

## CHAC Minutes November 10, 2017

Stephanie Allred (Axis), Margaret Martin (Indivisible Durango), Bob Cox (CHAC & ACP), Scott Wallace (CHAC Board & CORHIO), Guinn Gunger (Indivisible Durango), Eileen Wasserbach (CHAC Board & SUCAP), Mary Frey (Regional Health Connector, AHEC), Elsa Inman (MRMC), Jean Villeneuve (Family Center), Dave Rich (Senior Outdoors), Lynn Westberg (CHAC Board), Vic Lopez (CHAC Board), Barb Cannon (VITA), Stuart Jenkins (Sen. Bennet's office)

### CHAC Announcements:

1. Members are encouraged to pay tax deductible 2018 membership dues prior to year's end.
2. The CHAC annual meeting will be two hours on **January 12 (8:30 – 10:30am)**. Decisions about what existing efforts need to be supported and what needs are currently unmet and/or under addressed will be discussed. Health Hero nominations are open until Dec. 22; information about nominees will be sent to CHAC participants in early January with voting at the Annual Meeting on Jan. 12; the announcement of the honoree will be made at the Feb. 9 CHAC meeting.
3. CHAC meetings in January, February and March will begin at 8:30am instead of 8:00 due to room availability, but still be 1 ½ hours. Meeting start time beginning in April TBD i.e. 8:00 vs. 8:30am after getting input from more of CHAC. At this meeting, six voted for 8:00 and six for 8:30.

### ACP Update:

The ACP initiative to date has “touched” 942 adults since late Jan., exceeding the goal of 500 for the year, and taking us well on the way toward the 2 year goal of 1150. La Plata County primary care providers are scheduled to receive a presentation soon about how the project can support and assist their patients. Save the date of **Feb. 15 beginning 5:30pm** for a free community education event at the Durango library; details will follow.

Presentation: Regional Health Connector - Mary Dengler-Frey: (see Powerpoint with these notes)

Mary is the Regional Health Connector (RHC) for the five counties of Region 9. However, her focus is primarily in Montezuma and Dolores counties. The project is based on the belief that “connected systems will lead to healthier lives for all Coloradoans.” It started with CU Department of Family Medicine and currently functions under the auspices of Colorado Health Institute (CHI). There are 21 RHCs in the state. In its beginning phase, work has focused on building and connecting partnerships.

The three priority projects are:

1. Suicide Prevention: Activities include a community summit soon in Cortez, stakeholders meetings, a resilient youth event, and community trainings.
2. Diabetes Reduction: This focuses on the Southern Ute and Mountain Ute tribes who have a much higher rate of diabetes than the general population. Activities include training in Motivational Interviewing (M.I.) for providers (Elsa and Myoung said that MRMC has M.I.

resources also), and “Food prescriptions”, which will provide free food for children and families identified as food insecure (working with Pediatric Partners and Mountain Middle School).

3. Opioid Abuse Reduction: Activities include promotion of a prescription drug monitoring program, trainings for providers and the community through an Americorps volunteer for the region, and work with the Colorado Consortium for Prescription Drug Abuse Prevention (electronic monitoring done with providers).

The long term project goal is to connect clinical care, public health, human services and community organizations with success measured by outcomes rather than fee-for-services provided. Efforts will work for long term sustainability with evaluation to be done through CHI.

#### Advocacy Issues:

Guinn: There will be a rally in Durango for universal health care on 12/12 at noon. The effect of the proposed new tax structure on health care is still unknown. Indivisible Durango has a sub-committee on “Taxes and Your Money” open to anyone interested. Margaret will send Indivisible Durango contact information to go into the CHAC Connection. Next month’s CHAC presentation by Guinn Unger will be “Obamacare, Trumpcare & Healthcare: Facts and Fiction”.

Stuart: Senator Bennet is supporting two health bills, one to provide a Medicare type option to rural communities which have a shortage of insurance options and high cost care, and another to increase the child tax credit beyond what is currently proposed in the current budget.

#### Updates:

Elsa: The Hospital Transformation Program (HTP) is a Medicaid waiver program that is very outcome driven (based on national health care standards). The State Dept. of Health Care Policy and Financing (HCPF) is interested in this federal effort; MRMC is having discussions about it. It is not new money, but aligns with the payment for performance (not fee-for-service) structure.

Stephanie: Payment structure for mental health services is also in flux with recent expansion of the region to include the entire western slope and Larimer County. Rocky Mountain Health Plans (now owned by for-profit United Health Care) will oversee individual Medicaid with providers such as AXIS. Payment will still be on a capitated basis which is a challenge for AXIS as the only center that provides integrated care that incorporates fee-for-service medical care and mental health services based on a capitation contract.

“Eggs and Issues” presentation through the Chamber on December 6<sup>th</sup> will focus on health care.

Dave: Given the inherent danger of falls, particularly among those with balance challenges, members are encouraged to consider safe levels of hiking for themselves and others.

Notes by Lynn Westberg with minor additions by pattie adler