



# Washington State Medicaid Transformation

## Independent Assessment of Pay for Reporting 1

Findings Report: May 2022

## 1. Purpose and objectives of DY6 P4R1 Report

The Washington State Health Care Authority (HCA) engaged Myers and Stauffer LC (Myers and Stauffer) to serve as the Independent Assessor for the state's Healthier Washington Medicaid Transformation (Medicaid Transformation), Section 1115 Medicaid waiver. The focus of the Independent Assessor's work is on Initiative 1, Transformation through Accountable Communities of Health (ACHs).

The MTP waiver was approved for a five-year period, and has been in effect from January 9, 2017 through December 31, 2021. In early 2021, HCA requested, and the Centers for Medicare and Medicaid Services (CMS) approved, a one-year extension because of disruptions from the COVID-19 pandemic. The request, and MTP, will now end December 31, 2022 unless CMS authorizes additional renewal/extensions. Washington State is seeking a renewal of MTP and, if approved, the MTP renewal will begin January 1, 2023 and end December 31, 2027.

As required by the current waiver's Special Terms and Conditions (STCs), ACHs report on transformation activities as defined in the [Project Toolkit<sup>1</sup>](#) following specified reporting guidance to receive incentive dollars. This findings report represents Myers and Stauffer's assessment of the ACH P4R1 report.

For more information, visit the Washington State Medicaid Transformation [webpage](#).

## 2. Findings of the ACHs' P4R1 Reports

All ACHs submitted timely reports. Seven ACHs submitted their P4R1 report by the April 8, 2022 deadline. Two ACHs (SWACH and Elevate Health) requested and received extensions for submission by April 20, 2022.

- ◆ **Findings.** All P4Rs included sufficient detail to reflect project performance during the reporting period.
- ◆ **Recommendation.** The IA recommends HCA approve and award full credit to ACHs for milestone achievement towards Medicaid Transformation.

## 3. Response Highlights from the ACHs' P4R1 Reports

The following captures key findings noted by ACHs within their P4R1 responses.

- ◆ **Challenges and Mitigation Activities.** During this reporting period, ACHs were asked to provide an update on COVID-19 response and recovery activities, and any emerging or evolving ACH activities since January 1, 2022. ACHs described specific risks, issues, or challenges that have emerged, as well as any mitigation strategies, if applicable. Table 5 summarizes the challenge and mitigation activity responses.
- ◆ **Scale and Sustain Updates.** As ACHs prepare for sustaining MTP improvements, ACHs reported on activities and/or conversations regarding the sustainability of DSRIP funded infrastructure, activities, and/or evidence-based models. ACHs have formulated plans, begun implementing organizational

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<sup>1</sup> CMS verbally approved a condensed pay-for-reporting period and report structure (P4R-1 and 2) to help with expediting incentive payments in support of provider engagement and payment timing. An updated project toolkit outlining DY6 project requirements is anticipated to be released by June 2022.

changes and hiring, as well as built out financial modeling approaches to sustain MTP successes. Table 5 summarizes the scale and sustain updates.

- ◆ **Partnering provider roster.** As part of the submission of materials and to earn the associated achievement value (AV), ACHs are required to update and submit the list of partnering provider sites participating in Medicaid Transformation Project Toolkit activities. Table 1 summarizes the active partnering providers included in each ACH partnering provider roster.

During the reporting period, four ACHs saw an increase in active partners (e.g., Cascade Pacific Action Alliance, Elevate Health, North Central ACH, Southwest Washington ACH), Better Health Together and Olympic Community of Health had decreases of one and three partners, respectively, while all others reported the same number as their prior report submission.

Table 1. Active Project Partnering Providers

Project	BHT	CPAA	EH	GCACH	HH	NCACH	NSACH	OCH	SWACH
<b>2A: Bi-directional Integration of Care</b>	107	57	64	92	108	42	115	59	33
<b>2B: Community-Based Care Coordination</b>	109	35	92	•	•	50	8	•	14
<b>2C: Transitional Care</b>	•	35	•	87	96	48	109	•	•
<b>2D: Diversions Interventions</b>	•	•	•	•	•	48	112	59	•
<b>3A: Addressing Opioid Use</b>	105	59	52	95	101	57	150	59	14
<b>3B: Reproductive and Maternal and Child Health</b>	•	68	•	•	•	•	85	59	•
<b>3C: Access to Oral Health Services</b>	•	•	•	•	•	•	36	59	•
<b>3D: Chronic Disease Prevention and Control</b>	105	46	24	87	92	42	92	59	34

#### 4. ACH Milestone Achievement and Earned Incentives

Tables 2 through 4 below provide an overview of ACH projects, potential incentives ACHs can earn for achieving project milestones for P4R1 and the incentives earned. Each ACH can earn 1.0 AV per milestone per project. If an ACH is not participating in a project, the table will display a dash (-).

The amount of incentives paid to an ACH region are based on the number of earned AVs out of total possible AVs for a given reporting period. AVs associated with Project Incentives for this reporting period are identified in Table 2 below.

After review of submitted reports, the IA found all ACH reports to be fully responsive and complete, and the IA recommends HCA award full credit to each ACH for all milestones as noted in Table 3.

For each ACH, Table 4 provides incentives available by funding source for completion of P4R1.

Table 2. Potential P4R AVs for Project Incentives for DY6 P4R 1 report

ACH	2A	2B	2C	2D	3A	3B	3C	3D	Total Potential AVs
Better Health Together	4	3	-	-	4	-	-	3	14
Cascade Pacific Action Alliance	4	3	3	-	4	3	-	3	20
Elevate Health	4	3	-	-	4	-	-	3	14
Greater Columbia ACH	4	-	3	-	4	-	-	3	14
HealthierHere	4	-	3	-	4	-	-	3	14
North Central ACH	4	3	3	3	4	-	-	3	20
North Sound ACH	4	3	3	3	4	3	3	3	26
Olympic Community of Health	4	-	-	3	4	3	3	3	20
SWACH	4	3	-	-	4	-	-	3	14

Table 3. Available and Earned P4R Achievement Values (AVs) by ACH by Milestone for DY6 P4R 1 report

	BHT	CPAA	EH	GCACH	HH	NC	NS	OCH	SWACH
<b>Number of Projects in ACH Portfolio</b>	4	6	4	4	4	6	8	6	4
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
Completion of all P4R metrics. This includes any current MeHAF assessments and CIAT support to providers.	2	2	2	2	2	2	2	2	2
<b>Total AVs Available</b>	14	20	14	14	14	20	26	20	14
	Full Credit	Full Credit	Full Credit	Full Credit	Full Credit	Full Credit	Full Credit	Full Credit	Full Credit
<b>Total AVs Earned</b>	14	20	14	14	14	20	26	20	14

Table 4. Total P4R Project Incentives Available by ACH for Achievement of the Implementation Plan Milestone

ACH	Earned AVs	Project Incentives
Better Health Together	14	\$1,272,746
Cascade Pacific Action Alliance	20	\$1,202,730
Elevate Health	14	\$1,478,732
Greater Columbia ACH	14	\$1,652,850
HealthierHere	14	\$2,603,061
North Central ACH	20	\$625,000
North Sound ACH	26	\$1,783,555
Olympic Community of Health	20	\$625,000
SWACH	14	\$841,275
<b>Total</b>	<b>156</b>	<b>\$12,084,949</b>

Table 5. Key ACH Findings

	Challenges and Mitigation Activities	Scale and Sustain Updates
<b>Better Health Together (BHT)</b>	<ul style="list-style-type: none"> <li>• Better Health Together (BHT) has continued their community support through the Care Connect Washington Hub, supporting emergency housing and utility assistance. BHT is working with partners to support school-based telehealth and reinforce rural capacity building.</li> <li>• Like many other ACHs, BHT is experiencing workforce shortages due to organizational capacity. To mitigate the fact that five clinical partners chose not to sign Year 3 contracts, BHT has asked the board to approve changes to Year 3 contracts without prohibiting Year 4/5 contracts, as well as stepping into roles as needed.</li> </ul>	<ul style="list-style-type: none"> <li>• BHT has begun the implementation phase for scaling and sustaining its projects, with 26 new candidates joining the Board in 2022. The Board is currently working on a 3-year strategic plan for 2023-2025.</li> <li>• In addition to their previously reported support of their Community Health Worker (CHW) network, and successful contract with the Department of Commerce, BHT has developed a Coordinated Community Plan under Spokane Continuum of Care to coordinate a Youth Homelessness Demonstration Program. The plan will be submitted to the Washington Department of Housing and Urban Development in April.</li> </ul>
<b>Cascade Pacific Action Alliance (CPAA)</b>	<ul style="list-style-type: none"> <li>• Cascade Pacific Action Alliance (CPAA)'s Pathways Team in partnership with the Department of Health (DOH) Care Connect Program 2B has continued to provide emergency response by connecting CHWs and other agencies to those at risk within the region. To date, 546 referrals have been processed.</li> <li>• CPAA has maintained efforts to keep up with Opioid response work by engaging in dialogue with healthcare providers, and highlighting diversion programs and harm reduction service providers.</li> </ul>	<ul style="list-style-type: none"> <li>• The CPAA Pathways team has been involved in regular meetings with the WA DOH on the evolution of what started as wildfire relief meetings in 2021 to overall evacuation and emergency coordination meetings across the state. The infrastructure is now in place and has been utilized successfully for COVID-19 relief and recovery, therefore this model is being discussed with other state ACHs as a standard response model for all types of natural disasters (fire, flood, earthquake) in addition to life-threatening pandemics.</li> <li>• No changes were made in funding and financing of partnering providers in DY6, CPAA has mirrored DY5 for continuity purposes.</li> </ul>

<p><b>Elevate Health (EH)</b></p>	<ul style="list-style-type: none"> <li>• Positioned at the intersection of public health, social services, and health delivery systems, Pierce County Accountable Community of Health (Elevate Health) and OnePierce Community Resiliency Fund (OnePierce) have continued to adapt and respond to critical community needs in the evolving climate of the COVID-19 pandemic.</li> <li>• Elevate Health has focused on DSRIP initiatives around response, recovery, and crisis work including the Community-Based Coordination Hub, the Pierce County Opioid Task Force, Trueblood Activities, Workforce Development, and Medical Respite. Elevate Health’s region has struggled with opioid use and overdoses during the pandemic. In efforts to mitigate adverse health outcomes, Elevate Health hosted the 2022 Opioid Summit: “Rooting Our Response to the Opioid Crisis in Racial Equity” on March 17 2022. Elevate Health has also focused on workforce development through policy and advocacy, professional development, and training to combat workforce shortages.</li> </ul>	<ul style="list-style-type: none"> <li>• Elevate Health is assessing the funding sources of each of its programs as they come to the end of DY6. The ACH indicates that sustainability planning will be largely dependent on the content of the new MTP waiver application, expected in draft form by May 2022. Other sources of future funds may include Washington Department of Health disaster preparedness work and care coordination for the private payer market.</li> <li>• During the reporting period, Elevate Health created a request for proposal (RFP) to be distributed to mission-driven organizations in Pierce County. Funding selection priorities will include projects that align with Elevate Health’s mission.</li> </ul>
<p><b>Greater Columbia ACH (GCACH)</b></p>	<ul style="list-style-type: none"> <li>• Greater Columbia ACH (GCACH) has focused COVID-19 response efforts on its Community Resilience Campaign and Vaccine Collaboration. The ongoing Community Resilience Campaign, “Practice the Pause”, delivered 12 training materials reaching over 300 individuals during the reporting period.</li> <li>• GCACH’s Vaccine Collaboration has continued to promote and market clinics every weekend, and received the 2021 Community Partner of the Year Award from the Tri-Cities Hispanic Chamber of</li> </ul>	<ul style="list-style-type: none"> <li>• GCACH is working with a consulting company to build a strategic plan of six priorities that will continue to advance population health and health equity through Learning Collaboratives. GCACH is hosting monthly leadership council meetings and pursuing federal and state grants to continue funding initiatives.</li> <li>• GCACH has sustained and initiated its 4th practice transformation cohort for the Emergency Medical Service Innovative (EMSI) program to begin in August of 2022.</li> </ul>

	<p>Commerce for efforts. Workforce issues have persisted, but telehealth has been reported as a help to providers, so GCACH has shifted mitigation strategies to include implementation of telemedicine.</p>	
<p><b>HealthierHere (HH):</b></p>	<ul style="list-style-type: none"> <li>• Through Community Health Workers for COVID Response and Resilient Communities (CHW-CARE), HealthierHere has joined forces with other partners to launch Centers for Disease Control (CDC) funded initiatives aimed at strengthening community resilience to fight COVID through the integration of community health workers. HealthierHere is focusing on BIPOC (i.e., Native Hawaiians/Pacific Islanders (NHPIs), Hispanics, Blacks/African Americans, Asian Americans, American Indians/Alaskan Natives (AIANS)) and low-income populations disproportionately impacted by COVID.</li> <li>• HealthierHere continues to invest \$2.35 million across 18 organizations to grow and strengthen the CHWs and peer support specialist workforce. Workforce challenges continue, and HealthierHere has focused on investments in resource availability, support, and advocacy for the healthcare workforce.</li> </ul>	<ul style="list-style-type: none"> <li>• HealthierHere has focused its efforts this reporting period on advancing population health infrastructure through registries, risk stratification, and social determinants of health screenings. Several projects have continued or emerged during this reporting period, including: Tribal Engagement, Health Equity, Innovative Care, and the Connect2Community Network.</li> <li>• HealthierHere’s 2022 investment strategy was approved in February 2022 and provides \$20M in funding across four key service areas: health equity, coordinated community care, scale and sustain innovations, and workforce development.</li> </ul>
<p><b>North Central ACH (NCACH)</b></p>	<ul style="list-style-type: none"> <li>• North Central ACH (NCACH) reports that during this time they “have not been directly involved in COVID-19 response and recovery activities,” but rather have continued to focus efforts on behavioral health because of COVID-19’s indirect impact on their behavioral health infrastructure.</li> <li>• Activities included a Recovery Coach Network, Narcan vending machines, and the convening of</li> </ul>	<ul style="list-style-type: none"> <li>• NCACH has implemented their plan for the future structure of the organization. They have launched a diverse workgroup of stakeholders and collaborated with multiple organizations.</li> <li>• A top strategic priority is to increase cross-sector collaborations and integrated partnerships. In DY6, decisions around funding and financing of partners</li> </ul>

	<p>approximately 80 stakeholders to discuss the state of the behavioral health system in the region. Mitigation activities include managing staffing and supply shortages.</p>	<p>will be based on participation and input from network partners.</p>
<p><b>North Sound ACH</b></p>	<ul style="list-style-type: none"> <li>• In addition to COVID-19 response, North Sound ACH responded to an Emergency Proclamation due to flooding in two of their counties. North Sound convened a community response network to provide community partners with opportunities to build relationships, coordinate services, and provide resources for people impacted by the flooding.</li> <li>• North Sound ACH continued supplying testing kits, food, and financial support through the Community HUB, and supplied childcare, Personal Protective Equipment (PPE), and testing kits to medical facilities on an ongoing basis. As far as mitigation, North Sound ACH had to improve communication and staffing with partners in order to tackle care coordination and adequate emergency response.</li> </ul>	<ul style="list-style-type: none"> <li>• From the beginning of the Medicaid Transformation Project, North Sound ACH has stayed strong in the belief that strong relationship and partnership building was the key to sustainability into the future. As DSRIP ended, North Sound ACH was engaged in multiple efforts to ensure the sustainability of projects including the approval of a fund allocation strategy and multiple partner contract amendments.</li> <li>• North Sound ACH plans to use investment strategies that create opportunities for collaborative investing in the future, and use a cohort approach to create methods for network members to engage in fund distribution decision making.</li> </ul>
<p><b>Olympic Community of Health (OCH)</b></p>	<ul style="list-style-type: none"> <li>• Olympic Community of Health (OCH) has cited workforce shortages as the biggest struggle, pervasive across all sectors. OCH has had a difficult time obtaining and sustaining licensed providers and entry-level medical assistants and competing priorities have led to limited bandwidth for partners to take on new projects.</li> <li>• OCH staff are addressing this struggle by compiling a regional workforce report to highlight gaps and opportunities for action, set to publish later in 2022.</li> </ul>	<ul style="list-style-type: none"> <li>• OCH launched action collaboratives for each of the focus areas identified in OCH’s 2022-2026 Strategic Plan. The four action collaboratives met for the first time on March 30, 2022 to foster connections, establish partner commitment, and ground the work in health equity principles (targeted universalism).</li> <li>• OCH staff have met with regional Tribes, managed care organizations, and local health jurisdictions to share the 2022-2026 strategic plan.</li> <li>• From late January to mid-March, OCH spent time meeting individually with contracted partners to</li> </ul>



		<p>establish contracts and scopes of work. OCH has decided to separate funding for 2022 into two payment models: Year 6 and Not Year 6. A summary of selected projects was presented to the OCH Board in March.</p>
<p><b>Southwest Washington ACH (SWACH)</b></p>	<ul style="list-style-type: none"> <li>• Through CareConnect WA, Southwest Washington ACH (SWACH) has been able to continue to support community members through COVID surges. SWACH has strengthened the capacity and infrastructure of the HealthConnect Hub and their COVID Behavioral Health initiatives and communications.</li> <li>• Due to the Omicron variant and workforce stress, mitigation activities were led by HealthConnect’s efforts to provide technical assistance and cohort support. SWACH was also able to mitigate impact through the development of a crisis communication system.</li> </ul>	<ul style="list-style-type: none"> <li>• During this time, SWACH created an expansive community impact request for proposals to fund one-year community based or clinical based projects that center on health equity and Medicaid populations. SWACH will work with a community based panel to review and score proposals in consideration for funding.</li> <li>• In January, SWACH was able to successfully contract with Skamania County Community Health, Department of Social and Human Services (DSHS) /CoMagine, and continued its partnership with Cowlitz Fire and Rescue.</li> <li>• SWACH launched the HealthConnect Advisory Council to make recommendations and identify gaps in service and data.</li> </ul>