



**HealthLink Miami Valley
Management Team Meeting**

September 16, 2003
10:30 AM to 12:30 AM
Kettering Center

MINUTES

1. Introductions

Attending: Rudy Arnold (MVHIC), Kate Cauley (CHC/WSU), Carla Clasen (CHC), Susan Howard (WSU), Jack Pascoe (WSU), Marilyn Rodney (CHC/SCC)

2. Review Meeting Roles

Facilitator: Kate Cauley
Notetaker: Kate Cauley

3. Review Meeting Agenda

4. Work Through Agenda

A. Members updates:

B. General Issues

C. Task Force Issues to be address by HL Network

1. General Issues
2. Specific Issues

Members began reviewing the Year Three proposal articulating modifications to the timeline and/or concerns about proposed activities. Overall, the proposed work still seemed doable and the following conclusions were reached to be presented to the HLMV Network for their approval at the October 7 meeting:

- David should meet with the MIS Task Force regularly during Year Three as all will need to be fully informed on the progress and expansion of the HURDS.
- David should come to every other Network meeting so he can become more routinely integrated with the larger collaborative since he will be training end users in multiple agencies.
- David should get the Client Demographics form on ASAP, add SS# and explore additional information needed to allow for the two forms to populate an electronic Medicaid application.
- From the Program Performance Plan, Box #2 is an Outreach Task Force responsibility and Box #4 is an MIS Task Force responsibility. We need some kind of checklist of communications/contacts that members of each task force can use to determine the extent of interest/involvement from various agencies with using the HURDS system.
- Rudy expressed concern that promising to recruit an additional 21 portal agencies may be a bit ambitious for Year Three as he reviews this objective today.

- Rudy suggested that for Activity #1, box 2, we should start with two agencies and really focus on getting two functioning well. After that we can point to successful connections and get the other 18 up and running more quickly.
- Kate will forward the sample agreements to MIS Task Force, and we need to develop a standard agreement with additional clauses for more extensive data sharing.
- The Strategic Planning Committee needs to be re-configured and re-focused to include as members minimally, Janet Grant, Rudy Arnold, Kate Cauley, Bill Bines and/or the chief counsel or accountant from Combined Health District, Vern Erickson or appropriate GDAHA rep if hospitals are involved at all, Bill liames or his designee from MCJFS, and Tom Kelly or Franz Hoge from the County.
- Overall the HLMV Network meeting needs to be the primary meeting of the month, and the HLMV Management Team will meet as it has been just prior to the Network meeting.
- Beginning in November, the Management Team will not routinely meet the third Tuesday, but will move to an as needed status on that meeting, and work will shift to the Strategic Planning Task Force which will begin meeting twice at least monthly, and if we move forward with the supplemental Medicaid payment to the county, every two weeks to insure a timely roll out of the HLMV Health Plan.
- Advisory Council will meet twice annually and the face to face meeting will be used more routinely as an opportunity to report to the community about HLMV activities. Regular electronic communication will continue at least monthly to insure ongoing input from the broader coalition of health and human services providers not represented on the Network or through HLMV Task Force membership.
- Task Force Chairs all agreed to have finalized timelines and activities for the October 7 meeting to be submitted to the Outcomes and Evaluation Task Force so they can construct our final project management matrix for Year Three.

D. Issues for HealthLink Network Review/Update/Approval

- Information to be included at the Ohio CAP meeting related to HLMV should include the following:

9000 health uninsured have been identified and 40% have been enrolled in Medicaid or other health services for which they are eligible

There are 52 Portal Agencies

Our asthma and hypertension prevalence rates are within the state and national norms—a bit higher

Do an MIS demonstration of HURDS

Talk about the CMC data review for ER admits and

Talk about UHS pharmacy program and piloting this county wide.

E. Process Issues

5. Future Agendas and Schedules

NEXT MEETING: October 7, 2003, 9:30AM – 10:30AM

6. Evaluation of the meeting

7. Adjournment