

Meeting Title: Title XIX Advisory Committee		
Minutes	Meeting Date: 7/28/17	Meeting Time: 8:30 am – 12:00 pm
Meeting Location:	Emerald Queen Conference Center 5580 Pacific Hwy E Fife, WA 98424	
Meeting Called By:	Claudia St. Clair, Chair	
Minutes:	Catherine Georg	

<http://hca.wa.gov/about-hca/apple-health-medicaid/medicaid-title-xix-advisory-committee>

Attendees:

Members:					
<input checked="" type="checkbox"/>	Gil, Sylvia	<input checked="" type="checkbox"/>	Riskedahl, Dean	<input type="checkbox"/>	
<input type="checkbox"/>	Hendrickson, Wes	<input checked="" type="checkbox"/>	St. Clair, Claudia	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Lester, Litonya (for Go Hollo, Tatsuko)	<input checked="" type="checkbox"/>	Tufte, Janice	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Milliren, Heather	<input checked="" type="checkbox"/>	Wilson, Aaron	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Nardella, Maria	<input checked="" type="checkbox"/>	Yorioka, Gerald 'Gerry'	<input type="checkbox"/>	
HCA Staff:					
<input type="checkbox"/>	Blondin, Amy	<input type="checkbox"/>	Glenn, Kirsta	<input type="checkbox"/>	Linke, Taylor
<input type="checkbox"/>	Brumbach, Jon	<input type="checkbox"/>	Johnson, Nathan	<input type="checkbox"/>	McDermott, Lou
<input checked="" type="checkbox"/>	Cody, Preston	<input type="checkbox"/>	Kramer, Karin	<input type="checkbox"/>	Moore, Cheryl
<input type="checkbox"/>	Ericson, Agnes	<input type="checkbox"/>	Lantz, Barbara	<input checked="" type="checkbox"/>	Provence, Marc
<input type="checkbox"/>	Fotinos, Charissa Dr.	<input type="checkbox"/>	Lessler, Dan Dr.	<input type="checkbox"/>	Robbins, Alison
<input checked="" type="checkbox"/>	Georg, Catherine	<input checked="" type="checkbox"/>	Lindeblad, MaryAnne	<input type="checkbox"/>	Wood, Mary
Guests:					
<input type="checkbox"/>	Barton, Megan	<input type="checkbox"/>	Lovell, Emily	<input type="checkbox"/>	Robb, D
<input type="checkbox"/>	Booth, Dan	<input type="checkbox"/>	Marsalli, Bob	<input checked="" type="checkbox"/>	Robbins, Kim
<input checked="" type="checkbox"/>	Busz, Andrew	<input checked="" type="checkbox"/>	McAleenan, Mellani	<input checked="" type="checkbox"/>	Sawyckyj, Kristina
<input checked="" type="checkbox"/>	Cavens, Phyllis Dr.	<input type="checkbox"/>	Nguyen, Huy Huyn	<input checked="" type="checkbox"/>	Suchoski, Amina
<input type="checkbox"/>	Ewart, Hugh	<input checked="" type="checkbox"/>	Perna, Bob	<input type="checkbox"/>	Trompeter, Thomas
<input type="checkbox"/>	Gross, Daniel	<input type="checkbox"/>	Ramos, Joana	<input type="checkbox"/>	
Prospective Members					
<input checked="" type="checkbox"/>	Christian, Ann	<input checked="" type="checkbox"/>	Killpack, Bracken	<input type="checkbox"/>	Saravia, Becky
<input type="checkbox"/>	Holen, Ed	<input checked="" type="checkbox"/>	Moss, Bill	<input type="checkbox"/>	Seidel, Noah

Note:

Please Review & Bring	
Please Review & Bring:	<input checked="" type="checkbox"/> Current agenda and minutes from May 19, 2017 meeting <input checked="" type="checkbox"/> Please email any changes on the minutes to: catherine.georg@hca.wa.gov

Agenda:

Allotted Time	Agenda Items	Lead	Decision Making Approach
8:30-8:40 10 min	1. Meet & Greet	All	
8:40-9:00 20 min	2. Call to Order 3. Introductions 4. Approval of Agenda - Action Items (Members Only) 5. Approval of Minutes - Action Items (Members Only) 6. Review Action Items 7. Correction to November Meeting Date Meeting is November 3 rd - Opposed to 24 th	Claudia St.Clair	Informational
9:00-9:10 10 min	8. Medicaid Demonstration Waiver	Marc Provence	Informational
9:10-9:20 10 min	9. Legislative Update What are we are being asked to implement	MaryAnne Lindeblad	Informational
9:20-9:35 15 min	10. Washington Apple Health Quality Strategy	Barb Lantz	Informational
9:35-9:50 15 min	11. Fee For service – Dual Services [Request clarification & carry over]	MaryAnne Lindeblad	Informational
9:50-10:00 10 min	12. Jail Transition	Mary Wood	Informational
10:00-10:15 15 min	13. Break	All	
10:15-10:25 10 min	14. Network Adequacy	Preston Cody	Informational
10:25-10:40 15 min	15. Behavioral Health Integration Organizational Perspective	MaryAnne Lindeblad	Informational
10:40-10:55 15 min	16. Children’s Mental Health	MaryAnne Lindeblad	Informational
10:55-11:05 10 min	17. Managed Care Contract Update	Preston Cody	Informational
11:05-11:35 30 min	18. Affordable Care Act a) Local Levels, Expansion & What it Meant b) National Update – Repeal & Replace	MaryAnne Lindeblad	Informational
11:35-11:45 10 min	19. Set Agenda Items for 11/3/17	All	Decision
11:50-12:00 15 min	20. Q&A Prospective Members	All	Discussion
12:00	21. Adjourn		

4. Approval of Agenda – Action Items Lead: Claudia St. Clair
<ul style="list-style-type: none"> • None opposed • Approved

5. Approval of Minutes – Action Items | Lead: Claudia St. Clair

- None opposed
- Approved

6. Review Action Items | Lead: Claudia St. Clair

- No revisions/changes

7. November Meeting (Date Change) | Lead: Claudia St. Clair

- Next in person meeting is November 3, 2017

8. Medicaid Demonstration Waiver | Marc Provence

<https://www.hca.wa.gov/about-hca/healthier-washington/initiative-1-transformation-through-achs>

All nine Accountable Communities of Health (ACH) have achieved a critical milestone in the Medicaid Transformation Project Demonstration.

Phase 1 Certification

- Two ACHs require follow-up documentation before Phase 1 funding will be released. Success was based on ACHs providing evidence of progress in several critical areas, including:
 - Theory of action and alignment strategy
 - Governance and organizational structure
 - Tribal engagement and collaboration
 - Community and stakeholder engagement
 - Budget and funds flow
 - Clinical capacity and engagement
- Working on Phase 2, which is due August 14, 2017; in Phase 2 ACHs begin to describe how they develop and engage projects.
- Tool kit provides nine project areas; each ACH must select 4 to 8 projects; goal is to have approved portfolios at beginning of 2018, which is really the second year.
- Final project template and workbook was posted on website July 27, 2017.
- Engaged Manatt to provide support to ACHs on engagement and development.
- Contracted with two other contractors, role as financial executor, managing flow of funds.
- Apparent successful bidder for Independent Assessor is Myers and Stauffer; certified public accounting firm which has worked with other states on other waivers; it reviews and scores project plan applications; periodically scores ACHs against their plans, evaluating metrics and milestones.
- One more contractor being brought on as Evaluator; role will be more of an overall evaluator on whether the demonstration is meeting its goals.
- Gearing for early August implementation; nearing its launch.

Initiative 3 – Supportive Housing and Supported Employment

- Foundational Community Supports program, creates two new targeted benefits that include services that help our most vulnerable beneficiaries get and keep stable housing and employment, in support of broader health needs.
- Hope to hear soon on approval of protocols
- Amerigroup is the third party administrator; internal work with DSHS partners to ensure mechanism is in place; a bit behind on protocol; distinct from role as Managed Care Organization (MCO); acts as firewall between MCO and Third Party Administrator (TPA).
- Providers will provide supporting housing and employment measures; make sure relationships with providers are established and payments coordinated; there are distinct roles under which operate; helping provider networks get established, etc.

<https://www.hca.wa.gov/about-hca/healthier-washington/initiative-3-supportive-housing-and-supported-employment>

- The MVP Action Team is made up of state, regional, and local stakeholders and tribal government partners representing MCOs, hospitals, clinics, Indian health care providers, community-based organizations, public health providers, and others.
- The group serves as a learning collaborative for MCOs, providers and ACHs as they implement value-based strategies
- Project plans due to the Independent Assessor November 16, 2017; must be chosen from the eight thematic areas/ categories; after November 16 cannot change or make selections; process makes it possible for particular projects to encounter challenges.
- Projects are established and portfolios reviewed; one area where projects could evolve, is where billed and; Fotinos et al have committed to offer and get out and around ; fundamentally the focus is on ACH and provider engagement, ensure there isn't a vacuum; some of the regions are vast; incumbent on them that they fulfill building relationships
- Phase 2 Certification, is underway; Phase 1 and Phase 2 documents can be found on the [Medicaid transformation resources page](#).
- If there is a level of education that needs addressed, please let us know

Newly updated Demonstration resources:

- [Initiative 1 Frequently Asked Questions](#)
- [Initiative 2 Frequently Asked Questions](#)

9. Legislative Update | MaryAnne Lindeblad

- Budget overview- copy of stakeholder letter; budget and policy implications and highlights
- Medicaid transformation on there, because we must to have authorization to spend
- Budget assumes savings over the biennium; assumes this will be in play a year from now; don't think that will happen; asked Jan 2019 start date (18 month extension); assuming choice and statewide applicable; small pilot pregnant women, oral health
- Opioid crisis ; UW help complex pain Mgmt ;
- K2 – SEB vs PEB
- Health Homes program
- Single standard drug list for Apple health; managed across all plans
- Managed care rates – assumption is that they will remain flat; CMS has to sign off on rates; if more money needs to be invested; goal is to achieve flat rate
- BH 1338 – hold until agenda item
- Depression screening children 2-18; Depression screening – New moms – can occur in the pediatrician office
- Continuing very high level
- There is a 30 FTE cut on HCA side, plus 6% cut in management positions; this will be challenging given the number of initiatives ahead of us
- Bill Moss – still hoping for a capital budget; have over a dozen institutions across the state that need attention; lawsuit; overall DSHS budget, in large \$56M to children's administration went into foster programs and transition of children's administration to Department of Early Learning; \$263M BHI forensic restoration of the hospital; large part of that is staffing at Western State; establishing community resources and transformation; play into Behavioral Health Integration; ADSA lion share is rate increases (has been decades since increases); about \$26m invested to create additional resources to transition; \$294m developmental disabilities –
- Prescription Drug List; required to provide it in the generic form; think there is a process through committee in picking Medicaid fee for service drug list; need to structure for public comment
- Prescription Drugs; physicians and hospitals prescribing different RX; the appeals process is cumbersome and not very consumer friendly
- Preferred drug list will be managed by the five plans; we will need to look at appeals process at plan level
- How does budget deal with HEP C? When something like that comes about, there is opportunity to ask for funds in the supplemental budget; we had to ask for it in the supplemental process; it is not guaranteed
- Question on dental managed care; pleased to see language in the proviso; what would the process be to include in the RFP (FQHC, etc.)
- Will need to engage dentists at the community level, how do we bring others into the practice; as process goes forward mention of RHCs; any increase in dental is critical
- Have not heard step was taken (Ann Christian – question – ask Claudia) (FIMC regions) work between plans to standardized the processes; work around OIC
- Heard there will be some collaborative care codes (Bob Perna)?
- There were four that were approved and funded through the legislature; working on the steps to implement; functions and care management required to implement
- Worked closely to help put this together; Medicare just implemented, so following those steps, using their experience to implement; Effective July 1; once built, we could retro back to July 1; will take probably 3 months or more

10. Washington Apple Health Quality Strategy | Barbara Lantz

- Taking about the Managed Quality care Strategy and required document to meet federal regulatory requirements
- Have had a strategy in place for years, but needs updated; combined with DSHS BHA, representing Chris Imhoff, Gail Kreiger, Karen Wilson
- Have been working on the document and now in the process of final touches; generally written internally by staff, and must be reviewed by Title XIX and Tribes
- Anticipate final touches on draft for review around September 4; there will be a two week turn around for review and comment; finalize the last week of September; submit to CMMS by Oct 1, based on legislative requirement (this session)
- Includes goals, objectives around quality improvement; performance measures and improvement
- Performance improvement projects must have a mechanism in place to monitor and ensure meeting regulatory requirements
- Really a heads up that the document is coming; more like 50-75 pages in length; think it will be ready for release by Sep 4
- Gerry Yorioka: Is there a process or systems for providing improvement strategy?
- Great deal of work around Accountable Communities of Health (ACHs); activities implemented by Department of Health (DOH), the HUB; DOH and contractor's go out in community and community based systems
- Molina (Transforming Clinical Practice Initiative) – it will be in the beginning part of the strategy
- Q: Will there be outcome measures (Janice Tufte)?
- Some measures, process measures, lead to outcome measures
- Value Based system measures will be coming up more in the future
- Is there an opportunity to stakeholder sessions (Sylvia Gil)?
- Could attend meeting to discuss; looking for opportunity to discuss with stakeholders; may be opportunities with managed care groups, etc. ; Preston and Barb will get something together [Action]

11. Fee For Service – Dual Eligible Beneficiaries | MaryAnne Lindeblad

- We are looking at providing better services to duals; just received \$10M from CMS; continuing that work
- Are there ways we can use existing programs (i.e. special needs)?
- Cannot voluntarily enroll, looking at strategies that other states have used
- Recognize we need better ways to connect; majority are under 65
- Population isn't well served (Amina Suchoski) a lot of MCOs would be eager to participate in those voluntary strategies
- Dean Riskedahl: Thought were going to aggressively moving to dual eligible? Cannot do that
- Concern in that nursing home clients having coverage, but no access to services

12. Jail Transitions | Mary Wood

- Substitute Senate Bill 6430 (2016) - Medicaid Suspension and Care Coordination
- Suspension has come up several times over the years
- As of July 7, Department of Corrections (DOC) and (county) jail individuals, can be suspended and then taken off upon release
- HCA has had an interface with DOC; was able to change benefit to cover in-patient hospital services; while incarcerated

- Worked with WASPC are now able to get them a nightly data feed that sends to MMIS; when enter jail and release, flipping coverage as appropriate to in-patient hospital
- Home monitoring individuals managed differently (could still be reflected as incarcerated); could include Juvenile Rehabilitation Administration, Special Commitment Center, Eastern State, and Tribal facilities
- Over the next four (4) months will be working with entities to determine or establish mechanism to aid folks in coordinated care; help ACHs with care being coordinated; having Medicaid suspended, rather than closed, will be very helpful
- There are some very good county practices (Snohomish, King, Ferry); group of stakeholders gathered and will collate standard best practices; hoping to give trainings; work with CMS on where can draw down federal match or care coordination while in facilities
- CMS previously did not recognize Work Release facilities; where freedom of movement capable, can now receive Medicaid (WR didn't offer medical coverage); all but a few meet the freedom of movement criteria
- Will further care coordination
- Ann Christian: Transition is such a vulnerable point for patients; great job, it's becoming real
- MAGI – any Medicaid recipient will qualify
- Gerry Yorioka: What about continuation of coverage (particularly prescriptions)?
- Mary Wood: Health records will be shared, will not pay for prescriptions while in that facility; only thing would cover would be if in-patient coverage is required
- Phyllis Cavens: Please think about best practices (i.e. notifications)
- Bob Perna: Trying to get sense of numbers
- Janice Tuft: Jails are one of the places most people go through withdrawal; wants to know if they receive methadone?
- MaryAnne Lindeblad: Don't know what that looks like, Dr. Fotinos could probably answer that question; (Action) CF – Future agenda item; Opioid crisis in conjunction with DSHS partners, etc.
- Don't have opportunity to use Medicaid dollars to support jail efforts
- Some of the activity and transition work is happening is happening (Ferry county)

14. Network Adequacy | Preston Cody

- Looking at gaps between us, process, etc.; see if we can achieve realized access
- Talked to states, compiled an online report; initiating projects as a result of the report (Truevin)
- Can determine what services are being done, what, etc.
- Linking systems together; will take a year or more to link
- Engaged with analytics staff to determine what tools are out there
- Software vendors meet with us, but challenged to meet our data needs for a public report
- Opportunity for development, we will continue to look for that
- Goes into effect July 2018, very specific on analysis; majority of providers in our network accepting new clients, etc.; want to make available so people can see who is accepting new patients.
- How do we address that across the state; need sophisticated drill downs
- Lacking obstetricians in six (6) counties; how do we drill down to that; are there providers on other communities that allow better utilization
- Work with other states to put together draft tool kit, to compile best practices; not published yet, but will be a resource for states at national level; cannot share draft yet; once released by CMS we will share it
- How do we ensure adequacy; help us please as we discover over the next 18 months
- Will probably be 2020 before full implementation
- Would like to use this group as an advisory group as think tank to help evaluate access complaints, issues, etc.

- MaryAnne Lindeblad: Important with NAMD – CMS is looking at managed care regulations; looking at plans, timing, and whether there are regulations that need changed; network adequacy (NA) is part of that scrutiny
- Bob Perna – Are looking at NA in MH area? One of the issues ACHs are being asked to develop care delivery networks; without the provider workforce, it's difficult; what is the vision for ACHs to access NA in data?
- Preston Cody: Tools from a Managed Care and Fee For Service perspective, if we get the submission of those, we could look at that (will bring it up in procurement)
- MAL The whole work force component is clearly recognized; there are significant issues with that; it doesn't matter if you are self-insured or Medicaid covered; have to use alternatives (i.e. telemedicine, etc.) need more PCP in the state
- Phyllis Cavens: Children's Mental Health – acknowledge and support that work and ask if could, to use that strategy in children's health; when state honed out state autism services, dental code, getting much better; there is a pathway and hope proceed down that path
- Kim Robbins: Not sure how far you have gotten into the software (MMIS); is that a mechanism that can be leveraged; seems that software solution to identify (taxonomy) and NA
- When talking about clients that don't access primary care, can look at encounters by client now; possibly can share that data; we have not looked at it on regional perspective; will take back to team; would be a good way also to view dual eligibles

15. Behavioral Health Integration - Organizational Perspective | MaryAnne Lindeblad

- Working on the transfer of Behavioral Health to HCA; work is still taking place to see what we can do together without legislation, so we can address in next session; state hospital work would stay with DSHS
- have been doing full integration in Southwest Region; should have data and analysis available in the coming weeks; if it's something you want to address in future agenda we can
- Letters to county officials in other areas of state for mid-adopter have gone out; letters of intent due back in September for Jan 2019 implementation; full integration required by 2020
- Excited to see data out of Southwest, utilization, and process comparison; is there a difference between measures in how they compare to other areas of the state?
- It's too soon to look at outcome measures

16. Children's Mental Health Work Group | MaryAnne Lindeblad

- Have added depression screening for youth and moms
- Certain recommendations did not get funded, but looking at ways to still do the work; possible rate increase; challenging time to solve issue
- Workgroup spoke about workforce and expanding child psychiatry
- Working with OSPI on mental health and network adequacy (see handout)
- There will be more reports on networks
- Gathering information on provider billing codes; making sure they understand who can bill what; went to groups, including CHMHWG; there will be a report in August
- CHMHWG Recommendations; streamlining documentation process; bringing DBHR into HCA; streamlining licensing and certification
- Ann Christian: Intake paperwork could be streamlined; it would make a big difference

- CHMHWG is authorized to meet through the end of the year; will help address and create framework for what agencies can do that don't have a monetary budget
- Janice Tuft: Took part in a recent federal call on children's anxiety
- Ann Christian: There is an access to care standard, don't have a tendency to work with lower levels of mental health because they don't access specific care settings; trying to get away from that (so it's not treated differently)
- Gerry Yorioka: Has there been a risk identified for at risk children of incarcerated parents?
- MaryAnne Lindeblad: It's a good point
- Ann Christian: Don't have a way of being informed that there is a youth in your community is at risk for this reason (they usually come to us)
- Screening of children of veterans/service members; would somewhat fall into same/similar category
- Workgroup is set up through the legislature

17. Managed Care Contract Update | Preston Cody

- Lot of references being changed; implementation of institution of mental disease; had to resolve federal rule
- Established a process for payment; adjust county to balance federal
- If clarification on Value Base Purchasing requirements needed, contract is always posted online
- Managed Care base; working on (3) concurrently; 35 steps involved to modify each contract; have to draft and stakeholder through meetings like this; this is how changes are brought forward or brought up as potential changes, which are lengthy and involved
- If interested we can provide link to read 312 pages (Action)
- Sylvia Gil: Is there a list of contracts (fee for service) outside the Managed Care contract?
- We can address at a future meeting (bring into MC, or introduce for FFS)
- Preston Cody: We can talk about services and populations

18. Affordable Care Act | MaryAnne Lindeblad

- Mentioned hand outs and the NAMD consensus document; something that if you ever wanted to pull out or discuss, it is a tool for talking points if ever need it
- We will be watching what happens; federal lawsuit underway about whether federal government has ability to pay subsidies
- HBE is collaborating with OIC to make sure that one of the things that needs to happen for viable networks; two counties didn't have networks; OIC worked to get those counties covered and address strategies to get work done
- Gerry Yorioka: Provider burden; can get someone from the association to come to the group and discuss?
- Preston Cody: Competition whether legislative, regulatory or mandated; regional based; private practitioner, virtual quality of care would improve if funding cost of care
- Bracken Killpack: Echo that; work with FQHC to come up with a rate
- Can we get Bob Marsalli to come to a meeting and discuss thoughts – as Director of Washington Association of Community and Migrant Health Centers) (Agenda Item)

19. Set Agenda Items for 11/3/17

Agenda for 11/3/17

- Do the 2018 dates before the Sep meeting instead of Nov (Action)
- Mental Health Overview (Nov)
- Clinical Data (Nov)
- FQHC (Nov)
- FMIC data (Sep)
- CDR (Sep)
- Apple Health App (Sep)
- Carve outs on Managed Care Contracts (Nov)
- ACH Examples (Nov)

20. Q&A Prospective Members (Continued Interest)

- Bill Moss: Likely delegate to someone else
- Ann Christian: We want to be more engaged in the broader MH/BH discussion, see potential benefit to having a provider; would like to take back to group to determine what type
- Bracken Killpack: With cadence, may be able to get a dentist (WSDA) (No to September, Yes to November)

21. Add On Items

Bob Perna – Clinical Data Repository

- Have participated in monthly calls with HCA since before Christmas
- Challenges in the provider community is with the HIT; matching data; comingling of data (patient/client records); costs incurred to achieve inter-operability; issues seem to linger and remain unresolved
- Provider summit with HCA and OneHealthPort raise issues;
- Good news, receptive to that; de-facto planning committee
- Sense of urgency to keep momentum; propose half day session at SeaTac area conference center; emphasize as a problem solving solution once accomplish that
- Preliminary user group; circle back and have user forum and discussions; eliminate silos; looking for cross representation of medium and large providers, etc. (working with Adam Aaseby to set up)

MaryAnne Lindeblad - Closing Remarks

- Appreciate your engagement, it is valuable to us
- Does this forum work? Better than hotel, with healthier food options
- We have an interesting set of challenges ahead; appreciate time and willingness to work with us

Janice Tufte - Kaiser Board

- Social Benefit Foundation (survey); looking for community input; while a year out, starting organization; contact is Cory Sabarros; will find out where they're at, where going; diverse group looking for geriatrics and long term services

Kim Robbins - Question dental in managed care

- Will ABC dental be pulled into it?
- Direction we are going, there will be a variety
- ABCD will be maintained and expect to see networks maintained
- Great infrastructure for kids and don't want to lose that

Gerry Yorioka - Opioid Crisis

- Snapshot on issue; maybe some change in mortality rates; where we were, how we got here
- Good to get Dr. Fotinos here; SAMSA in Baltimore is bringing together Medicaid directors nationally; bringing data, which may help facilitate that discussion; if you can think of anyone that could augment that, let us know and we can try to make that work with other's schedules

Ann Christian: RDA report

- What have we shown in mortality? (Action)

Future Agenda Items / Conference Call [9/22/17]

Item	
1.	Clinical Data Repository [Dylan Oxford]
2.	Apple Health Mobile Application [Karin Kramer]
3.	Fully Integrated Managed Care Update [MaryAnne Lindeblad]
4.	Eligibility [MaryAnne Lindeblad]

Future Agenda Items / In-Person [11/3/17]

Item	
1.	Mental Health Parity Overview
2.	Clinical Data Repository
3.	Federally Qualified Health Centers (FQHC) – RHC Discussion
4.	Dental & RFP
5.	Carve Outs to Managed Care Contracts
6.	Accountable Communities of Health (ACH) Examples
7.	Opioid Crisis [Dr. Fotinos] [11/3/17 or later]

Action Items/Decisions	
Item	
1.	Set 2018 dates before 11/3/17 meeting [Cat Georg]
2.	Opioid Crisis; Possible future agenda item; Jails one of the places most people go through withdrawal; Don't receive Methadone; Don't know what that looks like, Dr. Fotinos could probably answer that question (Action) CF – Future agenda item; Opioid crisis in conjunction with DSHS partners, etc. [Dr. Charissa Fotinos]
3.	RDA Report: What have we shown in mortality [Opioid Crisis] https://www.hca.wa.gov/about-hca/clinical-collaboration-and-initiatives/opioid-crisis
4.	Managed Care Plans; If interested we could provide link to read https://www.hca.wa.gov/free-or-low-cost-health-care/apple-health-medicaid-coverage/apple-health-managed-care#apple-health-managed-care-plans-available
5.	As Director of Washington Association of Community and Migrant Health Centers (WACMHC), see if Bob Marsalli would come to a future meeting to discuss thoughts on FQHC's http://www.wacmhc.org/about-us/staff/item/19-bob-marsalli
6.	Public input in PDL list [MaryAnne Lindeblad]