



**HealthLink Miami Valley
Management Team Meeting**

September 3, 2002
9:30 — 10:30 AM
Kettering Center

MINUTES

1. Introductions:

Attending: Rudy Arnold, Carla Clasen, Kim Conner, Mary Crimmins, Art Pickoff, Becky Valekis, Allyson Sepp

Absent: Bill Bines, Kate Cauley, Janet Grant, Bob Mullins, Marilyn Rodney, and Richard Schuster

2. Review Meeting Roles

Facilitator: Carla Clasen

Notetaker: Allyson Sepp

3. Review Meeting Agenda

4. Work Through Agenda

A. HL Network Agenda Item Review/Additions

- Site visit by Brenda Tucker-Jeffreys
- Summary of the Advisory Council meeting

B. Task Force Issues to be addressed by HL Network

1. General Issues

- HMA meeting August 27: This meeting took place at GDAHA; representatives from area hospitals, GDAHA, and the county were present. HealthLink now has a contract with HMA. The fee (\$35,000) is for consultation to develop a program which would increase federal Medicaid match for Montgomery County. Michigan is one of the states successfully pursuing this option. State level Medicaid cooperation is necessary to implement these programs.
- Carla informed the group that Brenda Tucker-Jeffries--the regional officer for HRSA would be doing a site visit before the end of September. The exact date and time will be announced at a later time.
- Ohio CAP grantee meeting — October 30, 2002: Marilyn is arranging this meeting. It will be held at the Kettering Center from 10am to 3pm. Everyone was encouraged to attend.
- New parking regulations for Kettering Center: Effective September 16, 2002 parking in the Kettering Center parking lot will require a WSU parking pass. Visitors to the Center for Healthy Communities will not be required to pay for parking. The details of how visitors will obtain a pass are presently being discussed.

2. Specific Issues

- Outreach: Kim distributed a portal report for August 1st through the 20th. Just over half of the individuals who filled out the questionnaire reported that they had no health insurance. From the portal questionnaire, 58% indicated that they had children in the household,

and 30% of those individuals with children reported that their children had no health insurance. Further, 31% of those who answered the Asthma question (n=170) reported that their children had symptoms of asthma. Jack said that this is very similar to the national average for children living in an urban setting. Also, 52% of those filling out the questionnaire requested more information from a community health advocate. Kim explained that our present numbers for Medicaid (HS/HF) approved, denied and pending are not fully accurate, but that the database is still under development, and will soon reflect the full extent of the outreach effort.

- Advisory Council: Over 20 people were present at the meeting representing 16 different agencies. The current MIS audit was discussed. Kathleen Shanahan from the Shelter Policy Board presented Service Point software being used by agencies that work with the homeless. This software will allow the agencies involved to perform an unduplicated count of individuals that they serve. The States of Massachusetts and Wisconsin are using this software, statewide. Presently, there are approximately 114 individuals representing 75 agencies on the Advisory Council.
- MIS:
 - Audit report : The MIS audit continues. CareSource and Children s Services Board are participating. The level of sophistication is much greater than anticipated. Most of the agencies are using a SQL-based system. This is the same type of system that will be used for the HealthLink database.
 - Rudy updated the team on the status of the system used in Georgia hospitals. The State of Georgia is charging over \$100,000 for their program. It has been decided that Georgia s system will not be used.
 - Regarding HIPAA regulations: the privacy rules have changed once again, and it was suggested an HLMV HIPAA task force be formed to move forward with necessary agreements between participating organizations.
- Outcomes/Evaluation: Jack distributed the minutes for the August 28th meeting. The algorithm developed by NYU for classifying ER utilization was discussed at the meeting. An asthma-screening questionnaire produced by Dr. Shalini was passed out. The task force will continue to focus its attention on tracking the quality of care for children with asthma. Jack requested the participation of Outreach task force members in the upcoming meeting in order to coordinate efforts. The individuals who developed the Partners Questionnaire have now made a web-based version. The task force will decide which version to distribute for the next survey. The web-based questionnaire has fewer questions. Thus the issue is to decide if the ease of using the web-based version compensates for the data (about 50%) that will be lost for comparison purposes.
- Strategic Planning: The list of action items from the June 4th meeting has been narrowed down to three main objectives. Further details will be given at the October meeting.

C. Issues for HealthLink Network Review/Update

D. Process Issues

5. Future Agendas and Schedules

NEXT MEETING: September 17, 2002, 10:30AM - 12:30PM

6. Evaluation of the meeting

7. Adjournment