the health plans are, there is not ACH yet, we only have the model identified. Another thing that will affect us is the behavioral health models credentialing, this may limit who we can hire. Most of our agencies cannot afford the credentialing currently required by managed care. We are not sure if our current service set will be paid for. Peggy asked if any of this will be resolved before April 1st, and Bunk said he thinks so. Kathy asked what the process is of addressing these concerns; Bunk said they have held stakeholders meetings.

Agenda topic | Day Center/Affordable Housing Task Force | Presenter | Peggy Sheehan:

We have a meeting coming up on the 5th of August for the day center, currently talking to Friends of The Carpenter about hosting this. We have a housing task force meeting on the 4th of August.

Action items	Person responsible	Deadline
Next meeting August 26, 2:00-3:30pm		
Andy send notes to Becky about changes to last meeting	Andy Silver	By next meeting

Action items**Person responsible****Deadline**

minutes.

Begin conversations to establish Employment Task Force

Kate Budd

By next meeting

Solidify with Olivia her interest in the Housing First Cohort and establish membership

Andy Silver

By next meeting