

Steering Committee February 2017 Meeting Summary

Attendance

In-person: Connie Conklin, Gregory Dalack, Bob Guenzel, Norman Herbert, Ruth Kraut, Bob Laverty, Carole McCabe, Aubrey Patiño, Ellen Rabinowitz, David Sarns, Himanshu Singh, Doug Strong, Rosalie Tocco-Bradley, Paul Valenstein, Marti Walsh, Brent Williams

Phone: Dave Brooks, Nancy Graebner, Diane McCormick, Pam Smith

CHRT staff: Kirsten Bondalapati, Elizabeth Jahn, Jeremy Lapedis, Carrie Rheingans

Key Summary Points

- **Frequent Users Systems Engagement (FUSE) Update:** FUSE is a program run out of Avalon Housing, which places frequent users of emergency services in housing and provides them with case management and mental health services. The FUSE program has provided services to 152 households, while improving mental health, social support, quality of life, and reducing emergency department visits. For the highest cost patients, FUSE has shown statistically significant cost savings. The steering committee discussion recognized that even in cases where healthcare costs are not reduced significantly, the program still provides Washtenaw County residents with much needed access to housing and support services. Two key learnings from the FUSE project have been that:
 - Working with marginalized individuals, many of whom are substance users, requires a non-judgmental, harm reduction approach that makes them feel safe and supported. Only after that trust has been established can you work with them on building intrinsic motivation to accessing healthcare. This effort is slow, and takes time.
 - There are significant gaps in substance use treatment in Washtenaw County
- **SIM Update:**
 - **Site Visit:** The SIM state team came for a site visit on February 7th. The state was pleased with the progress and design of the Washtenaw/Livingston Community Health Innovation Region (CHIR). The site visit included discussion on the following topics:
 - **CHIR Governance:** They complimented the WHI's governance structure and suggested adding someone from the faith community and someone with "lived experience," like a community health worker.
 - **Community Health Needs Assessments (CHNA) and Community Health Implementation Plans (CHIP):** The state was very impressed with the work of the UNITE joint hospital CHNA and CHIPs. It was noted that what they expect for the SIM is more of a report focusing on the needs of emergency department users rather than a completely new CHNA process.
 - **The SIM Patient Centered Medical Home (PCMH) Initiative:** We discussed with the state the process for screening and identifying individuals with social needs at PCMHs. The next step in the process is to meet with social service organizations to develop a process for referring patients who screen positive for social needs.

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- *The Emergency Department (ED) Intervention:* The state initially had a concern that the ED intervention projected target population of 2,000 was too small. After discussion about the details of the intervention, as well as how the PCMH connections to social needs would complement the ED intervention, the state was relieved of this concern. The state also expressed interest in potentially funding our ED predictive model.
- *State and Federal Budget Process:* The budget processes at the state and federal require requests to spend money. These requests often take 45 days to process, which requires a fair amount of advance planning with uncertainty in intervention design to be able to have funds available when we need them.
- *Sustainability:* The end goal of SIM, both the PCMH and CHIR arms, is to move resources to the social service organizations that are producing savings in healthcare by addressing the social determinants of health. Under the current system, these savings would primarily accrue to payers. Our region requested help from the state on working with Medicaid Health Plans to be able to move in this direction.
 - **Communication:** The Steering Committee discussed the need to communicate the SIM work to the Washtenaw and Livingston County more broadly between now and August, when most of the SIM work will begin to roll out.
- **Stakeholders Meeting Agenda:** The stakeholders meeting agenda was approved without modification by the steering committee.
- **Opioid Symposium:** St. Joseph Mercy Health System will be hosting a symposium on the Opioid Epidemic on March 20th, from 8am-5pm at Washtenaw Community College in the Morris J. Lawrence Auditorium. If you plan on attending please register at www.stjoeshealth.org/SUD.

Next Meeting

Friday, March 10, 2017 2:30 – 4:00 PM