



To: Washington State Health Care Authority
From: BHT Board of Directors
Date: May 28, 2022
RE: Medicaid Waiver Renewal Feedback

Thank you to Governor Inslee, the Washington State Legislature, and the Washington State Health Care Authority for their leadership and commitment to radically improving the health of Washington state.

The Better Health Together Board of Directors is pleased to support the renewal of the Medicaid 1115 waiver. During the first waiver, we have earned more than \$60 million dollars to support a foundation of action by:

- Working with 30+ Medicaid Providers to integrate primary care and behavioral health providers throughout our six-county region and the tribal reservations of the Kalispel Tribe of Indians, the Confederated Tribes of the Colville Reservation, and Spokane Tribe of Indians.
- Supporting six county-based health collaboratives and seeded support for our Community Voices Council, Tribal Partners Collaborative, and Behavioral Health Forum. In addition, we've taken on the leadership of the Eastern Washington Community Health Worker (CHW) Network.
- Investing \$10m in building capacity related to health equity and an anti-racist health system, including developing a region-wide Equity Organizational Assessment, training almost 1,000 individuals across 30 organizations in our Equity 101 curriculum, and investing \$2.5m in Black, Indigenous, people of color and impacted community by and for organizations since 2021.
- Expanding partnerships beyond traditional health care delivery systems and into the community. This work has led us to secure more than \$7.5m in additional funds to support programming that requires a multi-sector solution to solve from COVID to housing to poverty alleviation to COVID response.

We know the most important thing we've done as the region's Accountable Community of Health is to build the skills and partnerships necessary to facilitate multi-sector collaboration that champions equity. BHT has grown our ability to support trusted local leadership and elevate regional and local voices.

We stand with the other ACHs in:

- Centering and advancing health equity as a core tenet of ACH infrastructure and regional and statewide projects.
- Tackling challenging problems through cross-sector collaborations and investments in innovation that drive resources to the people and places that need it most.
- Lifting local voices in solving our most pressing community challenges.
- Serving as a trusted convener and connector to identify and address regional challenges.
- Supporting community collaboration and strengthening local partnerships, including coordination between clinical providers, community-based organizations, Indian Health Care Providers, and Tribes
- Investing funds directly into communities to link health care and social supports, helping providers across the spectrum of services work better together and address social needs
- Investing in and supporting the integration of physical and behavioral health
- Acting with flexibility and adaptability to meet statewide needs, exemplified by our work to address the impacts of the COVID-19 pandemic

As we look at the renewal application, we are excited about the ongoing support of:

- ***Foundational Community Supports*** - We have seen firsthand the powerful role connecting housing and employment to our Medicaid System of Care.
- ***Long Term Care Supports*** - With an aging population in our region, the successful implementation of these benefits through our partner at Aging and Long-Term Care of Eastern Washington has proven critical to strengthening the partnership needed around the region, particularly in our rural areas.
- ***Continued investment in Substance Use and the Mental Health system*** - As is true around the country, we are facing a behavioral health crisis. We must do more to create a seamless system of care within our communities. It is critical that we not only invest in the in-patient settings but also the outpatient settings, ongoing payment reform, and workforce development.

And the additional investment in:

- As a long-time Navigator for the Health Benefit Exchange, BHT is delighted to see the HCA's proposal to ***ensure continuous coverage for kids up to age 6***. This is a critical investment to allow us to ensure kids have access to the type of care they need. We

believe that adding continuous coverage to our integration efforts can address some of the long-term chronic disease and behavioral health issues we're experiencing.

- BHT has seen firsthand, through our Medicaid Waiver 1115 work, the effects of institutional racism, lack of behavioral health services, and housing on our criminal justice system in urban Spokane and our rural counties. We're excited for added ***investment to support folks involved in the criminal justice system***. We've made progress on connecting folks to services. Yet, we've consistently found a gap in *supporting individuals who are incarcerated* and the lack of an appropriate system to transition back into the community. We see the growing costs to our counties in stabilizing health during incarceration that isn't connected to the community health care system and the lack of care coordination between counties and the community, costing us needed resources. We need a systematic approach for folks in the criminal justice system, and community-based care coordination is the right first step.
- We look forward to working with the HCA on ***operationalizing the Community Hub, ongoing ACH community infrastructure, Equity Investments***, and working across the various systems. We would love to see Equity Investments as the most significant portion of our ACH investment, offering us the ability to address our local issues.

Areas in need of Added Emphasis and Focus

As we move into the next phase of Medicaid Transformation, we see risk to the system if we cannot remove redundancy from the system and instead create extra burden for our health care and community partners. To this end we expect:

- ***Streamline Resource directories that will be shared across partners and Community Information technology platforms.*** We know that annually the state invests millions of dollars in creating directories of services. These directories place a high burden on community resources to keep up to date, resulting in a lack of real-time availability of resources
- ***Connecting housing stock with care coordination efforts.*** If we don't make a meaningful investment in acquiring more housing, our investment in whole-person integrated care will not be as effective.
- ***Expand Workforce.*** *As we face a crisis in our Behavioral Health system, we must expand our workforce. We are especially interested in expanding use of Peers and ensuring folks with lived experience can support the delivery system and find pathways to added training and credentialing.*
- ***Focus on the high engagement of the community.*** The HCA should expect local communities to find solutions through partnerships. We must move beyond the familiar voices to ensure the voice of the consumer, patient, and community members are part of the transformation. We especially encourage the HCA to formalize expanded partnerships between MCOs, providers, and the community.

- ***Ensure data drives our focus and emphasis.*** We're proud of the starts we've made in this Waiver. Still, we continue to see significant gaps in health disparity, specifically in our Black, Indigenous, Latinx, COFA Islander, and specifically Marshallese populations. History tells us that the market won't take care of this. We encourage the HCA to utilize their purchasing and contract power to ensure the right partners are connected, not just through values but thru contractual requirements.

BHT and our more than 100 partners stand ready to radically improve the region's health in partnership with the other eight ACHs and their hundreds of partners. We are excited to continue to build a movement toward health justice and anti-racism. In June 2020, the Board approved a position statement on racism as a public health crisis. *BHT is committed to building an anti-racist community and opposing oppression in all forms – not only to stand against systemic oppression but to invest in radical change and steward the process that will lead us to a better future.* When all of us in positions of power are consistent and committed to naming where the legacy of white supremacy culture and racism perpetuates harmful behaviors inside our systems, we build more power to change. We hope the HCA seizes every opportunity to model how organizations based in white dominance can be explicit in our role in addressing inequity and commitment to truth and healing.

This was passed by motion at the May 24th BHT Board meeting unanimously. [Here is the BHT Board membership.](#)