



Community Voice Council Charter

Purpose & Role

The Community Voice Council (CVC) is an up to 30 member council chartered by the Better Health Together Accountable Community of Health Board of Directors to ensure community members and health care consumers take an active role in improving their own health and that of their family, friends, and neighbors. The CVC can make project recommendations to the Board and will evaluate the ACH's accountability to community members.

Key Responsibilities

The CVC may provide guidance and feedback to the ACH in the following areas:

1. BHT Board, ACH Leadership Council and Medicaid Waiver Finance Committee
2. Regional Health Improvement Plans
3. Regional Health Inventory and Assessment
4. Development and Maintenance of the Community Engagement structure
5. Evaluate ACH Health Equity impact

The CVC will assist the ACH through the following roles and activities:

1. Develop annual evaluation and reporting process to ensure the ACH is accountable to our community members
2. Create comprehensive community engagement system that intentionally cultivates community input and action
3. Identify opportunities to improve population health in the BHT region and advocate for preventive care practices
4. Help support the design of transformation projects and benchmarks to Community Health Collaboratives
5. Maximize engagement of those enrolled in Medicaid
6. Provide advice to help ACH link the community's medical and non-medical services to overcome barriers to health
7. Review cross sector data to explore key drivers, identify shared measures, evaluate impact, and prioritize investment
8. Provide link back to community constituents to aid in achieving the ACH mission
9. Coordinate among agencies and community based organizations to reduce duplication of effort and increase collaboration

Membership

The CVC is a group of community members and leaders who represent the diversity of the broader BHT regional community. Criteria for membership will include race/ethnicity, age, gender identity, sexual orientation, disability, and geographic location. CVC members have lived experience using the health care system, a working knowledge of the programs, services, and community networks that exist within the region, and/or have intimate knowledge of the challenges and barriers to care experienced by populations disproportionately impacted by poor health.



To ensure a thorough recruitment process, ACH will enlist individuals and agencies already established and working intimately within communities across the region to undertake face-to-face recruitment and orientation of CVC members. This process was developed to be less intimidating and to build trust with community members interested in membership.

CVC members possess a collaborative workstyle. Membership comes with a time commitment of 5-10 hours per month. If needed, members will be compensated for their time and/or be reimbursed for expenses incurred (expenditure guidelines to be developed).

Membership will include:

- Four Tribal Representation appointed by Tribal Partner Leaders Council representing all three tribes and The Native Project
- Two Representatives from each rural county appointed by County Based Health Coalition/County Health Transformation Collaborative with a preference toward Medicaid Consumer, and at least one Community Based and/or Clinically Based Community Health Workers (CHWs).
- One representative from each managed care organizations (MCOs)
- Representatives from community groups reflecting the racial, social, ethnic, and geographic diversity of the region
- Representatives with lived experience including but not limited to homelessness, jail transitions, foster care, disability, mental health and substance use disorder challenges, economic instability, and difficulty navigating the healthcare system.

This Council will be comprised of at least 50% Medicaid Consumers.