BOARD OF DIRECTORS
MEETING
January 30, 2012

Health District Office Building
120 Bristlecone Drive, Fort Collins

MINUTES

BOARD MEMBERS PRESENT: Celeste Holder Kling, President
Bernard J. Birnbaum, MD, Vice President
Timothy S. O’Neill, Secretary
Steven J. Thorson, MD, Treasurer
Joe D. Hendrickson, Liaison to PVHS Board

STAFF PRESENT: Carol Plock, Executive Director
Bruce Cooper, M.D., Medical Director
Richard Cox, Communications Director
Rosie Duran, Medicaid/CHP+ Outreach Coordinator
Lorraine Haywood, Finance Director
Sue Hewitt, Evaluation Coordinator
John Newman, Medical Services Director
Chris Sheafor, Support Services Director
Nancy Stirling, Assistant to Executive Director
Lin Wilder, Community Impact Director

CALL TO ORDER; APPROVAL OF AGENDA
President Celeste Kling called the meeting to order at 6:23 p.m. Board Election Calendar item
was added to the “Board Discussion” section of the agenda.

MOTION: To approve the agenda as amended.
Motion/Seconded/Carried Unanimously

PUBLIC COMMENTS
None.

STAFF PRESENTATION AND BOARD DECISION
Medicaid/CHP+ Outreach and Enrollment Program Report
Mr. John Newman, Clinical Services Director, and Ms. Rosie Duran, CHP+/Medicaid
Coordinator, provided an overview of the CHP+/Medicaid Outreach and Enrollment program, in
addition to the information provided in the meeting packet. Since fall of 2010, the program has
been funded by grants from the Colorado Department of Health Care Policy and Financing to
increase the number of insured Larimer County residents via the Maximizing Outreach,
Retention, and Enrollment (MORE) program. Locally, the Health District has partnered with Larimer County Human Services to increase awareness of the availability of Medicaid and CHP+ to low income families. Ms. Duran was hired as the Coordinator for the Health District’s CHP+/Medicaid Outreach and Enrollment program and has previous experience coordinating a similar and very successful program for the Health District that ended in 2006 due to termination of grant funding. In addition to providing direct and personal enrollment assistance to families and individuals, the Coordinator works with other local organizations that provide similar assistance by providing training, problem solving and program expertise. In this way, the Health District has an indirect impact on helping eligible families sign up for the programs.

Since fall of 2010, the program has enrolled over 750 individuals into either the CHP+ or Medicaid programs and should enroll approximately 1,000 individuals by the end of June when grant funding is concluded. It has been estimated that with a program cost of approximately $125,000 over the 21 month MORE program period, and a total of approximately 1,000 persons enrolled, the cost to provide outreach and enrollment is only $125 per individual served, will have impacted an estimated 15% of the “eligible but not enrolled” (EBNE) population, and add approximately $2,000,000 to the community in payments to community providers.

In 2012, the Medicaid program will be expanded to include buy-in for individuals with disabilities as well as adults without children up to 10% of the Federal Poverty Level (limited to 10,000 and using a lottery approach).

**Potential Board Decision on Outreach/Enrollment Proposal**

While funds from the MORE grant are due to expire at the end of June 2012, the work of enrolling eligible individuals into available health care assistance is not complete in our community. Current estimates indicate that around 5,500 eligible individuals will still not be enrolled after the MORE program concludes. At the same time, the Affordable Care Act is scheduled to be fully implemented in 2014 and there will likely be major changes to eligibility, options, and how people make choices and sign up for health insurance (including the use of the state Exchange). These changes will require consumer assistance not only from the state level but also from organizations within local communities to help people navigate the new system. There is a good chance that there will be funding for consumer navigation assistance, anticipated to start in late 2013 or early 2014.

In light of the above, staff members believe it would be valuable to the community to bridge the time between July 2012, and when consumer navigation resources might be available from federal or state funds (or, if the Board should set it as a priority, the Health District decides to provide that navigation assistance) in 2013 or early 2014, to continue our role as an established local consumer assistance resource. Staff have researched possible funding sources to help bridge this time period, and believe that it is possible that we could obtain external funding for most of the costs of the bridge time period. Application deadlines for funding from some of the funders are coming up soon, as in June 2012, so staff are seeking a decision from the Board on whether to pursue such funding or not. At this point, the amount needed would be about $75,000 per 12-month period, and it would be helpful if we could commit some matching funds from the Health District.
MOTION: To approve the search for funding for the Medicaid/CHP+ Outreach and Enrollment program as well as consider possible next steps for expanding the service.

Motion

Board Discussion: The objective to assist individuals with understanding health care options, particularly the Accountable Care Act changes and state health exchanges that will be coming, is in line with previous Board strategic planning discussions. The Health District has demonstrated success and expertise in both consumer advocacy and taking the lead to share its expertise with other organizations and coordinate their efforts, and the Board indicated its willingness to continue to support enrollment and outreach efforts (including both the direct consumer assistance and the assistance to other community organizations and their staff). While it is important to first look for outside funding, if it can’t be secured, staff should come back to the Board to discuss whether internal funding could be allocated for this purpose. Knowing that a Health District match could be instrumental in securing funding, the previous motion was amended as follows:

MOTION: To approve the search for grant funding to bridge the funding gap between when the MORE grant expires on June 30, 2012 and when future funds may become available closer to 2014; and authorize up to $20,000 in matching funds.

Motion/Seconded/Carried Unanimously

Further Board discussion included clarifying that it is their intent that any bridge program would include the element of providing assistance to other community organizations also working on outreach and enrollment efforts, wondering whether there is help for families to find providers that accept the paying sources (staff provide referrals on a regular basis), and wondering whether the Poudre Valley Medical Group (PVMG) will take Medicaid on a regular basis (staff did not have the answer to that question).

POLICY PREVIEW
Policy Staffing Update and First Look at Proposed State Legislation
Ms. Lin Wilder, Community Impact and Health Promotion Director, reminded the Board that efforts are underway to hire for the Policy Coordinator position that was vacated during the last legislative session. In the meantime, the Health District is utilizing Jennifer Miles of Miles Consulting to research and monitor legislation, as well as contracting a policy assistant to do some of the research. For the first time, staff may not be able to provide as many comprehensive pro/con analyses as usual, so the Board may want to consider taking positions on those bills that appear to be fairly straightforward and either clearly in the interest of the health of our community, or, conversely, likely to negatively impact the health of our community.

Included in the meeting packet is a summary of current bills that pertain to health-related issues. Bills of interest are prioritized as follows: Priority 1 – Significant Impact on Public Health; Priority 2 – Potential Impact on Public Health; and Priority 3 – Bills of Interest or to ‘be aware of.’ It is still far too early in the session to predict what may happen with many of the bills. The board discussed just a few of the bills on the matrix, including:
• SB12-085 – “Reducing General Fund Expenditures”. This bill aims to return eligibility and services in Medicaid and the Children’s Basic Health Plan to the 2006 level in various areas (deemed unlikely to pass).

  **MOTION:** To OPPOSE Senate Bill 85.
  Motion/Seconded/Carried Unanimously

• SB12-53 – “Colorado Health Benefit Exchange Repeal” (deemed unlikely to pass).

  **MOTION:** To OPPOSE Senate Bill 53.
  Motion/Seconded/Carried Unanimously

• SB12-68 – “No Trans Fats in Public School Foods”. There are questions about what potential health impacts this could have, as well as how it could impact schools. The Board asked staff to learn more.

• HB-1075 – “Six Percent General Fund Appropriations Limit” (low chance of passing). No board action on this bill.

• SB-54 – “No Retaliation Against Health Employees”. This bill prohibits retaliation against employees of licensed health care facilities who perform an act or omit an act “in the best medical judgment…using the best available practices, is in the best interest of the patient; or when following a patient’s directive.” There is much about this bill that is unclear and it is likely to be amended. Staff will monitor it.

• HB-1122 – “Medication Take-Back Divert From Water Disposal”. This bill aims to divert medications from water disposal and minimize inadvertent or inappropriate use of medications. Board asked for analysis of the issue, including consultation with Dr. Adrienne LeBailly, Health of the Larimer County Department of Health & Environment.

**Systems of Care Grant Application**
Ms. Lin Wilder announced that staff just learned today that a grant application, which was submitted just days ago, was accepted and the Health District will be awarded a “Community of Excellence” grant from the Division of Behavioral Health of the State’s Department of Human Services. The grant will be used to enhance and advance the planning efforts of the Early Identification and Early Intervention (EIEI) project of the Mental Health and Substance Abuse Partnership. It is a $50,000 grant to support community planning efforts to enhance the system of care for individuals ages 0-21 who have severe emotional disabilities. This grant allows us the opportunity to be a voice at the table as the state determines what is necessary to create better systems of care throughout the state. The EIEI project was a good fit for this grant; it will help the EIEI effort better understand: how large the need for services is, what needs are being met, what needs are not, and how big the gaps are. Grant funding will also help to engage consumer family participants, and the outcome will be the creation of a plan to improve the local system of care for children and youth with severe emotional disabilities.

**EXECUTIVE SESSION**
A motion was made to go into Executive Session.

  **MOTION:** For the purpose of discussion pertaining to negotiations pursuant to §24-6-402(4)(e) of the C.R.S., and for the purpose of discussion with an attorney...
for the district for the purpose of receiving legal advice on specific legal questions per §24-6-402(4)(b) of the C.R.S., regarding the PVHS/UCH Joint Operating Agreement and Revisions to the Operating Lease between the Health District and PVHS.

Motion/Seconded/Carried Unanimously

The Board retired to Executive Session at 7:22 p.m.; took a 6 minute break, and began Executive Session at 7:28 p.m.

The Board came out of Executive Session at 8:55 p.m.; took a 5 minute break, and resumed the regular meeting at 9:00 p.m.

BOARD DISCUSSION AND DECISIONS RELATED TO PVHS/UCH CHANGES
Revisions to the Operating Lease Between the Health District and PVHC, Consent to the PVHS/UCH Joint Operating Agreement, and Public Input Process
For the past several months, PVHS and the University of Colorado Hospital (UCH) have been engaged in discussions and negotiations regarding the formation of a Joint Operating Company (JOC) through a Joint Operating Agreement (JOA). In order to facilitate the JOA with UCH, PVHS came to the Health District Board to request several changes to the Hospital Operating Lease Agreement. After several meetings and lengthy discussions (including consultations with attorneys) to see if the Health District can accommodate the request of PVHS - including taking into consideration the original intent of the operating agreement and the needs of the public – documents have been drafted and the Board is now at the point of considering the proposed amendments to the HOLA and a Consent Agreement with PVHS and UCH. (See document titled “Operating Lease Amendment and Consent Agreement” for full details.)

The Board noted that throughout the revision process they focused on analyzing both the risks and benefits to the community, their responsibility to protect both tangible and intangible assets, and the impact on the facilities the District owns and the assets that would return to them at the end of the lease. After much review and consideration, the Board is of the opinion that the documents that have been developed are in the best interests of the health, safety and welfare of the residents and taxpayers of the District and those served by the District.

Ms. Kling noted that tonight is not the night for a final decision, but instead the time to indicate the Board’s support for the documents. Following this decision, the next step will be to solicit and consider input from the public before the board makes its final decision.

Board Decision: Resolution 2012-3: Regarding Consent Agreement Between the Health District, PVHC, and University of CO Health – First Reading

MOTION: To approve Health District Board Resolution 2012-3 upon first reading, subject to the receipt of public comment at a public hearing, consideration of such public comment and any necessary changes, and a second reading and final approval.

Motion/Seconded/Carried Unanimously

A public hearing has been scheduled for February 16 at 7:00 pm and will be held at the Hilton Fort Collins. There is also an opportunity for the public to submit written comments to the Board
via mail or email. Written comments must be received no later than February 22. Final approval and vote will be considered at the Board’s February 28 meeting. Staff will receive and collate written comments and forward them to the Board members for their review. A Fact Sheet is also being developed and will be available for distribution along with a press release that will go out tomorrow.

Related Board Discussion – Process for Programming Changes
Should the agreements go forward, the Health District will begin to receive an increase in lease amounts from PVHS sometime this year (timing yet to be determined). The Health District Board has a history of using a careful, rational deliberative process in choosing where to invest its funding, and they recently went through the comprehensive triennial assessment of community health needs. That assessment pointed up major gaps and considerations for our community in two areas: 1) areas in which we are already involved, through either direct service provision, or community partnerships; and 2) areas that we are aware are currently or impending major community challenges. Examples of those key needs and priorities include: dental care, including the use of sealants for children; mental illness and substance use disorder services, including psychiatric care, integrated care, early identification and intervention, and substance abuse services; community care coordination; obesity prevention; dealing with the health needs of the impending “silver tsunami” of the aging population, and helping the public understand the changes, choices, and resources in the changing healthcare environment. Rather than making rushed decisions on how to allocate the funding, the Board indicated their intent to utilize the same careful evaluative and deliberative process during the regular planning and 2013 budgeting process later in the year. Since it has been a number of years since the Health District has been able to give much in the way of raises, the Board indicated their interest in also considering that possibility.

BOARD DISCUSSION
Community Response to Closure of Nutrition Services
Included in the meeting packet is a copy of a letter with a list of signatures received by Ms. Plock for the Board concerning the closure of Nutrition Services. The letter notes the value the Nutrition and Cholesterol Screening programs have provided to the community and recognizes disease prevention (particularly nutrition education) as an important and effective measure towards community health improvement. The letter asks that the Health District Board reconsider its decision to discontinue the Nutrition Counseling program. The Board asked staff to draft a response on their behalf, thanking them for their input, noting that the Board went through an extensive evaluation process to make their decision, to acknowledge that Nutrition Services was a good program with wonderful staff that did meet the needs of certain individuals, but noting that it was both a difficult budget year and that the hoped-for end results in improvement of the community’s health, particularly in the areas of obesity and cholesterol, were not achieved as indicated by the analysis of the program. The Health District does continue to address specific nutrition issues and participate in policy advocacy when deemed appropriate.

Board Election Cycle
This year’s board candidate election will be held on May 8. We are still waiting to receive the self-nomination forms. Distributed to the Board was the official calendar of the elections process. The deadline for candidate self-nomination forms is March 2. We will know by that date whether an election is needed or not, which depends on the number of self-nomination forms received.
Spring 2012 Board Retreat: Timing and Content
Board and staff briefly discussed the pros and cons of having a retreat in the Spring (prior to the May elections) or having it later in the year. There were varying opinions concerning whether to have the current Board make program decisions or wait until sometime after new members are on board and have had time to become more familiar with the organization and Board processes and procedures. It was determined that staff will work with the Board to find a time either late July or early August for a retreat.

CONSENT AGENDA
- Approval of November 15 and December 14, 2011 Regular Board Meeting Minutes
- Approval of November 28, December 6, December 28, 2011 and January 5 and January 16, 2012 Special Board Meeting Minutes
- Approval of November 2011 Financial Statements
- Approval of Resolution 2012-1 to Establish Meeting Days, Times and Locations for Board of Director Meetings
- Resolution 2012-2 to Establish a Designated Public Place for Posting of Meeting Notices

MOTION: To approve the consent agenda as presented.
Motion/Seconded/Carried Unanimously

ANNOUNCEMENTS
- February 10, 7:00 am – Board of Directors Special Meeting
- February 28, 5:30 pm – Board of Directors Regular Meeting

ADJOURN

MOTION: To adjourn the meeting.
Moved/Seconded/Carried Unanimously

The meeting was adjourned at 9:48 p.m.
Respectfully submitted:

Nancy L. Stirling, Assistant Secretary

Celeste Holder Kling, President

Bernard J. Bimbaum, MD, Vice President

Timothy S. O’Neill, Secretary

Steven J. Thorson, MD, Treasurer

Joe D. Hendrickson, PVHS Board Liaison

Health District of Northern Larimer County- Board of Directors Meeting

January 30, 2012