

Attendance

In-person: Jack Billi, Dave Brooks, Liz Conlin, Trish Cortes, Gregory Dalack, Ann Davis, Bob Guenzel, Norman Herbert, Peter Jacobson, Ruth Kraut, Bob Laverty, Bonita Neighbors, Ellen Rabinowitz, Mary Beth Skupien, Doug Strong, Rosalie Tocco-Bradley, Marcia Valenstein, Paul Valenstein, Brent Williams

Phone: Nancy Graebner, Connie Conklin

CHRT staff: Nancy Baum, Kirsten Bondalapati, Elizabeth Jahn, Jeremy Lapedis, Ezinne Ndukwe, Melissa Riba, Marianne Udow-Phillips

Key Summary Points

- **Healthcare Directions After the Election:** There is a lot of uncertainty with what will happen at the federal level in healthcare after the elections. What is known, is that states will likely be given much more of role in healthcare. WHI has an opportunity to provide input to the state on healthcare directions as well as to prepare for how changes to healthcare policy and programs at the federal and state level affect our community.
- **Acute Dental Evaluations:** The Acute Dental program was able to provide free dental care to patients referred from the emergency departments (ED), whose primary reason for visiting the ED was a dental problem. The project was able to treat 60% of patients who were contacted after a referral, and 43% of patients who had at least one visit to the community dental clinic completed their treatment plan. The project members were surprised at the high no-show rate at appointments scheduled from ED referrals, indicating that cost was not the only barrier to accessing dental care. Still, the project was able to provide needed dental care to many patients, at a reasonable cost. The project has currently ended; however, the steering committee expressed interest in continuing the program. The project members will return with estimates of how much it would cost to maintain the program. They will also attempt to evaluate if the provided dental services had any effect on reducing ED visits.
- **Medical Dental Pathways Proposal:** The Medical Dental Pathways project is designed to create referrals between primary care providers and dental providers to ensure patients of medical clinics have a dental home, and patients of dental clinics have a medical home. After identifying a program manager and a program evaluator, the project is expected to begin in early 2017.
- **Primary Care and Mental Health and Substance Use Work Groups:** The Primary Care and Mental Health Substance Use Work Groups will meet together every other month. The common goal of the work groups is to identify and address mental health and substance use needs in the community. Projects include: identifying key priorities based on the Mental Health and Substance Use Needs Assessment; improving mental health data collection in the county; and updating a document identifying available behavioral health resources. The Primary Care Workgroup will continue to work on other goals, such as improving communication and coordination among safety net providers in the county.

December 9, 2016

- **State Innovation Model (SIM):** The SIM Work Group and subcommittees are developing a conceptual framework for care coordination the Washtenaw and Livingston counties. The SIM Work Group and subcommittees will complete a social service capacity assessment in the spring, and begin to seek funding sources to fill gaps and plan for sustainability.
- **WHI Budget:** The Steering Committee approved the WHI budget as presented and including a funding commitment of \$60,000 from St. Joseph Mercy Hospital.

Action Steps

- The Acute Dental Project will return to the January 2017 Steering Committee meeting with a proposed budget of how much it would cost to sustain the project.

Next Meeting

Friday, January 13, 2017 2:30 – 4:00 PM