



Produced by Myers and Stauffer on behalf of the Washington Health Care Authority

ACH semi-annual reporting period summary: January 1 – June 30, 2021

As part of the Washington State Medicaid Transformation, Accountable Communities of Health (ACHs) **report** updates on transformation activities. Reported information includes project implementation and progress on milestones defined in the **Project Toolkit**. This document provides ACH highlights from the reporting period, including milestones achieved, incentives earned, and a look ahead to upcoming activities.

For more information, visit the Washington State Medicaid Transformation **webpage**.

COVID-19 Pandemic

Due to the impact of the Delta variant of the novel coronavirus (COVID-19), the health care system and the communities of Washington State saw continued burden through the first half of 2021. The duration of the pervasive challenges of the pandemic declared on March 11, 2020 by the World Health Organization (WHO), and extent of morbidity, resulted in continued anxiety and medical risks. Between the first reported case and the end of June 2021, there were 451,485 reported cases, with 25,837 hospitalizations and 6,021 deaths.¹ 50.1% of the Washington population was fully vaccinated². In the same timespan, the United States had over 33.7 million confirmed cases with over 604,600 deaths, and 46% of the population was fully vaccinated. There were over 182 million cases and over 3.9 million deaths reported across the world.³

Due to the Delta variant, hospital bed capacity once again decreased, and strategies to address housing and food insecurity continued to be employed. Modifications and flexibilities to the Medicaid Transformation waiver approved by the Centers for Medicare and Medicaid Services (CMS) also continued. These flexibilities allowed for the semi-annual report template to be modified to collect COVID-19 response information. The implementation plan update, quality improvement strategy update, and pay for reporting metrics became optional reporting requirements.

ACHs described how the Medicaid Transformation delivery system infrastructure continues to enable their region's COVID-19 response activities, and how they are addressing health inequities and behavioral health needs. Additionally, they discussed risks that may continue to leave them vulnerable to sustaining resilient systems of care and population health in their community.

¹ Washington State Department of Health. <https://www.doh.wa.gov/Emergencies/COVID19/DataDashboard#tables>. [Accessed on September 22, 2021.]

² Seattle Times. <https://www.seattletimes.com/seattle-news/health/coronavirus-daily-news-updates-june-30-what-to-know-today-about-covid-19-in-the-seattle-area-washington-state-and-the-world-2/>. [Accessed on September 22, 2021.]

³ Our World in Data. <https://ourworldindata.org/coronavirus/country/united-states#> [September 22, 2021.]

Highlights of the reporting period

- **ACHs and partnering providers have their MTP activities generally back on track.** ACHs have moved activities from mitigation of COVID-19 to supporting recovery efforts including vaccination access and financial assistance for items such as rent, utilities, groceries, and household products. Some ACHs continued to report that partnering providers are prioritizing interventions that address behavioral health needs, social determinants of health, and healthcare inequalities for black, indigenous, and persons of color (BIPOC) that have been magnified by the pandemic. Most reporting requirements and schedules have generally returned to pre-COVID conditions.
- **ACHs are taking action on vaccine equity and outreach to underserved populations.** ACHs are partnering with local jurisdictions and community organizations to provide a more accessible and equitable COVID-19 process. HealthierHere reallocated funds to support King County's vaccination campaign which included pop-up vaccination sites, staffing support, and culturally and linguistically relevant materials. OCH participated in the Kitsap Public Health District collaborative that rolled out pop-up vaccine clinics at community hubs that didn't require appointments and provided bi-lingual support. SWACH partnered with Southwest Washington Equity Coalition (SWEC) to apply for a grant to hire and train community health workers, integrated with HealthConnect, to expand vaccine information and access.
- **The behavioral health needs of children and youth have continued to increase due to the COVID-19 pandemic.** ACHs are creating strategies to increase communication and access to behavioral health services for children and youth. BHT developed a School-Based Telehealth Access pilot that will address equity gaps in community access and reduce barriers to care. North Central ACH worked with community partners on the Hope Squad model which supports suicide prevention and peer support in local school districts. GCACH distributed health resiliency toolkits tailored for youth ages 5-12 and teens 13-18 to 58 school districts, and facilitated 67 trainings for schools, public health agencies, community-based organizations, and parent groups.
- **ACHs remain committed to sustaining improvements achieved during Medicaid transformation.** Many ACHs are using data, input from participating providers, identified best practices, and opportunities for expansion to determine priorities for sustaining and expanding transformation projects. Elevate Health is utilizing their subsidiary, OnePierce Community Resilience Fund, in a multiyear strategic business plan to support equitable health improvement. As part of their sustainability planning process, BHT discussed service gaps in the region and identified Equity, Anti-Racism, and Belonging, social determinants of health, and increased community-based care coordination capacity as high priorities.
- **ACHs shared lessons learned or "success stories" that emerged in response to the COVID-19 pandemic.** CPAA shared a patient success story highlighting the

importance of care coordination and community partners. A client fleeing domestic violence had been making progress on sustainability goals when she became temporarily disabled due to COVID-19. A community health worker (CHW) delivered food boxes and supplies during quarantine, and connected the client to employment resources and funding registration to assist with her job search after quarantine. “The client and her family are now in stable housing with an ongoing housing voucher and the client has definitive planning in place to obtain her CNA licensing to be able to return to her chosen field of work.”⁴ As a result of COVID-19 response actions, North Sound ACH observed strengthened relationships of community-based organizations that service the farmworker, immigrant, and refugee communities. The ACH noted their “brightest spot” has been co-developing strategies with community leaders to support CHWs.

What to expect in the next reporting period

- The majority of standard reporting requirements will be expected, but due to the continuance of the COVID-19 pandemic, HCA has extended requests for information on COVID-19 response.
- ACHs will continue to address the effects of the pandemic alongside activities to scale and sustain Medicaid Transformation achievements. It is anticipated that ACHs will continue to build community connections that serve to address the rising needs for behavioral health (both mental health and substance use disorder) services.

ACH milestone achievement and earned incentives

Table 1

Achievement Values (AVs) associated with project incentives, by ACH

Project incentives (reporting period January 1 – June 30, 2021)	BHT	CPAA	EH	GCACH	HH	NC	NS	OCH	SWACH
Earned AVs by project milestone/deliverable									
Completion of Semi-annual Report	4	6	4	4	4	6	8	6	4
Completion/maintenance of partnering provider roster	4	6	4	4	4	6	8	6	4
Engagement/Support of Independent External Evaluator (IEE) Activities	4	6	4	4	4	6	8	6	4
Report on quality improvement plan (Replaced by COVID-19 Response)	4	6	4	4	4	6	8	6	4
Completion of all P4R metrics (Project 2A, 3A only) (Replaced by COVID-19 Response)	2	2	2	2	2	2	2	2	2
Total earned AVs	18	26	18	18	18	26	34	26	18

⁴ CPAA ACH SAR7 Report

Table 2

Earned incentives, by ACH

ACH	Earned AVs	Project Incentives
Better Health Together	18	\$757,226
Cascade Pacific Action Alliance	26	\$688,388
Elevate Health	18	\$826,065
Greater Columbia ACH	18	\$963,743
HealthierHere	18	\$1,514,452
North Central ACH	26	\$344,194
North Sound ACH	34	\$1,032,581
Olympic Community of Health	26	\$275,355
SWACH	18	\$481,871
Total		\$6,883,875