

Agenda

Delivery System Transformation Committee

May 27, 2021 4:30 – 6:00 pm

Online Click Here: [Join Microsoft Teams Meeting](#)

Phone: +1 971-254-1254

Conference ID: 826 171 835#

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|---|--------------------------------------|-------------|
| 1. Welcome and Introductions | Beck Johnson, Olalla Center | 4:30 |
| 2. Transformation Update | Charissa Young-White, IHN-CCO | 4:45 |
| 3. IHN-CCO Board of Directors Update | Kevin Ewanchyna, IHN-CCO | 4:55 |
| 4. Transformation and the Letter of Intent Process | Beck Johnson, Olalla Center | 5:15 |
| 5. Proposal Scorecard and Matrix | Beck Johnson, Olalla Center | 5:45 |
| 6. Wrap Up | Beck Johnson, Olalla Center | 5:55 |
| <ul style="list-style-type: none">• Announcements• Next Meeting: June 10, 2021 | | |

Acronym	Meaning
ACEs	Adverse Childhood Experiences
APM	Alternative Payment Methodology
CAC	Community Advisory Council
CCO	Coordinated Care Organization
CEO	Chief Executive Officer
CHIP	Community Health Improvement Plan
CHW	Community Health Worker
COO	Chief Operations Officer
CRC	Colorectal Cancer
DST	Delivery System Transformation Committee
ED	Emergency Department
EHR	Electronic Health Records
ER	Emergency Room
HE	Health Equity
HN	Health Navigator
HRS	Health Related Services
IHN-CCO	InterCommunity Health Network Coordinated Care Organization
LCSW	Licensed Clinical Social Worker
MOU	Memorandum of Understanding
OHA	Oregon Health Authority
PCP	Primary Care Physician
PCPCH	Patient-Centered Primary Care Home
PMPM	Per Member Per Month
PSS	Peer Support Specialist
PWS	Peer Wellness Specialist
RFP	Request for Proposal
RHIC	Regional Health Information Collaborative
RPC	Regional Planning Council
SDoH	Social Determinants of Health
SHP	Samaritan Health Plans
SHS	Samaritan Health Services
SOW	Statement of Work
TI	Trauma Informed
THW	Traditional Health Worker
TQS	Transformation and Quality Strategy
UCC	Universal Care Coordination
VbP	Value Based Payments
WG	Workgroup

Delivery System Transformation (DST) Pilots and Workgroups

Acronym	Project	Sites	Counties	Start	End
BRAVE	Bravery Center	Olalla Center	Lincoln	1/1/20	6/30/21
CCP	CommCard Program	The Arc of Benton County	Benton	1/1/21	12/31/21
CDP	Community Doula Program	Heart of the Valley Birth & Beyond	Benton, Lincoln, Linn	1/1/21	12/31/21
CSUP	Culture of Supports	North End Senior Solutions	Lincoln	1/1/21	12/31/21
DEC	Disability Equity Center	Disability Equity Center	Benton, Lincoln, Linn	1/1/21	12/31/21
ENLACES	ENLACES	Casa Latinos Unidos	Benton, Linn	1/1/21	12/31/21
HEWG	Health Equity Workgroup	InterCommunity Health Network CCO	Benton; Lincoln; Linn	5/1/15	present
HHT	Healthy Homes Together	Albany Partnership for Housing, Family Tree Relief Nursery	Linn	1/1/21	12/31/21
HUBV	Hub City Village	Creating Housing Coalition	Linn	1/1/20	12/31/21
HVOST	Hepatitis C Virus Outreach Screening & Treatment	Lincoln County Health and Human Services, Confederated Tribes of the Siletz Indians	Lincoln	1/1/21	12/31/21
IFCW	Integrated Foster Child Wellbeing	Samaritan Health Services	Benton; Lincoln; Linn	1/1/19	12/31/21
LCCOR	Linn County Crisis Outreach Response	Family Assistance and Resource Center Group	Linn	1/1/21	12/31/21
MHHC	Mental Health Home Clinic	Samaritan Health Services, Linn County Mental Health, C.H.A.N.C.E.	Linn	1/1/21	12/31/21
NPSH	Navigation to Permanent Supportive Housing	Lincoln County Sheriff's Office	Lincoln	1/1/20	12/31/21
POH	Partnership for Oral Health	Capitol Dental Care	Linn	1/1/21	12/31/21
RDUC	Reduce and Improve	Capitol Dental Care, Lebanon Community Hospital	Linn	1/1/19	12/31/21
SDoHWG	Social Determinants of Health Workgroup	InterCommunity Health Network CCO	Benton; Lincoln; Linn	11/16/17	present
SKIL	Skills and Connections to Support Housing	Corvallis Housing First	Benton	1/1/20	12/31/21
THWWG	Traditional Health Workers Workgroup	InterCommunity Health Network CCO	Benton; Lincoln; Linn	5/21/13	present
UCCWG	Universal Care Coordination Workgroup	InterCommunity Health Network CCO	Benton; Lincoln; Linn	6/26/17	On Hiatus
WINS	Wellness in Neighborhood Stores	OSU Center for Health Innovation, Linn County Public Health	Linn	1/1/20	12/31/21
WtoS	Wellness to Smiles	Advantage Dental from DentaQuest	Lincoln	1/1/20	12/31/21

Delivery System Transformation Committee (DST) 2021 Calendar

January	7	Strategic Planning: Overview and Charter		
	21	Strategic Planning: Charter, Workgroups, Engagement		
February	4	HSPO	PWST	Strategic Planning: UCC & Health Equity
	18	DOUL	RDUC	Strategic Planning: UCC Workgroup
March	4	Strategic Planning: Pilots/RFP		
	18	Pilot Updates	Strategic Planning: Request for Proposal (RFP)	
April	1	RFP Decisions		
	15	Finalizing RFP		
	29	Workgroup Updates	RFP Final Decisions	
May	13	Proposal Criteria/Scorecard Review		
	27	Board Update	LOI Discussion	Scoring Matrix

June	10	Intern Presentations	LOI Decisions		
	24		Pilot Updates		
July	8		Pilot Updates		
	22		Proposal Review and Discussion (RFP2)		
August	5		Proposal Decisions (RFP2)		
	12	Proposal Presentations (RFP1)			
	19	Proposal Presentations (RFP1)			
September	2	Proposal Presentations (RFP1)			
	16	Proposal Decisions (RFP1)			
	30	Workgroup Updates			

October 7: Regional Planning Council for Pilot Final Approval

KEY

Tentative closeout	Booked closeout
Tentative RFP	Booked RFP
Tentative strategic planning	Booked strategic planning
Tentative miscellaneous	Booked miscellaneous
Tentative training	Booked training
Tentative update	Booked update
Tentative workgroup	Booked workgroup

October	14	Trauma Informed Care Facilitated Discussion			
	28				
Nov	11	Safe and Inclusive Spaces Training			
Dec	9				

Minutes

Delivery System Transformation Committee (DST)

May 13, 2021 4:30-6:00 pm

Microsoft Teams (Online)

Present			
Chair: Beck Johnson	Charissa Young-White	Corinna Zib	Stacey Bartholomew
Linda Mann	Alicia Bublitz	Chris Folden	Stephanie Wiegman
Marci Howard	Connie Kay	Elizabeth Hazlewood	Allison Myers
Lyrica Stelle	Lance Liden	Crystal Rowell	Christian Moller-Anderson
Bettina Schempf	Paulina Kaiser	Allison Hobgood	Larry Eby
Richard Blum	Andrea Myhre	Dick Knowles	Rebekah Fowler
Linda Lang	Christine Mosbaugh	Priya Prakash	Sheree Cronan
Britny Chandler	Jenny Glass	Danny Magana	

Transformation Update: Charissa Young-White

Request for Proposal

- Released May 11, 2021.
- Letters of Intent due June 2, 2021.

SHARE (Supporting Health for All through REinvestment) Initiative

- Social determinant of health spending by coordinated care organizations.
- The Request for Proposal (RFP) was released at the same time as the DST RFP.
- The Letter of Intent (LOI) is the same for both funding streams.

Proposal Criteria

- See page 6 of packet.
- Support for sustainability split into three components: replicability, financial sustainability, and depth of community and organizational support.
 - The matrix for depth of support is not consistent with the others. Changing the language to represent the differences in the scoring. Bring back to the Committee next time.
- Discussion around adding risks/barriers to sustainability.
 - Consensus not achieved, no changes.
- Weight transformational higher discussion:
 - Concerns over other regions being left out when transformational is higher.
 - Consensus not achieved, no changes.
- Discussion around requiring local committee attendance and engagement.
 - Consensus not achieved, no changes. Will include in future strategic planning discussion.

2020 DST RFP Rankings and Funding Recommendations

Green is the funding line.

LOI Ranking*	Proposal Ranking	Funding Recommendations
Hepatitis C Virus Outreach Screening & Treatment	Community Doula Program	Community Doula Program
Disability Equity Center	Healthy Homes Together	Healthy Homes Together
The CommCard Program	Hepatitis C Virus Outreach Screening & Treatment	Hepatitis C Virus Outreach Screening & Treatment
Unity Shelter Service Coordination	Mental Health Home Clinic	Mental Health Home Clinic
Coastal Kids Mentoring Program	Unity Shelter Service Coordination	ENLACES
Community Based Peer Support	Linn County Crisis Outreach Response	CommCard Program
ENLACES	ENLACES	Linn County Crisis Outreach Response
Healthy Homes Together	Disability Equity Center	Culture of Supports
Mental Health Home Clinic	CommCard Program	Partnership for Oral Health
Community Doula Program	Partnership for Oral Health	Disability Equity Center
Culture of Supports	Coastal Kids Mentoring Program	Building a Trauma-Informed Community
Building a Trauma-Informed Community	Partners with Parents and Children	Coastal Kids Mentoring Program
Linn County Crisis Outreach Response	Culture of Supports	Community Based Peer Support
Partnerships for Oral Health	Community Based Peer Support	Hippotherapy Expansion Program
Youth Peer Support	Hippotherapy Expansion Program	Partners with Parents and Children
Hippotherapy Expansion Program	Building a Trauma-Informed Community	Unity Shelter Service Coordination
Partners with Parents and Children	Youth Peer Support	Youth Peer Support

Green indicates general agreement from LOI ranking to proposal ranking to funding recommendations, orange indicates disagreement.

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Partners with Parents and Children	Youth Peer Support	Youth Peer Support

*Ranking by the Transformation Department as requested by the DST based on the components of Health Equity, Return on Investment, and System Change.

IHN-CCO DST Pilot Proposal Scorecard

Pilot Name:

Amount Requested:

Applicant Organization:

Response Scale (write in box to the right)
See Proposal Scoring Matrix

Disagree/not included

Agree

Strongly Agree



Approach, Significance, and Impact		Score
Transformational: The pilot will be transformative and creates opportunities for innovation and new learning.		
Health Equity: The pilot has a defined approach for fair opportunities for members to be as healthy as possible.		
Health Improvement: The pilot holds promise for making a significant improvement in the health or health care of IHN-CCO members.		
Improved Access: The pilot activities will result in improved access of healthcare; availability of services, culturally considerate care, and quality and appropriate care to IHN-CCO members.		
Need: The proposer has established that there is a substantial need for this pilot and has indicated the demographics of the Medicaid population impacted.		
Outcomes: Proposal outcomes and measures are aligned to pilot goals and will be sufficient to evaluate pilot success. The pilot yields measurable outcomes that are new or different. The pilot outcomes are aligned with the Community Health Improvement Plan's Outcomes and Indicator Concepts.		
Total Cost of Care: The pilot will likely result in improvement in the total cost of care for IHN-CCO Members. The pilot targets areas of health care associated with rising costs or provides upstream healthcare that will reduce costs long-term.		
Resource Investment: The budget is reasonable and appropriate to the work proposed. It is well justified and directly tied to the pilot goals. The pilot has exhibited consideration for other funding sources.		
Priority Areas: The pilot has a new or innovative way to address at least one of the priority areas.		
Financial Sustainability: The pilot has a sustainability plan including continued funding and new reimbursement models. The project will likely continue after DST funding ends.		
Replicability: The pilot has a clearly defined plan to spread lessons learned to new organizations or regions such as rural or urban or a new county in the IHN-CCO community.		
Depth of Support: The proposer showed clear and strong depth of sponsoring organization support as well as community backing.		
TOTAL PROPOSAL SCORE (of a possible 120)		
Comments:		

IHN-CCO DST Scoring Rubric

	0	3	5	7	10
Transformational	No innovation aspects; strategy has been done in this region or type of organization	Little innovation; potentially to new region	Some innovation	New and innovative; new partnerships among agencies with new strategy for one or more partner	New and innovative strategy for all partners involved
Health Equity	No health equity plan	Focus on IHN-CCO members but plan unclear OR does not clearly focus on IHN-CCO members but has a health equity plan	Little context, approach not clear	Clear approach, focus population identified OR plan not clear, but focus population obviously high-risk	Hits high-risk population and outlines plan for health equity approach clearly and effectively
Health Improvement	Unlikely to result in improvement in the health or healthcare of IHN-CCO members	May result in improvement in the health or healthcare of IHN-CCO members	Likely to result in improvement in the health or healthcare of IHN-CCO members	Likely to result in significant improvement in the health or healthcare of IHN-CCO members	Will result in significant improvement in the health or health care of IHN-CCO members
Improved Access	No improved access for IHN-CCO members	Some improved availability of services, culturally considerate care, or quality and appropriate care	Likely to result in some improved access (availability of services, culturally considerate care, and quality and appropriate care)	Likely to result in improved access (availability of services, culturally considerate care, and quality, appropriate care)	Will result in significantly improved access (availability of services, culturally considerate care, and quality, appropriate care)
Need	No need established and demographics not indicated	Need is not clearly defined but demographics are indicated	Need defined, demographics outlined	Need established and demographics of IHN-CCO members clearly defined	Substantial need established and demographics of IHN-CCO clearly defined
Outcomes	Outcomes are not aligned with the Community Health Improvement Plan (CHIP)	Outcomes and measures are aligned to the CHIP but not pilot goals	Outcomes and measures are aligned to pilot goals and the CHIP	Outcomes and measures are aligned to pilot goals, the CHIP, and will be sufficient to evaluate pilot success	Outcomes and measures are aligned to pilot goals, the CHIP, will be sufficient to evaluate success, and yields outcomes that are new or different
Total Cost of Care	Unlikely to result in improvement of the total cost of care for IHN-CCO members	May result in improvement in the total cost of care for IHN-CCO members	Likely to result in improvement in the total cost of care for IHN-CCO members	Likely to result in significant improvement in the total cost of care for of IHN-CCO members	Will result in significant improvement in the total cost of care for IHN-CCO members
Resource Investment	Budget is unreasonable and inappropriate to the work proposed	Budget is not well justified and not tied to pilot goals	Reasonable and appropriate budget	Budget is reasonable, appropriate to the work, and well justified	Budget is reasonable, appropriate to the work, and well justified. Directly tied to the pilot goals; exhibits consideration for other funding sources
Priority Area	Does not address any priority area	Addresses priority area somewhat but not clearly defined	Addresses priority area	Clearly addresses priority area	Clearly addresses priority area: either in a new and innovative way or spreads promising practices in that area
Financial Sustainability	No financial sustainability plan	Plan not clearly defined	Has a defined plan, potential to sustain	Clearly defined financial sustainability plan; likely to continue after DST funding ends	Clearly defined sustainability plan including continued funding and new reimbursement models; likely to continue after DST funding ends
Replicability	No plan for replicability	Plan not clearly defined	Has a defined plan, potential to replicate to new organizations or regions	Clearly defined replicability plan; likely to spread after DST funding ends	Clearly defined replicability plan including plans for spreading promising practices to new organizations and regions; likely to spread after DST funding ends
Depth of Support	Does not have potential for community or sponsoring organization support	Has potential for either community or sponsoring organization support	Has potential for community and sponsoring organization support	Clearly defined community and sponsoring organization support; likely to continue after DST funding ends	Clearly defined capacity for sponsoring organization and community support to continue after DST funding ends; very likely to continue after DST funding ends