

The background of the slide features a scenic landscape of a calm lake surrounded by dense evergreen forests and snow-capped mountains under a clear sky. In the foreground, the white silhouette of a rowing team with four members is shown on the water.

Olympic Region Health Transformation

*A look at the first six years of
the Medicaid Transformation Project*

November 2023



Contents

Acknowledgements.....	2
Report Purpose.....	2
What is Olympic Community of Health?.....	2
The Olympic Region.....	4
What is the Medicaid Transformation Project?.....	4
OCH's value.....	13
What's next?.....	14
Appendix A: OCH Board of Directors & Governance Overview	17
Appendix B: Domain 1- Health Systems & Community Capacity Building.....	19
Appendix C: Domain 2- Care Delivery Redesign	21
Appendix E: Continued Summary of MTP Partner Payments.....	31
Appendix F: OCH Network Partners.....	32

Acknowledgements

Report writing team: Amy Brandt (Communications Manager), Celeste Schoenthaler, MPH (Executive Director), and Miranda Burger (Program Manager)

Partner reviewers:

Jennifer Kreidler-Moss, PharmD, CMPE (CEO, Peninsula Community Health Services), Siri Kushner, MPH, CPH (Public Health Infrastructure Director, Kitsap Public Health District), Michael Maxwell, MD (CEO, North Olympic Healthcare Network), Wendy Sisk, LMHC, GMHS (CEO, Peninsula Behavioral Health)

And, a big thank you to all partners in the Olympic region for their hard work, collaboration, and engagement in health transformation.

Report Purpose

Olympic Community of Health (OCH) intends for this report to serve as a resource for the successes, challenges, and lessons learned from the first six years (2017-2022) of the Medicaid Transformation Project (MTP) as well as a summary of the Olympic region's unique journey and progress toward health transformation. This report is a legacy document for partners, local and statewide, new and established, and highlights the region's path forward in achieving the vision of healthy people, thriving communities.

What is Olympic Community of Health?

OCH is a non-profit organization with the purpose of tackling health issues that no single sector or tribe can tackle alone. OCH serves the three-county region of Clallam, Jefferson, and Kitsap counties and seven sovereign tribal nations. By bringing together regional partners on local health issues, we are working towards a healthier, more equitable three-county region. **Health transformation is bigger than one organization or tribe, and the impact of OCH is only made possible due to the collaborative efforts of many partners across the region.**

"We all have unique areas of expertise, but when you combine them together, it's really better than the sum of the parts. That can dramatically improve the health of the community." - OCH partner

Key Medicaid Transformation Project Milestones

OCH hosted over **300** collaborative events

Over **\$21 million** distributed directly to partners through the Medicaid Transformation Project

39 completed scopes of work by implementation partners

A total of **55** different partners (and counting) are a part of the OCH network

OCH maximized strengths from the Medicaid Transformation Project to address additional issues like stigma of substance use disorder and care coordination

Timeline 2015 2016 2017 2018 2019 2020 2021 2022 2023

OCH Board of Directors was formed

Centers for Medicaid and Medicare approved the 1115 waiver

Implementation partners contracted with OCH to create and implement scopes of work

OCH launched the Three-County Coordinated Opioid Response Project

First round of payments went out to partners to incentivize collaborative action

OCH completed a regional assessment of determinants of health

OCH implemented COVID-19 response activities to support the region

OCH adopted 2022-2026 Strategic Plan

One year extension of Medicaid Transformation Project

Conclusion of initial partner scopes of work

OCH supported the regional transition to integrated managed care

External challenges

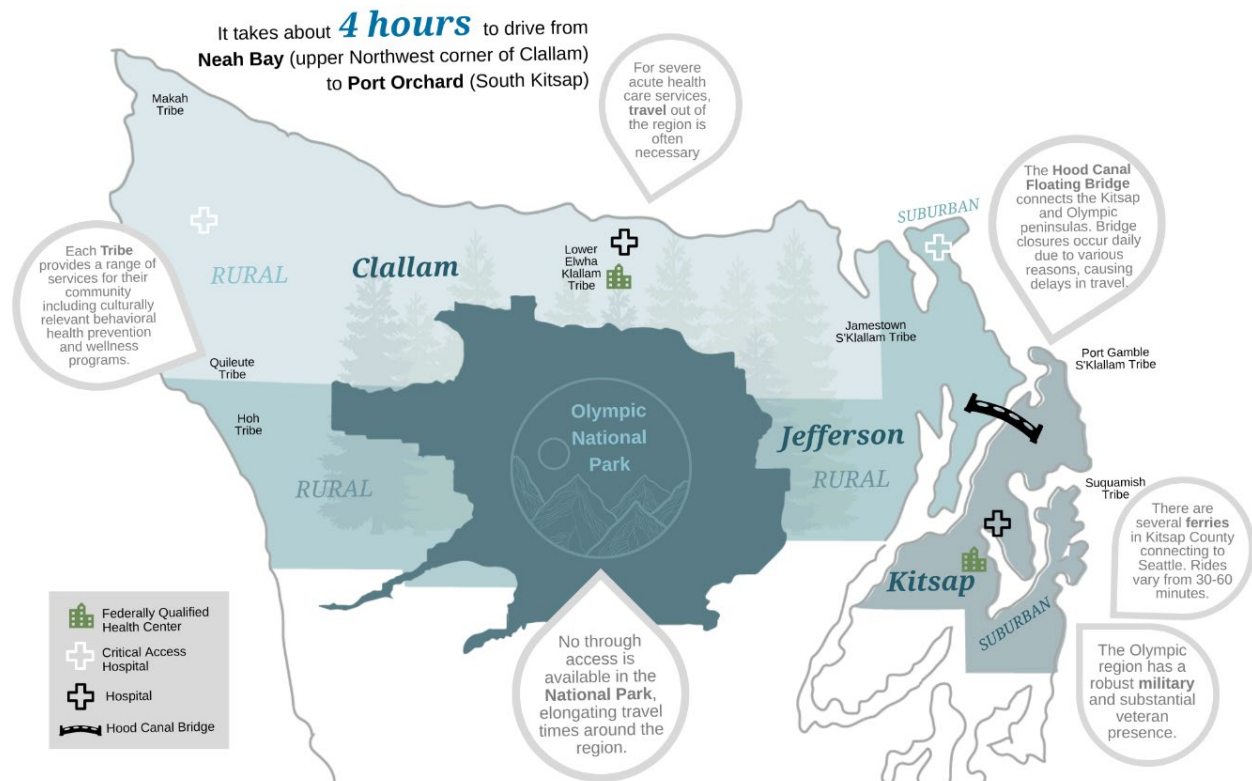
Integrated Managed Care

COVID-19

Workforce challenges

The Olympic Region

The Olympic region spans Clallam, Jefferson, and Kitsap Counties, and includes the seven sovereign nations of the Hoh, Jamestown S’Klallam, Lower Elwha Klallam, Makah, Port Gamble S’Klallam, Quileute, and Suquamish Tribes. Below is a bird’s eye view of the makeup of the Olympic and Kitsap Peninsulas and some key notes to help understand the notable characteristics of the Olympic region.



What is the Medicaid Transformation Project?

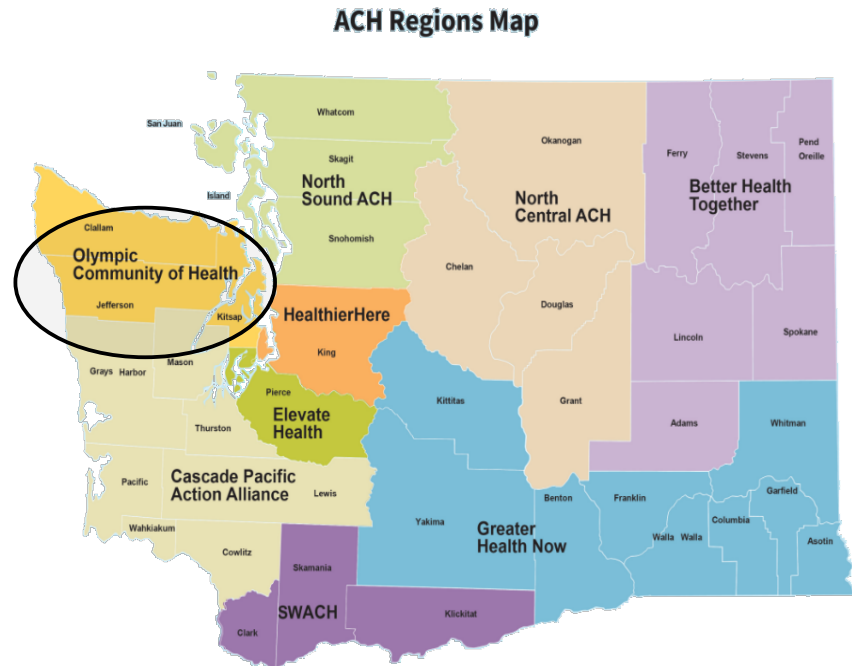
In 2017, Washington State was granted approval by the federal Centers for Medicare and Medicaid Services (CMS) to implement the Medicaid Transformation Project, or MTP. This unique opportunity, known as a Section 1115 Medicaid waiver, gave Washington the opportunity to implement new services and initiatives to better meet the needs of Medicaid beneficiaries, including establishing regional health collaboratives, known as Accountable Communities of Health (ACH). The initial five-year contract (2017-2021) authorized up to \$1.5 billion in federal investments across the state to promote innovative, sustainable, and systemic changes to the health care system with the goal of improving health outcomes and the care experience for people on Medicaid while lowering the cost of care. MTP was divided into five inter-dependent initiatives:

- **Initiative 1: Transformation through Accountable Communities of Health (ACHs) & Indian Health Care Providers**
- Initiative 2: Long-term services and supports for the aging population

- Initiative 3: Foundational Community Support Services
- Initiative 4: Substance use disorder institution for mental diseases
- Initiative 5: Mental health institution for mental diseases

What is an Accountable Community of Health?

As an Accountable Community of Health (ACH), OCH was created to support and implement collaborative approaches to better meet the health needs of Medicaid beneficiaries in the Olympic region. There are nine ACHs covering Washington state, each serving a distinct region. While each ACH is unique, they share a common goal to improve the health of local communities and transform health care delivery. ACHs work together to tackle complicated health problems through cross-partner collaborations and investments in innovative solutions that meet the unique needs of their local communities.



ACHs were designed to be neutral conveners, coordinating bodies, investors, accountable for MTP investments, and connectors between the health care delivery system and local communities.

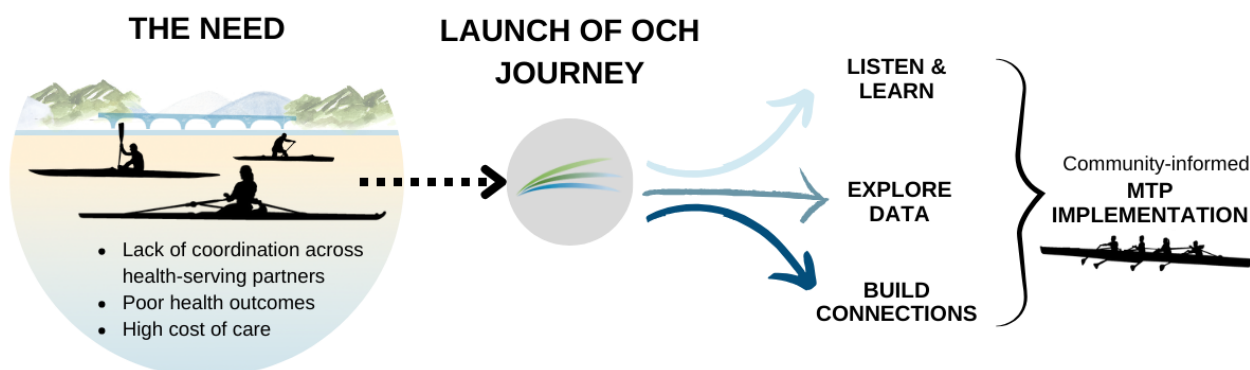
OCH's MTP Journey

The state of the region before MTP

Before MTP, the ecosystem of health-serving partners (hospitals, behavioral health providers, primary care providers, tribal health centers, community-based organizations, dental providers, social service agencies, local governments, etc.) were operating within distinct silos with limited collaboration. This was contributing to high costs of care, disjointed care, and less-than-optimal health outcomes. There was a lack of consensus regarding regional



health challenges and priorities, posing a barrier to health improvement within communities and the region.



Building an Accountable Community of Health

To build a strong network and approach to collaborative solutions, OCH started by listening and learning, exploring data, and building meaningful connections.

Listen and learn: OCH took the time to learn which providers offered services for people on Medicaid to better understand who was working on what. OCH met with health-serving organizations and tribes across the region to learn about gaps in the health care system, local health priorities, and opportunities for collaboration.

Explore data: OCH worked closely with local epidemiologists at Kitsap Public Health District to explore regional data and better understand local health outcomes. Regional partners came together around a community health needs assessment. This equipped OCH with a data-driven approach to determine which health problems to tackle collaboratively.

Build connections: OCH began making connections and building a network of health-serving partners. OCH was established as a non-profit organization with a robust Board of Directors, made up of local health leaders (**Appendix A**), to provide structured support for the network of partners. Early success was found through bringing people together. OCH hosted county- and regional-based convenings that provided networking opportunities as well as facilitated discussions about regional health topics.

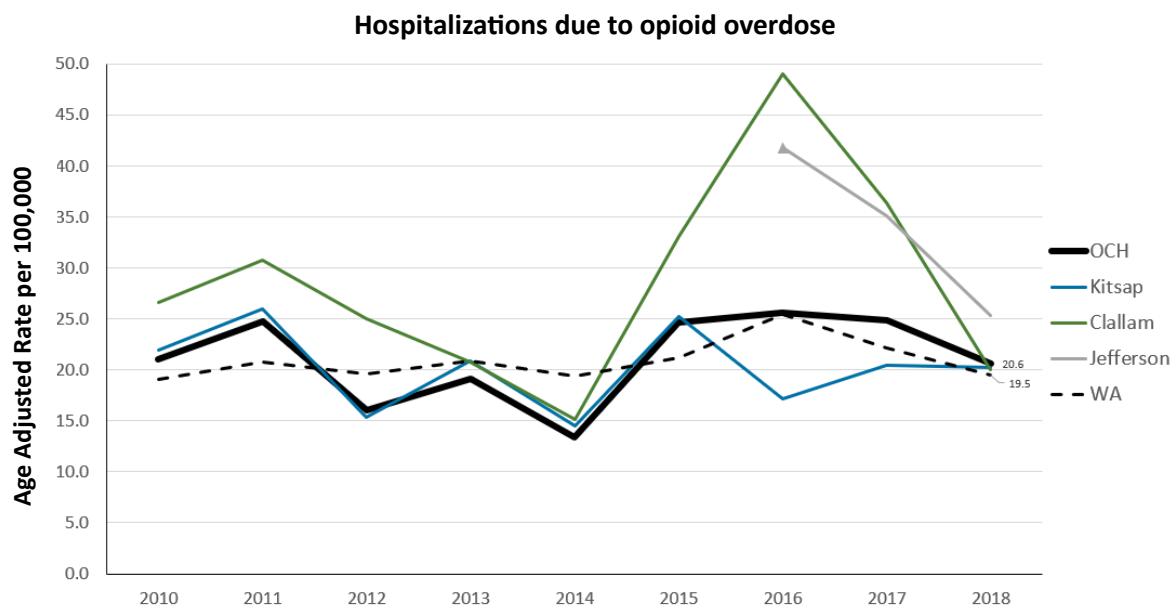


Community-informed regional health transformation

At the outset of MTP, the OCH Board of Directors set 4 regional targets for its transformation vision that reflected common hopes expressed by partners: 1) accessible, patient-centered health care system that effectively integrates physical, behavioral, and dental services, 2) effective linkages between primary

care, behavioral health, social services, and other community-based service providers, 3) common data metrics and shared information exchange, and 4) provider adoption of value-based care contracts. **See Appendix A for an overview of the OCH Board of Directors and governance structure.**

Prior to the start of MTP, the ACHs were provided with funds to implement an initial region-wide project. Based on key takeaways from listening to regional partners and exploring regional data, OCH identified the opioid crisis as an important starting point to launch collaborative problem-solving. In 2016, areas of the region saw extremely high rates of hospitalizations due to opioid overdose compared to Washington State average (see graph below). OCH used these initial funds to launch the Three-County Coordinated Opioid Response Project (3CCORP), consisting of a steering committee and three workgroups addressing prevention, treatment, and overdose prevention.



Source: Washington State Opioid Quarterly Report, Opioid Overdose Dashboard, Restricted Access, CHAT, 9/11/2019

Integrated Managed Care

Integrated Managed Care (IMC) is an initiative that brings together the payment and delivery of physical, behavioral, and crisis services for many people enrolled in Washington’s Medicaid program. Washington State began transitioning to managed care in 2016, and each region fully transitioned on January 1, 2020.

Clallam County was the only county in Washington that did not have managed care for primary care prior to the January 1, 2020 launch date. The transition to IMC in the Olympic region also collided with the COVID-19 pandemic, which posed additional challenges for the health-serving workforce, particularly in rural areas. While not a direct activity under MTP, OCH supported partners through the transition to IMC through:

Facilitating inter-local leadership structure: OCH facilitated and participated in the inter-local leadership structure, a group of local and statewide partners to prepare for regional transition to IMC.

Convening: OCH hosted an IMC forum in Clallam County in December 2019 to facilitate communication and information sharing amongst health-serving partners, Medicaid Managed Care Organizations, and the Health Care Authority.

Participating in early-warning system process: OCH actively participated in statewide meetings including a series of early-warning system discussions to track regional challenges and advocate for partner-informed solutions.

COVID-19

The COVID-19 pandemic had many impacts on the Olympic region. Challenges included:

- Partner capacity
- Public misinformation and fear
- Limited resources to maintain services
- Transition to virtual services (considering limited broadband access)
- Home schooling and lack of childcare
- Temporary pause on in-person activities
- Workforce burnout
- Personal protective equipment (PPE) shortages
- Specific to MTP, many implementation partners paused, adapted, and/or reduced their MTP activities

The state extended MTP an additional year (through 2022) due to COVID-19. OCH adapted partner scopes of work and contracts based on new priorities and capacities associated with the pandemic. Additionally, OCH supported partners through:

Collaboration calls: OCH hosted twelve collaboration calls with partners across the three-county region, to discuss and align COVID-19 response activities and to keep MTP activities moving forward.

Personal Protective Equipment (PPE) distribution: OCH distributed more than 37,000 masks to local partners and community members. OCH also distributed additional PPE and sanitation materials such as gloves and disinfectant wipes.

COVID-19 recovery funds: Through two rounds of COVID-19 recovery funds in 2020 and 2021, OCH allocated a total of \$847,000 across the Olympic region to support activities such as vaccination clinics and other pandemic-related activities. One example of funded activities is the Quileute Tribe's creation and distribution of wellness kits for isolated community members. Wellness included a fry bread recipe, Quileute language packet, coloring book, fun activities, and information about local health resources to promote resiliency among families.

Community education campaigns: OCH staff developed and distributed several community-wide education campaigns:



- [Stay Healthy, Stay Connected](#)
- [Save a Life](#)
- [Stay Strong, Olympic Region](#)
- [Plant Hope, Grow Resilience](#)

Care Connect WA: OCH contracted with the Washington Department of Health (DOH) in 2022 to serve as the regional hub for [Care Connect WA](#), a program to support individuals in isolation for COVID-19. OCH launched the work in all three counties in the fall 2022 in partnership with local partners.

OCH's Care Connect Partners:
 Forks Food Bank
 Kitsap Public Health District
 North Olympic Healthcare Network
 Olympic Peninsula YMCA
 Peninsula Community Health Services
 Sequim Food Bank

Overview of the Medicaid Transformation Project

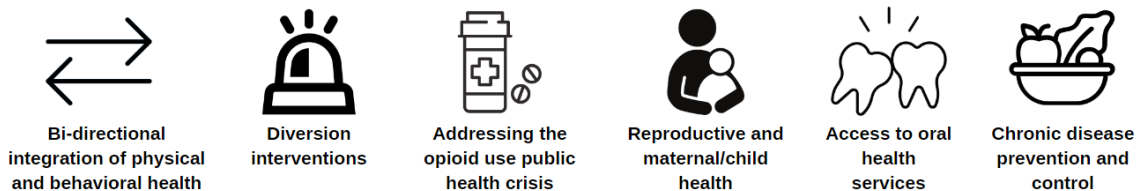
Under MTP, the Washington State Health Care Authority (HCA) provided a toolkit of projects for each ACH to select from, which guided implementation activities. The toolkit included projects and activities to develop and enhance core health system capacities as well as transformation projects focused on innovative models of care.

Domain 1: Health systems and community capacity building

This domain addressed the core health system areas to be developed or enhanced to support health transformation. This domain required three focus areas: moving toward financial sustainability through value-based purchasing (VBP), promoting a health workforce, and leveraging and expanding systems for population health management. **See Appendix B for examples of OCH's work under Domain 1 activities.**

Domain 2: Care delivery redesign

This domain focused on innovative models of care to improve quality, efficiency, and effectiveness. The OCH Board of Directors prioritized the selection of six projects from the available eight options provided. **See Appendix C for examples of OCH's work under Domain 2 activities.**



Note: Bi-directional integration of physical and behavioral health and addressing the opioid use public health crisis were required projects. Of the eight projects to choose from, OCH did not select “community-based care coordination” and “transitional care”.

OCH's approach

OCH established robust scopes of work (known as “change plans”) and contracts with a wide variety of regional partners to implement policy and systems change in alignment with the required and selected project areas. These “Implementation Partners” (partners who contracted with OCH to work on MTP)

received incentive dollars determined by a funds flow and annual payment model approved by the OCH Board of Directors.

In addition to broad successes and strengths that emerged throughout MTP, OCH saw successes in each of the toolkit activities and projects. Each project brought forth victories and lessons learned that have strengthened OCH's approach and led to improved health outcomes. **Explore *Appendices B and C* to learn about some of the activities and projects implemented during MTP.** This is not a comprehensive inventory of regional successes as there were countless accomplishments and efforts that took place during the six years of MTP.

A ripple effect is happening in the Olympic region, sparked by collaborative energy and innovative projects. Progress takes time and the collective efforts of individuals, organizations, and whole communities coming together is leading to real waves of change.

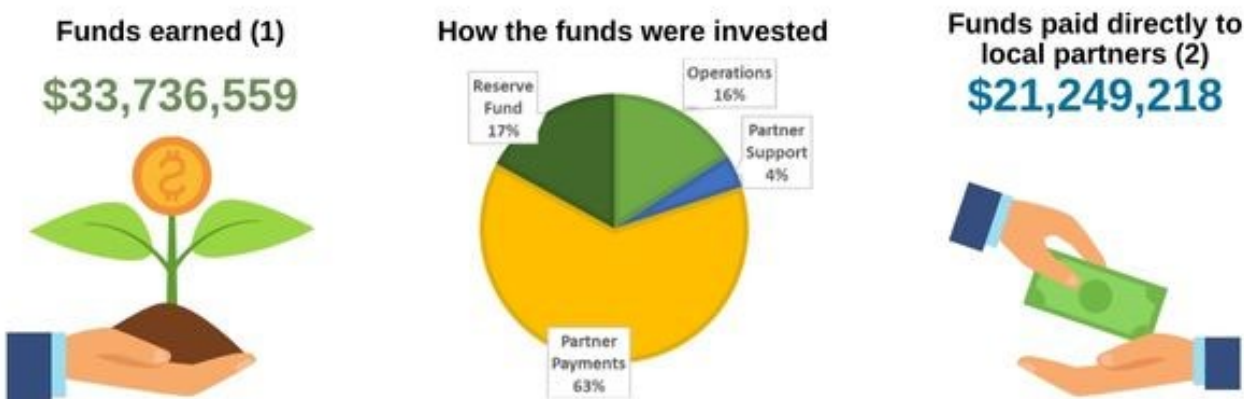


Aligning goals, maximizing efforts, catalyzing change.

Tackling health issues no single sector or Tribe can tackle alone.

Financial Overview

Throughout MTP, OCH received funds from HCA that were invested across the Olympic region based on the direction provided by the Board of Directors. Investment categories included partner payments (incentives for those contracted as Implementation Partners), partner support (technical support, trainings, and events), and internal operations. Funds were earned through reporting requirements and regional progress toward a set of performance metrics. Funding earned by each ACH was largely determined by the size of each region's Medicaid population. OCH is the smallest ACH by number of Medicaid beneficiaries, with approximately 4% of Medicaid beneficiaries living in the region. Throughout MTP, OCH earned more than \$33,000,000¹, which was greater than the OCH Board of Directors initially anticipated. Most of those funds were distributed directly to regional partners. **See Appendices D and E for a detailed breakdown of partner payments.** Sustainability is a priority for the OCH Board of Directors, and they set aside reserve funds of about \$6,000,000 to support OCH activities beyond MTP.



OCH Partner Network

Implementation partners

The Olympic region is home to many devoted, accomplished, and talented organizations, tribes, and communities committed to working together to achieve OCH's vision of a healthier, more equitable three-county region. Early on, OCH established trusted relationships with more than 30 partner organizations and tribes representing primary care, behavioral health, hospitals, public and social service providers, and tribal health services. This initial group of partners were known as "Implementation Partners," that is the group of partners who contracted with OCH to implement activities in support of the required and chosen regional MTP activities. **See Appendix F for a summary of network partners including MTP implementation partners.**

Expanded partnerships

Throughout MTP, many other organizations and tribes joined the network and supported MTP outside of a funding relationship and participated in learnings, convenings, committees, and in other ways to

¹ OCH will earn one final payment through MTP in 2024 to reflect 2022 pay for performance metrics and high-performance pool, so the grand total will be higher than the amount reflected in this report.

² OCH will make one final payment to MTP Implementation Partners in the summer of 2024, once HCA tallies final performance for the region.

support this important work. The power of collaborative action quickly began to attract additional partners, expanding the partner network beyond funded MTP partners.

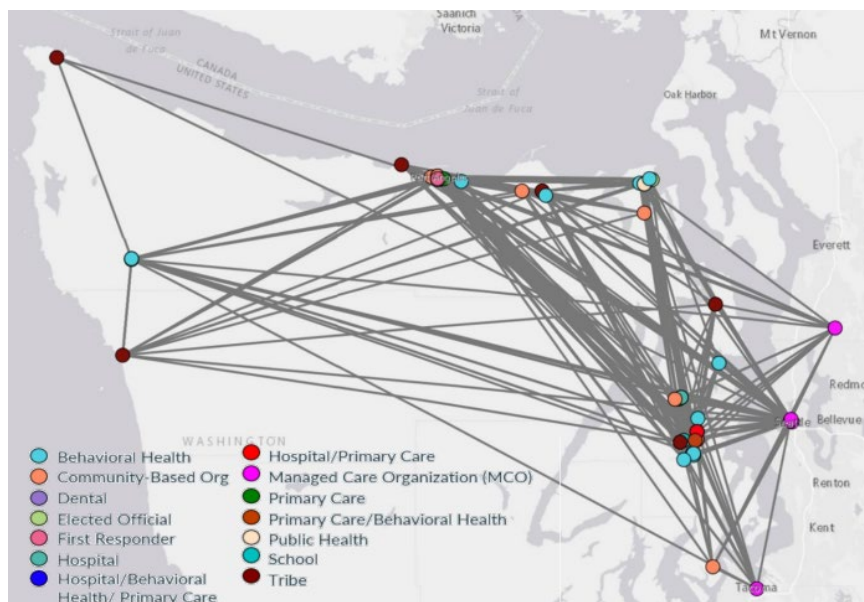
In 2022, OCH sought to meaningfully engage additional partners on projects including tackling stigma of substance use disorders, supporting the health-serving workforce, community-clinical linkages, addressing determinants of health, and more. A new set of priorities necessitates expanded and new voices at the OCH table and partners to champion the work. OCH funded 10 new partners totaling \$320,000. Check out the [Expanding the Table summary to learn more.](#)

"So many people have been connected that weren't connected before [MTP]."

- OCH partner

Network analysis

In 2022, OCH conducted a [regional network analysis](#) to better understand the network of partners across the region. The network map, on the right, illustrates the relationships between OCH partners, color-coded by partner type ([Appendix F](#)).



Network strengths

Over the years, OCH has established itself as a trusted and valuable network of partners working to tackle health issues through collaborative action. The network is made stronger through these components as identified in the graphic below.

Components of a strong network



Trust

The OCH network operates on a **strong foundation of trust.**

Value

OCH partners identified **resource contribution** as a strong value of the network.

Diverse perspectives

The OCH network is composed of **55 different partners.**

Collaboration

Among the 55 different partners, there are **529 relationships.**

Sustainability

There is a **healthy distribution of leadership** across OCH partners.

OCH's value

	Cross-partner collaboration		OCH North Star: "Healthy people, thriving communities"
	Regional partners		OCH catalyzes change
	Contracted work focused on prioritizing regional health		OCH is a bridge builder and problem solver

OCH's value is rooted in the ability to effectively convene partners, approach health topics with an innovative regional perspective, provide funding for upstream interventions, and the ability to provide meaningful learning opportunities. This value-add was developed and honed throughout the MTP process, crafted through many community-centered conversations. In 2020, OCH

partners, the Board of Directors, and staff discussed the question "What makes OCH unique?" which led to the set of strengths outlined above.

This place-based approach equipped OCH with the context to develop community-informed strategies that have helped local health partners build connections, implement innovative solutions, and ultimately prioritize individual and population health.

Partner's vision for the future (2019)



Impacts witnessed by partners (2021)



What's next?

2022-2026 Strategic Plan

MTP was just the beginning of a strong and motivated network committed to tackling health issues no single sector or tribe can tackle alone. Together, OCH staff, the Board of Directors, and partners created a [2022-2026 Strategic Plan](#). The plan synthesizes regional priorities, strengths from the initial MTP approach, and outlines a clear and community-driven path forward. The strategic plan highlights focus areas that inform OCH-related activities:

- Access to the full spectrum of care
- Long-term, affordable, quality housing
- Individual needs are met timely, easily, and compassionately
- Together, recovery is possible (substance use disorder)



MTP renewal waiver

In 2022, HCA submitted a renewal application for an additional five years of MTP work. Much of the application was approved in mid-2023 and new initiatives will launch in 2024. The following topics are opportunities for OCH to foster collaboration in alignment with both the renewal waiver and the 2022-2026 strategic plan.

Determinants of Health

Determinants of health (often referred to as “social” determinants of health) are the conditions in which we live, learn, work, and play, that positively or negatively influence one’s health – access to healthy affordable food, socioeconomic status, access to care, availability of transportation services, safe and affordable housing, educational attainment, etc. While much of the work OCH embarked on early with MTP was focused on improvements to policies, workflows, and systems within clinical spaces (primary care, behavioral health, hospitals), partners elevated the need to better understand how social conditions are impacting the health of communities across the region. [OCH took steps in 2020](#) to better understand local determinants of health and promoted shared language across different partner types.

This topic is of high priority for the Olympic region and is elevated in OCH’s strategic plan goal, “**improve individual and population health and advance equity by addressing the determinants of health.**” OCH looks forward to continuing to learn and address determinants of health by creating opportunities for partners to implement creative and collaborative strategies.



Community-Based Care Coordination

Community-based care coordination reduces fragmentation and improves access, communication, and support for individuals and families across the care continuum. It is separate from clinical care coordination and is one example of how OCH works to address the determinants of health. While OCH did not select community-based care coordination from the original MTP project toolkit, it was a theme throughout the first six years of MTP. OCH emphasized the importance of community-clinical linkages to improve systems of care for patients and clients. Throughout the initial phase of MTP, OCH partners expressed interest in establishing a regional community-information exchange system to support closed-loop referrals and connections across partners and the region.

In 2021, OCH released a [care coordination video](#), highlighting local innovations and lived experience to showcase the importance of community-based care coordination. Additionally, in 2022, OCH contracted with the Washington State Department of Health to serve as the regional hub for Care Connect WA, a care coordination model to support isolation and quarantine for COVID-19. OCH has become more directly engaged in community-based care coordination, building a network of key partners first through Care Connect WA and through Regional Care Coordinator Convenings: [June 2023 summary](#), [March 2023 summary](#), and [September 2022 summary](#). There are further opportunities for OCH to establish a community-based care coordination hub under HCA’s renewal waiver, which is expected to launch in 2024.

Equity

Equity is at the heart and foundation of OCH’s approach to health transformation. OCH defines equity as the state in which everyone has a fair and just opportunity to attain their full potential. Building upon one of the initial goals of MTP, “promoting health equity”, OCH embedded opportunities to learn more about equity into annual workplans, resources, and convenings. For example, the OCH Board of Directors participated in a several equity trainings, OCH sponsored 18 local partners in a trauma-informed care train-the-trainer program, OCH convened partners on the topic of equitable vaccine distribution, and partner equity work is highlighted through OCH communication channels. OCH staff, Board of Directors,

and partners are dedicated to this important work. Equity will continue to be a lens through which OCH prioritizes work, funding, and other efforts.

Conclusion

OCH looks forward to continuing to support the region through collaborative health transformation. The experience of implementing MTP in the Olympic region has equipped OCH with an array of successes, lessons learned, resources, and an incredibly dedicated network of local partners. OCH will build upon this important work in years to come, continuing to tackle health issues no single sector or tribe can tackle alone. We are truly stronger together. **Stay connected with OCH by visiting olympicch.org.**

Acronyms

- ACH: Accountable Community of Health
- CBOSS: Community-based organizations and social services
- CMS: Centers for Medicare and Medicaid Services
- DOH: Department of Health
- HCA: Health Care Authority
- IMC: Integrated Managed Care
- MTP: Medicaid Transformation Project
- OCH: Olympic Community of Health
- PPE: Personal protective equipment
- 3C: Clallam Care Connection
- 3CCORP: Three-County Coordinated Opioid Response Project
- VBP: Value-based purchasing or Value-based payments

Appendix A: OCH Board of Directors & Governance Overview

The OCH Board of Directors was formed in 2015 while the organization was taking steps to formalize as a new non-profit entity. As the primary funder for the ACHs, HCA provided guidance and direction on the makeup of the original Board. The Board of Directors provided oversight and strategic direction around funding, the vision for implementing MTP, and they also set initial policies and hired key staff. The Board established several committees that reported to the Board. The current slate of Board members can be found on the [OCH Governance webpage](#).

Overview of the Board of Directors:

The Board is made up of three types of representatives: Health-serving sectors, Tribal nations, and At-large seats. Throughout MTP, the Board iterated and is currently made up of the following seats:

Health-serving sectors:

- Behavioral Health Administrative Services Organization
- Community Action Programs/Social service agencies
- Critical Access Hospitals
- Federally Qualified Health Centers
- Long-term care/Area Agencies on Aging/Home health
- Medicaid Managed Care organizations
- Mental health treatment providers
- Private/not-for-profit hospitals
- Public health
- Public hospitals
- Substance use disorder treatment providers

Sector-based seats on the OCH Board of Directors are inclusive of the entities representative of the full sector. Each sector nominates a primary and alternate representative, the full Board votes to approve the nominations, and those members regularly communicate and coordinate with other members of the sector. Prior to voting on Board action items, sectors caucus to determine how the sector will vote. Representatives of the sector vote on behalf of the sector.

Tribal nations:

- Hoh Tribe
- Jamestown S’Klallam Tribe
- Lower Elwha Klallam Tribe
- Makah Tribe
- Port Gamble S’Klallam Tribe
- Suquamish Tribe
- Quileute Tribe

Tribal nation seats on the OCH Board of Directors are appointed by the sovereign tribe and are not voted on or approved by the Board. Tribal partners may participate in Board meetings and other activities as they choose. Tribal partner representatives vote on behalf of the tribe they represent.

At-large representatives:

- At-large – Community (three Board seats)
- At-large – Medical/Clinical (one Board seat)

At-large Board members self-nominate and are voted on and approved by the full Board of Directors. They often represent a broad area of expertise and vote based on their knowledge, experience, and needs of the region.

The OCH Board of Directors is an engaged, collaborative, and motivated group with deep and varied lived experience and connections to the Olympic region. Current Board committees include an Executive Committee, a Finance Committee, and a Funds Flow Workgroup.

Appendix B: Domain 1- Health Systems & Community Capacity Building

This domain addressed the core health system capacities to be developed or enhanced to transition the delivery system under MTP. All three focus areas were required: financial sustainability through value-based purchasing (VBP), promote a health workforce, and leverage and expand systems for population health management. This appendix highlights some of the regional successes under these activities. [Visit OCH's blog for more successes.](#)

Financial sustainability through Value-Based Purchasing

Through MTP, HCA sought to transform the payment method for providers under Medicaid from fee-for-service (volume or number of patients a provider sees) to value-based payment (rewarding providers for the quality of health care and patient outcomes). Value-Based Payments (VBP) is a strategy used to ensure health plans and providers are accountable for providing high-quality, high-value care, as well as a satisfying patient experience.

Examples of regional successes:

- Molina Healthcare has several promising VBP pilots with alternative provider types in the Olympic region.
- Partners came together regularly throughout MTP to discuss the topic of VBP, highlighting regional challenges and potential solutions which were shared with HCA at the February 2023 OCH Board of Directors meeting. Possible solutions included:
 - Explore group contracting
 - Speed up data reconciliation process
 - Align metrics across different provider types
 - Build community-based organization capacity
 - Invest in interoperable data systems
 - Include additional provider types in VBP arrangements
 - Statewide workforce investments
 - Provide baseline funding for transformation efforts
- OCH supported regional VBP adoption efforts by:
 - Promoting HCA's annual VBP survey
 - Hosting convenings amongst regional providers to promote shared understanding and conversations to address regional concerns
 - Advocating for provider needs through COVID-19 directly with MCOs as well as HCA
 - Launching the VBP action group to continue action-oriented conversation to address regional challenges. **See the [Olympic Region Case Study](#).**



Promote a strong health workforce

Through MTP, HCA sought to promote a health workforce that supports comprehensive, coordinated, and timely access to care. A strong and vibrant workforce is key to the mission of OCH and that of local partners.

During COVID-19, OCH heard from health-serving partners about the challenges around workforce. The most significant challenges included recruiting and retaining workforce as well as contributing factors such as lack of housing, burnout, and competition.

Examples of regional successes:

- OCH published the, **“Strengthening the health-serving workforce”** report to elevate innovative approaches to recruit, engage, develop, and retain employees.
- OCH hosted a series of care coordinator convenings to promote networking, collaboration, and shared learning across the regional on-the ground health-serving workforce.
- OCH published the **Coffee Break video series** to promote relevant shared learning around local priorities across the local health-serving workforce.



Leverage and expand systems for population health management

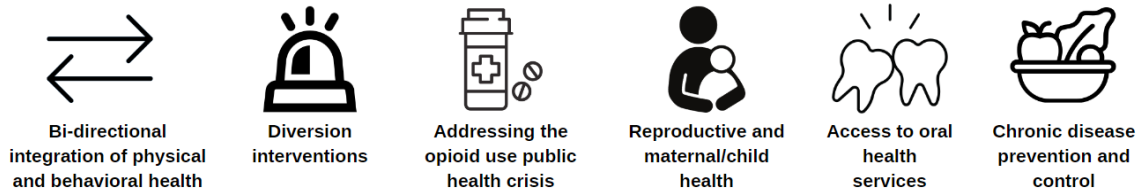
Through MTP, HCA sought to leverage and expand health information technology and health information exchange infrastructure and tools to capture, analyze, and share relevant data.

Examples of regional successes:

- Many partners expanded their organization or tribe’s population health management systems over the course of MTP. Population health management activities were built into implementation partner scopes of work under MTP and many partners report using MTP dollars to upgrade data systems to implement and improve population health management. For example, many partners improved electronic health record systems and created processes for screening for social needs.

Appendix C: Domain 2- Care Delivery Redesign

This domain focused on innovative models of care to improve quality, efficiency, and effectiveness. The OCH Board of Directors prioritized the selection of six projects from the available eight options provided.

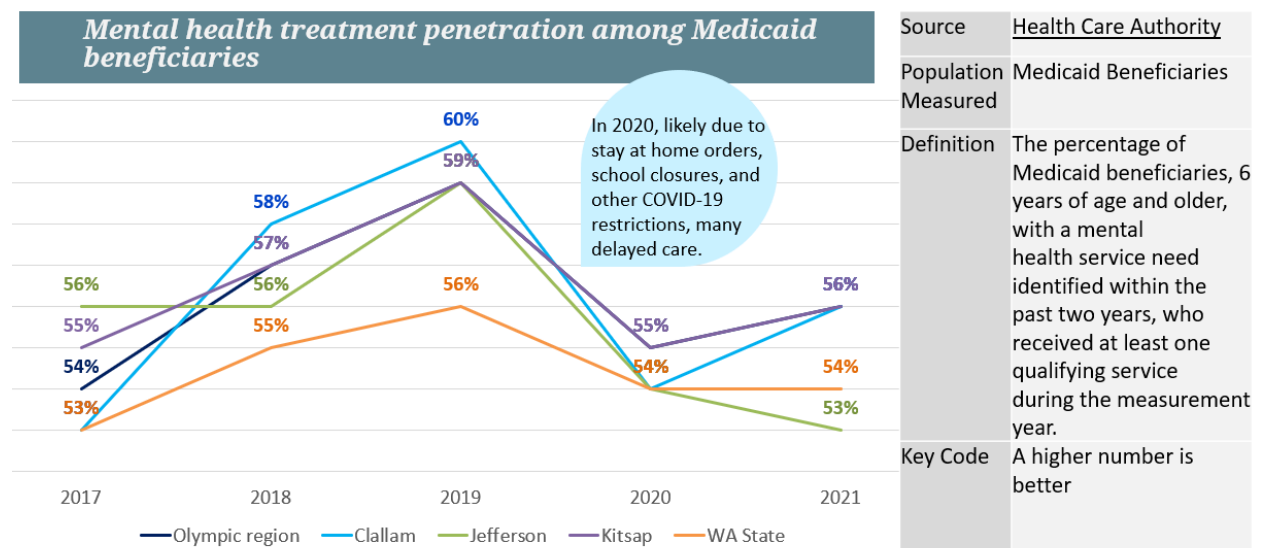


Note: Bi-directional integration of physical and behavioral health and addressing the opioid use public health crisis were required projects. Of the eight projects to choose from, OCH did not select “community-based care coordination” and “transitional care”.

This appendix provides more context for each of the six selected projects, explores some relevant regional data, and highlights some regional successes. This appendix is not comprehensive of all related data or regional work related to each project. Visit the [OCH blog](#) and [Connecting to Data](#) tool for more information and regional successes.

Project 2A: Bi-directional integration of physical and behavioral health through care transformation

This project aimed to better address physical and behavioral health needs through a collaborative network of providers. This project supported HCA’s initiative to unify the financing and delivery of physical and behavioral health services for Medicaid beneficiaries. Below is one of the relevant indicators OCH is tracking through the [Connecting to Data](#) tool as a part of OCH’s overall measurement plan.



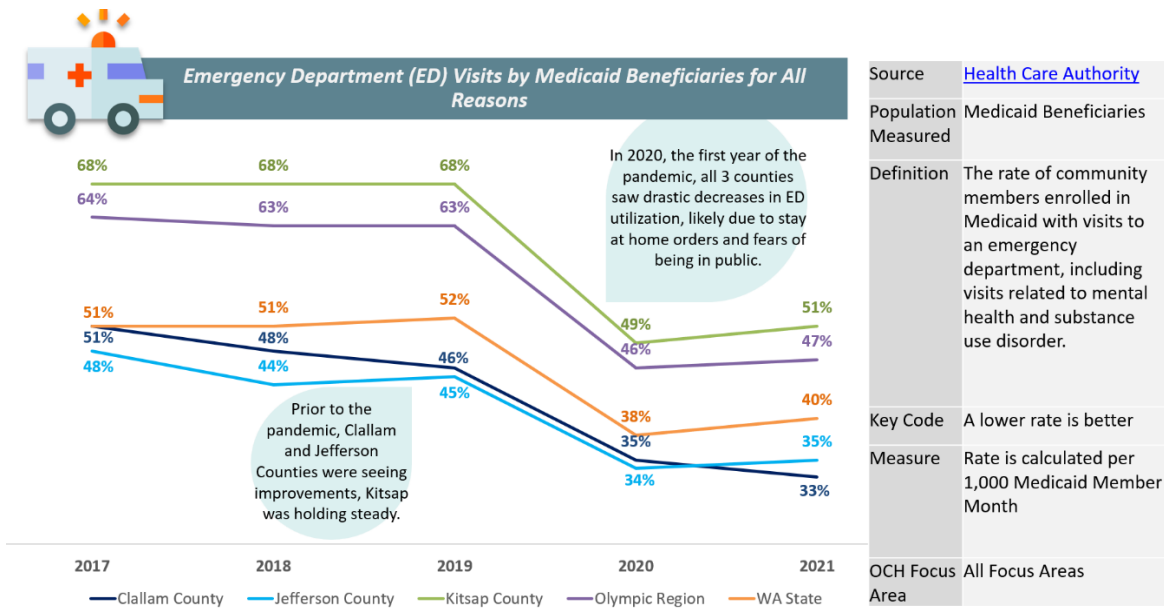
Examples of regional successes:

- **Integrated Pediatric Care - [Kitsap Children's Clinic](#)** contracted with Catholic Community Services to bring behavioral health care on-site, streamlining communication between providers and behavioral health specialists. Kitsap Children's Clinic shared, *"The partnership with Catholic Community Services has helped us grow and learn how to be a better medical home for our patients."*
- **Healing Clinic** - The [Jamestown Healing Clinic](#) is all about just that: healing. From its social navigator and medications for opiate use disorder, primary care, dental, and behavioral health services to finer details like its Native American architecture and art, the clinic provides sustained recovery for those struggling with addiction.
- **Integrated Managed Care Forum** - OCH hosted a forum in December of 2019 for partners in Clallam County to assist in the transition to Integrated Managed Care. This event brought together Clallam and statewide partners for discussion and problem solving.
- **Olympic Region Behavioral Health Report**
OCH published the [2021 Behavioral Health report](#). This report is a step towards better understanding the health within the region and advocating for opportunities to prioritize behavioral health.
- **Peninsula Behavioral Health and Kitsap Mental Health Services received funds from Substance Abuse and Mental Health Services Administration to become certified community behavioral health clinics**, a model designed to ensure access to coordinated behavioral health care. CCBHCs must provide care coordination to help people navigate behavioral health care, physical health care, social services, and the other systems they are involved in.



Project 2D: Diversion interventions

This project aimed to keep people out of the emergency department and jails; reducing the cost of emergency services and incarceration, and more importantly, meeting people where they are at so they can thrive in the community. Below is one of the relevant indicators OCH is tracking through the [Connecting to Data](#) tool as a part of OCH's overall measurement plan.



Examples of regional successes:

- 50% reduction in emergency department revisits** - Overuse of emergency care is a challenge for many hospitals, and the staff at [Forks Community Hospital](#) set out to do something about it. Once it was discovered that patients were not seeking follow-up care following a visit to the emergency department, the hospital designed a public information campaign to ensure community members knew how to access local clinics. Forks Community Hospital has seen a 50% reduction in return visits to the emergency department within 72 hours.
- Re-integrating with the community after jail** - Peninsula Behavioral Health created a thorough guide to help reintegrate community members upon release from jail into the Port Angeles, Sequim, or Forks communities. There are many important steps an individual must take once they have been released including where to go for housing, starting or restarting government benefits, and finding other resources to ensure basic needs are met.
- Community-based care coordination in action** - At an OCH convening on the topic of community-based care coordination, Clallam Care Connection (3C) shared how they provide coordinated care to improve the health status of individuals with complex, chronic conditions to deliver a seamless experience of care that is person-centered, cost-effective, and addresses the determinants of health. During the initial pilot period, 3C saw a 90% decline in 911 calls among eight community members who graduated from the 3C program. 3C has seen cost savings of over \$100,000 by preventing 67 emergency calls and medic unit rollouts.



- **Criminal justice and first responder panel** - At the 2019 Opioid Response Project Summit, OCH hosted a criminal justice and first responder panel.

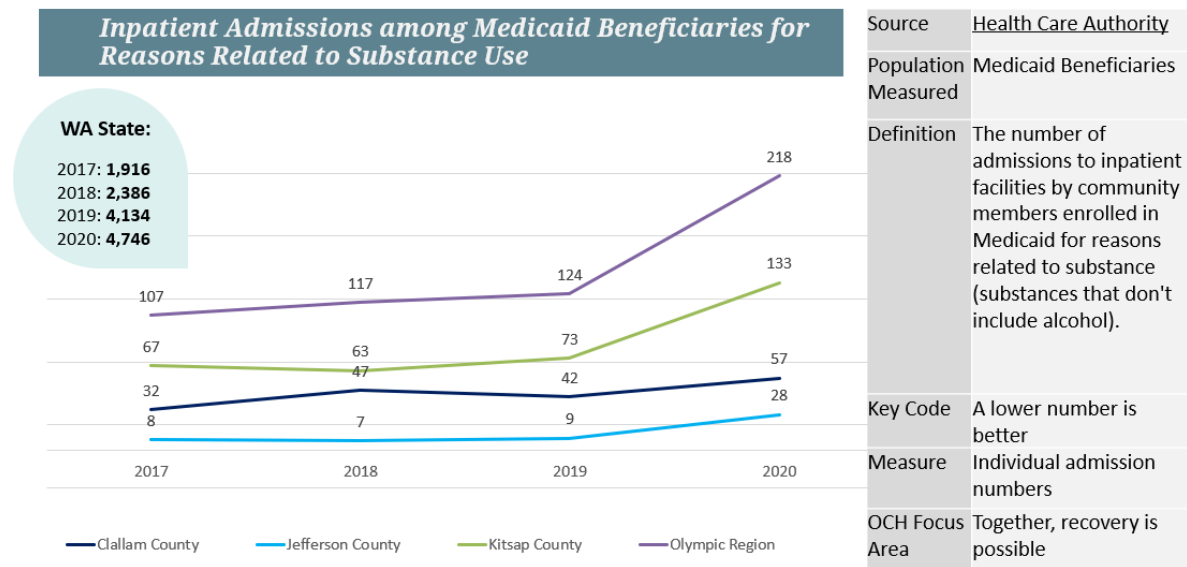
The discussion included perspectives from:

- Port Angeles Police Department
- Jefferson County Sherriff's Department
- Clallam County Sherriff's Department
- East Jefferson Fire Department
- Port Gamble S'Klallam Tribe Police Department
- REDisCOVERY
- Port Angeles Fire Department



Project 3A: Addressing the opioid use public health crisis (required)

The aim of this project was to support the achievement of the state's goals to reduce opioid-related death and disability through prevention, treatment, and recovery supports. Below is one of the relevant indicators OCH is tracking through the [Connecting to Data](#) tool as a part of OCH's overall measurement plan.



Examples of regional successes:

- Six Building Blocks** - OCH was the first region to partner with the Six Building Blocks team. [Jamestown Family Health Clinic and Northwest Family Medicine Residency](#) completed the program, a process aimed at improving clinic management of patients who are on long-term opioid therapy. The Six Building Blocks helped them implement tangible approaches to increase their understanding of the patient population with long-term opioid therapy. *"The entire staff was actively engaged and had the opportunity to have a role within [the Six Building Blocks program]."* – Jamestown Family Health Clinic
- A community-minded approach to care**
[Reflections Counseling](#) has built relationships with Medication Assisted Treatment prescribers. *"We have established a relationship with the three primary prescribers in our community [...] to include changes in our curriculum and service delivery as the needs of the different prescribers have been presented to us."* – Reflections Counseling
- Collaborating on the West End** - [West End Outreach Services](#) meets regularly with the [Bogachiel and Clallam Bay Clinics](#) to increase patient centered care. A provider at Bogachiel Clinic now prescribes Suboxone and works closely with West End Outreach Services.

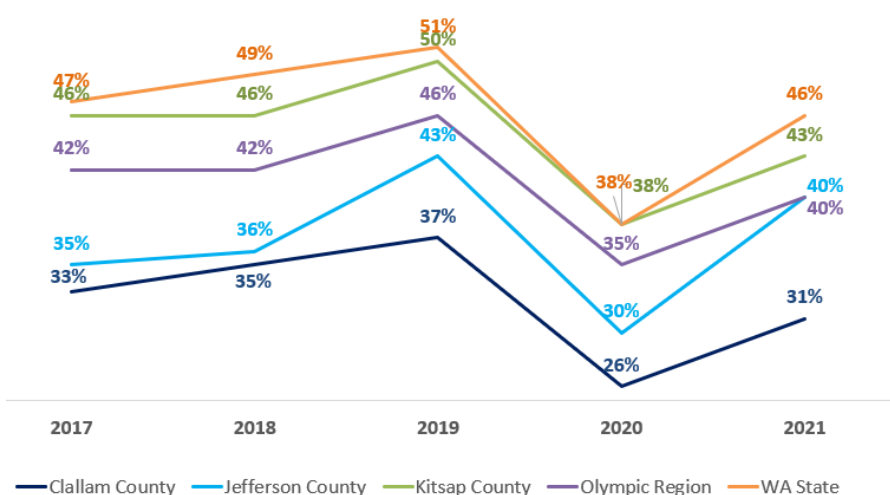
- Three-County Coordinated Opioid Response Project (3CCORP)** - 3CCORP began as an opportunity for OCH to collaboratively address a shared issue, building partnerships across medical professionals, law enforcement, fire department, public health officers, tribes, state, and local leaders. Opioid Response Summits were held in 2017, 2018, and 2019 to educate, collaborate, and inspire. Various successes include:
 - 3CCORP was noted as a leader in statewide opioid work for developing regional partnerships to improve health.
 - 3CCORP developed regional standards of care, launched a regional Hub and Spoke model, increased opioid treatment programs, and implemented secure medication return region wide.
 - 3CCORP data overview from the 2019 summit showed that opioid prescribing and opioid overdose deaths decreased compared to when the group was first coming together.
 - 3CCORP brought together the two components of Medication Assisted Treatment, or MAT, prescribing providers, and SUD treatment providers to create shared language and understanding across the region.
- Addressing stigma of substance use disorders – In 2021, Cambia Health Solutions partnered with each ACH to address rural behavioral health needs. OCH received a \$245,000 donation from Cambia Health Solutions which was used to better understand and address stigma of substance use disorders in the Olympic region, a need expressed by OCH partners. OCH implemented a multi-pronged approach to disseminate the stigma findings including expansive sharing of the information through the stigma “roadshow”, a series of regional presentations, publishing eight recovery hero blog posts, and uplifting the work in two [coffee break videos](#) addressing stigma. [See *Becoming a Recovery Friendly Region Report* for a full summary of this work.](#)



Project 3B: Reproductive and maternal/child health

This project aimed to ensure that communities within the Olympic region have access to high quality reproductive health care throughout their lives and promoted the health and safety of children. Below is one of the relevant indicators OCH is tracking through the [Connecting to Data](#) tool as a part of OCH’s overall measurement plan

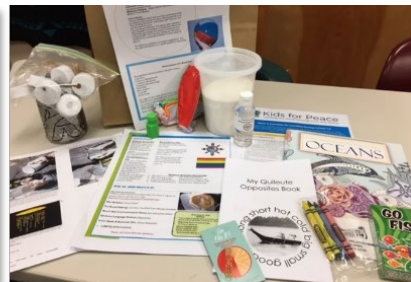
Child & Adolescents in the Olympic Region who had at Least One Well-Care Visit



Source	Health Care Authority
Population Measured	Medicaid Beneficiaries ages 3-21
Definition	The percentage of community members enrolled in Medicaid, ages 3 - 21, who had at least one well-care visit during the measurement year.
Key Code	A higher percentage is better

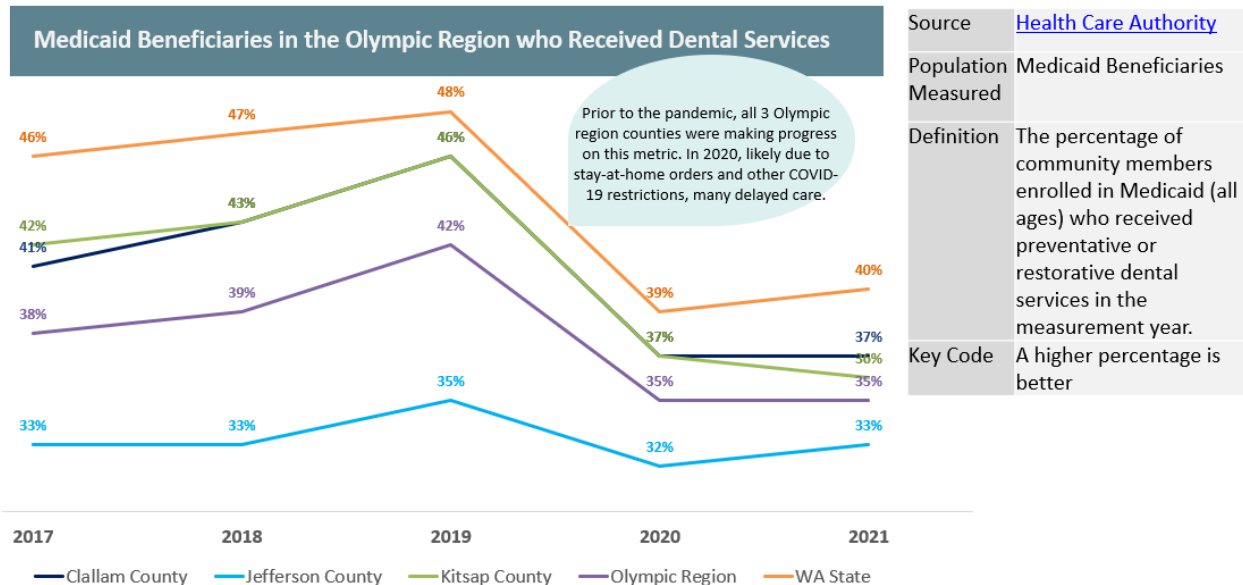
Examples of regional successes:

- Youth flu shot clinic** - Every fall, Kitsap Children's Clinic holds a large flu clinic for their patients. Community members look forward to this event as KCC provides a convenient and friendly opportunity for youth flu shots.
- Community baby shower** - The Clallam-Jefferson County Perinatal Mental Health Task Force, chaired by First Step Family Support Center hosted community connection baby showers in both 2022 and 2023. The events brought together a wide range of community members, and connected them with local providers, resources, and other parents to support overall family health and well-being.
- Stay Strong, Olympic Region** - OCH implemented a region-wide community education campaign encouraging community members (especially youth) to get their flu shot. The campaign featured social media posts, flyers, and a toolkit for partners to use (both English and Spanish). Campaign materials reached over 13,000 community members.



Project 3C: Access to oral health services

This project facilitated integration of dental health care with primary care, behavioral health care, and substance use disorder treatment. Below is one of the relevant indicators OCH is tracking through the [Connecting to Data](#) tool as a part of OCH's overall measurement plan.



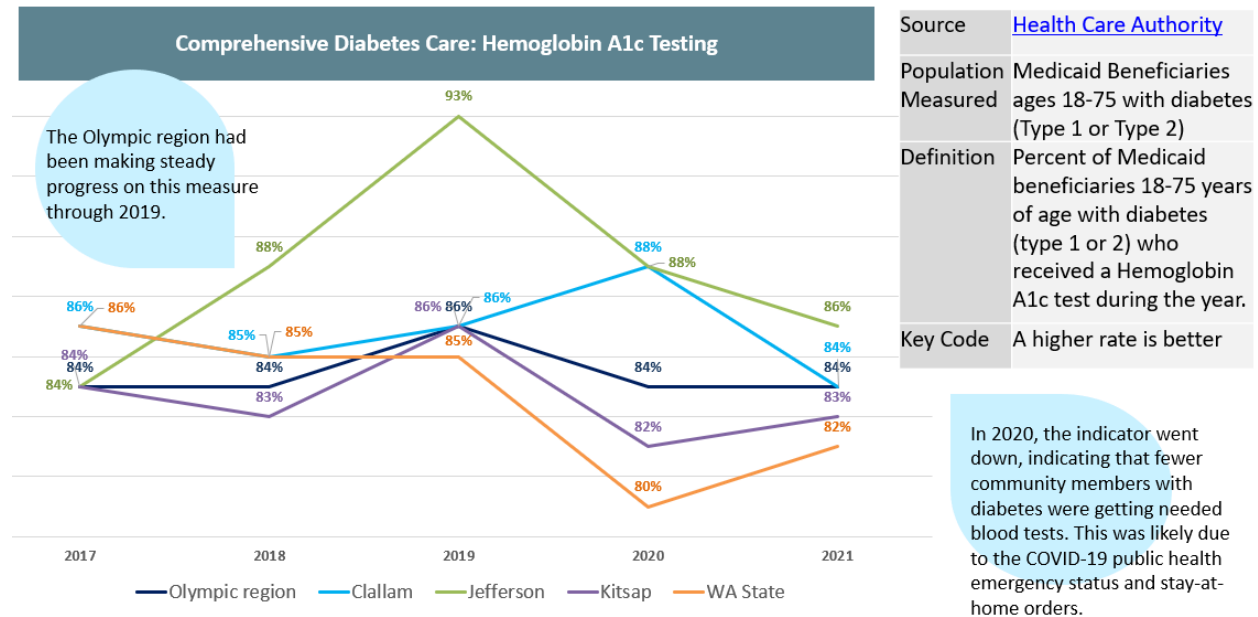
Examples of regional successes:

- **New dental chairs** - 30 new dental chairs were added across the Olympic region. Before MTP, there were no adult Medicaid dental chairs in Clallam or Jefferson Counties. Key partners in this work were Jefferson Healthcare, North Olympic Healthcare Network, and Peninsula Community Health Services.
- **Mobile dental unit** - Peninsula Community Health Services launched a mobile dental clinic extending services to patients who experience barriers to accessing dental services. The clinic has top-of-the-line dental equipment (including xray technology and electronic records) and is wheelchair accessible.
- **Wellness Center** - The Port Gamble S'Klallam Tribe opened a new wellness center that is now home to physical health, behavioral health, and dentistry services. The dental services include six stations and a private operator suite. **"Now we can bring providers to the patient instead of patients going to the providers, and it really helps kind of close that gap."**
– Jolene Sullivan, Port Gamble S'Klallam Tribe



Project 3D: Chronic disease prevention and control

This project aimed to prevent chronic disease and improve chronic disease management. Below is one of the relevant indicators OCH is tracking through the [Connecting to Data](#) tool as a part of OCH's overall measurement plan.



Examples of regional successes:

- Diabetes Prevention Program** - The YMCA of Pierce and Kitsap Counties and Rainier Health Network partnered to improve referral systems to YMCA's Diabetes Prevention Program including referrals to the program as well as closing the loop back with referring providers.
- Self-management Programs** - Olympic Area Agency on Aging in partnership with Olympic Community Action Programs partnered with primary care providers to offer chronic disease self-management programs on-site at North Olympic Healthcare Network, Olympic Medical Center, and Jamestown Family Health Clinic.
- Elevating local successes** - OCH spotlights innovative partner successes to spread awareness, plant seeds for expansion, and celebrate partner work. Some partner spotlights include [Clinic to Kitchen](#), a partnership between North Olympic Healthcare Network, First Step Family Support Center, WSU Extension, and Molina Healthcare; [Little Free Pantries](#), highlighting Clallam County's little free pantry program, launched in 2019 through partnership with Compassion Clallam, WSU Extension, and local partners.



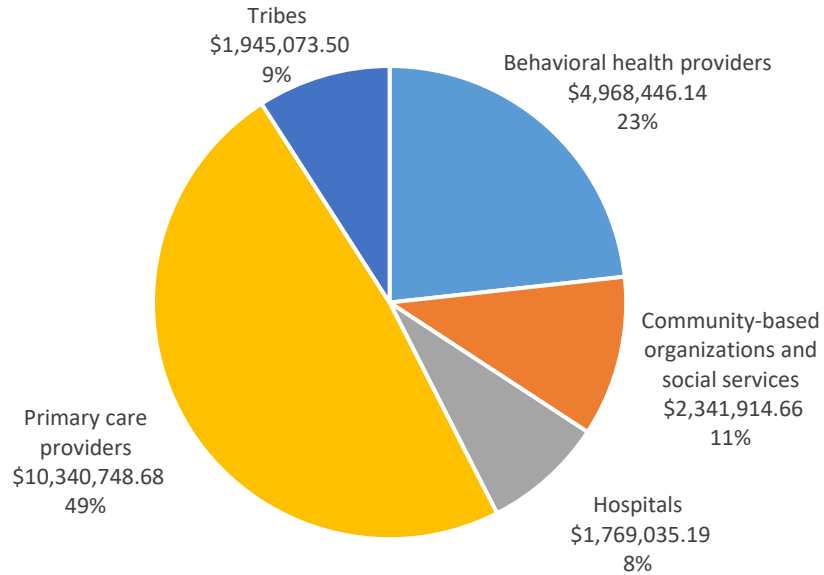
Appendix D: Summary of MTP Partner Payments (through 2022)

Partner	Partner type	County	Implementation partner change plans (2018-2023)		Expand the table funding opportunity (2023)		COVID-19 relief funds (2020 and 2021)			
			MIP funds		MIP funds	Cambria funds*		Total		
Answers Counseling	CBOSS	Kitsap	\$	231,747.39			\$	22,700.00	\$	254,447.39
Beacon of Hope, Safe Harbor Recovery	Behavioral health	Jefferson	\$	727,818.48					\$	727,818.48
Believe in Recovery	Behavioral health	Jefferson			\$	7,000.00	\$	29,000.00		36,000.00
Bogachiel and Clallam Bay Primary Care Clinics	Primary care	Clallam	\$	370,903.44					\$	370,903.44
City of Pousoy	CBOSS	Kitsap			\$	9,000.00	\$	6,000.00		15,000.00
Clallam County Health & Human Services	CBOSS	Clallam			\$	7,000.00	\$	28,000.00	\$	135,000.00
Discovery Behavioral Health	Behavioral health	Jefferson	\$	533,885.44					\$	568,885.44
Eagle's Wings	CBOSS	Kitsap			\$	10,000.00	\$	75,000.00		35,000.00
First Step Family Support Center	CBOSS	Clallam	\$	219,457.07			\$	95,000.00		314,457.07
Forks Community Hospital	Hospital	Clallam	\$	494,453.17					\$	494,453.17
Harrison Health Partners Primary Care Clinics	Primary care	Kitsap	\$	810,744.84					\$	810,744.84
Harrison Medical Center	Hospital	Kitsap	\$	380,194.27					\$	380,194.27
Illoh Tribe	Tribal	Jefferson						\$		20,000.00
Jamestown S'Klallam Tribe	Tribal (Behavioral health)	Clallam	\$	49,260.72					\$	20,000.00
Jamestown S'Klallam Tribe	Tribal (Primary care)	Clallam	\$	527,167.69					\$	547,167.69
Jefferson County Public Health	CBOSS	Jefferson							\$	60,000.00
Jefferson Healthcare	Behavioral health	Jefferson	\$	76,512.59					\$	76,512.59
Jefferson Healthcare	Hospital	Jefferson	\$	496,887.76					\$	496,887.76
Jefferson Healthcare	Primary care	Jefferson	\$	1,903,161.64					\$	1,903,161.64
Kitsap Children's Clinic	Primary care	Kitsap	\$	1,051,932.90			\$	20,000.00		1,071,932.90
Kitsap Division of Aging & Long-Term Care	CBOSS	Kitsap	\$	25,000.00					\$	25,000.00
Kitsap Medical Group	Behavioral health	Kitsap	\$	113,987.53					\$	113,987.53
Kitsap Medical Group	Primary care	Kitsap	\$	646,163.69					\$	646,163.69
Kitsap Mental Health Services	Behavioral health	Kitsap	\$	1,364,787.89			\$	60,000.00		1,364,787.89
Kitsap Public Health District	CBOSS	Kitsap	\$	247,940.22			\$	317,940.22		317,940.22
Kitsap Recovery Center	Behavioral health	Kitsap	\$	467,953.20					\$	467,953.20
North Olympic Healthcare Network	Behavioral health	Clallam	\$	144,498.08					\$	144,498.08
North Olympic Healthcare Network	Primary care	Clallam	\$	704,165.57					\$	704,165.57
Northwest Washington Family Medical Residency	Primary care	Kitsap	\$	632,710.44					\$	632,710.44
Olympic Area Agency on Aging	CBOSS	Clallam & Jefferson	\$	266,592.58					\$	266,592.58
Olympic Community Act on Programs	CBOSS	Clallam & Jefferson	\$	297,252.81					\$	297,252.81
Olympic Medical Center	Hospital	Clallam	\$	397,500.00					\$	397,500.00
Olympic Medical Center	Primary care	Clallam	\$	1,211,701.64					\$	1,211,701.64
Olympic Peninsula Community Clinic	Primary care	Clallam	\$	255,356.47	\$	13,000.00	\$	22,000.00		35,000.00
Olympic Peninsula Healthy Community Coalition	CBOSS	Clallam	\$				\$	15,000.00		270,356.47
Olympic Personal Growth	Behavioral health	Clallam	\$	146,843.84					\$	146,843.84
Peninsula Behavioral Health	Behavioral health	Clallam	\$	592,335.80					\$	592,335.80
Peninsula Community Health Services	Primary care	Kitsap	\$	2,795,164.50			\$	125,000.00		2,920,164.50
Peninsula Community Health Services	Behavioral health	Kitsap	\$	422,623.18					\$	422,623.18
Port Angeles Fire Department	CBOSS	Clallam			\$	35,000.00				35,000.00
Port Gamble S'Klallam Tribe	Tribal (Primary care)	Kitsap	\$	484,448.93			\$	40,000.00		524,448.93
Port Gamble S'Klallam Tribe	Tribal (Behavioral health)	Kitsap	\$	212,078.75					\$	212,078.75
Quileute Tribe	Tribal	Clallam						\$		25,000.00
Franciscan Northwest Physicians Health Network	Primary care	Kitsap			\$	32,000.00	\$	3,000.00		35,000.00
Reflections Counseling Services Group	Behavioral health	Clallam	\$	211,892.97					\$	211,892.97
Sequim Food Bank	CBOSS	Clallam			\$	25,000.00				25,000.00
Serenity House	CBOSS	Clallam			\$	35,000.00				35,000.00
Makah Tribe	Tribal (Behavioral health)	Clallam	\$	69,910.49					\$	69,910.49
Makah Tribe	Tribal (Primary care)	Clallam	\$	363,211.91			\$	94,000.00		457,211.91
Squamish Tribe	Tribal	Kitsap						\$		40,000.00
United Way of Clallam County	CBOSS	Clallam			\$	32,000.00				35,000.00
West End Outreach Services	Behavioral health	Clallam	\$	245,252.19					\$	245,252.19
West Sound Treatment Center	Behavioral health	Kitsap	\$	340,054.85					\$	355,054.85
YMCA (Pierce & Kitsap Counties)	CBOSS	Kitsap	\$	225,868.12			\$	15,000.00		240,868.12
Total payments			\$	20,187,518.18	\$	205,000.00	\$	116,000.00	\$	21,365,218.18
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
										\$
			</							

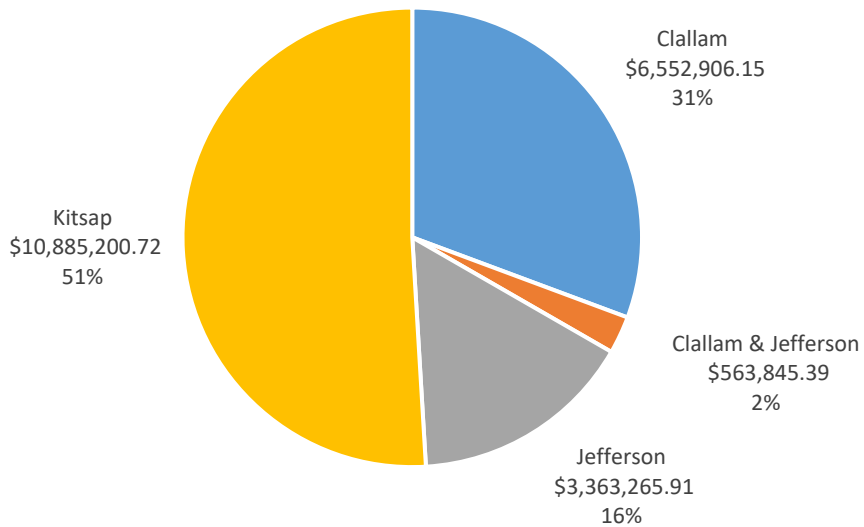
*Combio funds are not included in total money earned through iMTP.

Appendix E: Continued Summary of MTP Partner Payments (through 2022)

MTP payments in the Olympic region by partner-type



MTP payments in the Olympic region by county



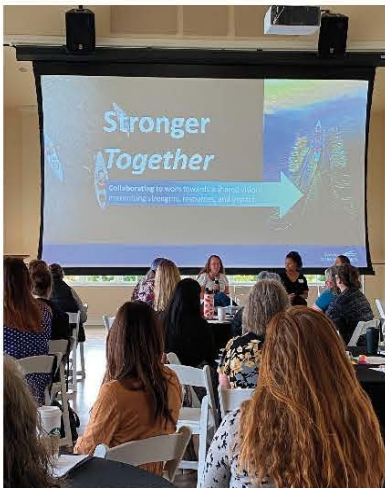
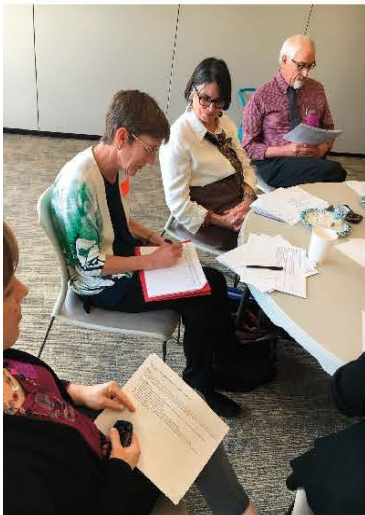
Appendix F: OCH Network Partners

Partner	County
Agape Unlimited	Kitsap
American Indian Health Commission	Statewide
Amerigroup	Statewide
Answers Counseling*	Kitsap
Best Dental Help	Kitsap
Bogachiel and Clallam Bay Clinics*	Clallam
CHI Franciscan Medical Group*	Clallam & Kitsap
Clallam County	Clallam
Clallam Health and Human Services	Clallam
Clallam Resilience Project	Clallam
Community Health Plan of WA	Statewide
Coordinated Care	Statewide
Discovery Behavioral Healthcare (Beacon of Hope)*	Jefferson
First Step Family Support Center*	Clallam & Jefferson
Forks Community Hospital*	Clallam
Hoh Tribe	Jefferson
Jamestown Family Health Clinic*	Clallam
Jefferson Behavioral Health Consortium	Jefferson
Jefferson County	Jefferson
Jefferson Healthcare*	Jefferson
Jefferson County Public Health	Jefferson
Kitsap Children's Clinic*	Kitsap
Kitsap County	Kitsap
Kitsap County Human Services	Kitsap
Kitsap Medical Group*	Kitsap
Kitsap Mental Health Services*	Kitsap
Kitsap Public Health District*	Kitsap
Kitsap Recovery Center*	Kitsap
Kitsap Strong	Kitsap
Lower Elwha Klallam Tribe	Clallam
Molina Healthcare	Statewide
North Olympic Healthcare Network*	Clallam
Northwest Washington Family Medical Residency*	Kitsap
Olympic Educational Service District	Region
Olympic Area Agency on Aging*	Clallam & Jefferson
Olympic Community Action Programs*	Clallam & Jefferson
Olympic Medical Center*	Clallam
Olympic Peninsula Community Clinic	Clallam
Olympic Peninsula Healthy Community Coalition*	Clallam
Olympic Personal Growth*	Clallam
Peninsula Behavioral Health*	Clallam

Peninsula Community Health Services*
 Port Angeles Fire Department
 Port Gamble S’Klallam Tribe*
 Quileute Tribe
 Recovery Café Jefferson County
 Reflections Counseling Services*
 Salish Behavioral Health Administrative Services Organization
 Sophie Trettevick Indian Health Center*
 St. Michael Medical Center*
 Suquamish Wellness Center
 United Healthcare
 West End Outreach Services*
 West Sound Treatment Center*
 YMCA of Pierce and Kitsap Counties*

Kitsap
Clallam
Kitsap
Clallam
Jefferson
Clallam
Region
Clallam
Kitsap
Kitsap
Statewide
Clallam
Kitsap
Kitsap

* Medicaid Transformation Project (MTP) Implementation Partner – those partners who held a contract with OCH to receive incentive dollars to support activities and projects under MTP.





Clallam | Jefferson | Kitsap
olympicch.org