STATE BOARD OF HEALTH

Jackson County Southwest Technology Center 711 W. Tamarack, Altus, OK73521

Tuesday, June 10, 2014 11:00 a.m.

R. Murali Krishna, President of the Oklahoma State Board of Health, called the 390th regular meeting of the Oklahoma State Board of Health to order on Tuesday, June 10, 2014 11:07 a.m. The final agenda was posted at 11:00 a.m. on the OSDH website on June 6, 2014, and at 11:00 .m. at the building entrance on June 9, 2014.

ROLL CALL

Members in Attendance: R. Murali Krishna, M.D., President; Ronald Woodson, M.D., Vice-President; Charles W.
 Grim, D.D.S.; Robert S. Stewart, M.D.; Cris Hart-Wolfe; Jenny Alexopulos, D.O.; Terry Gerard, D.O.; Timothy
 E. Starkey, M.B.A.

Members Absent: Martha Burger, M.B.A., Secretary-Treasurer

Central Staff Present: Terry Cline, Commissioner; Julie Cox-Kain, Chief Operating Officer; Henry F. Hartsell, Deputy Commissioner, Protective Health Services; Steve Ronck, Deputy Commissioner, Community and Family Health Services; Toni Frioux, Deputy Commissioner, Prevention and Preparedness Services; Mark Newman, Director, Office of State and Federal Policy; Jay Holland, Director for Offices of Internal Audit & Accountability Systems; Don Maisch, Office of General Counsel; Melissa Lange, Chief Financial Officer; Kathy Aebischer, Business Officer; VaLauna Grissom, Secretary to the State Board of Health; Commissioner's Office; Janice Hiner, Sr. Advisor to the Commissioner of Health.

<u>Visitors in attendance:</u> (see sign in sheet)

Call to Order and Opening Remarks

Dr. Krishna called the meeting to order and welcomed special guests in attendance.

REVIEW OF MINUTES

Dr. Krishna directed attention to review of the minutes of the May 13, 2014 Regular Board meeting.

Ms. Wolfe moved Board approval of the minutes of the May 13, 2014, Regular Board meeting as presented. Second Dr. Grim. Motion carried.

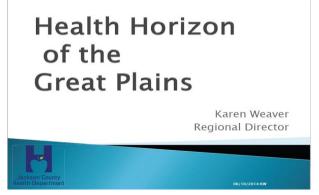
AYE: Grim, Krishna, Stewart, Wolfe, Woodson

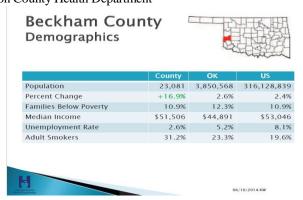
ABSTAIN: Alexopulos, Gerard, Starkey

ABSENT: Burger

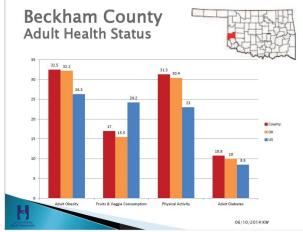
JACKSON COUNTY PRESENTATION

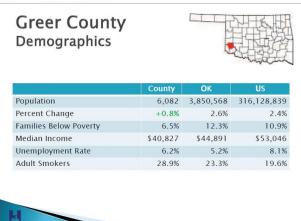
Karen Weaver, B.S.N., R.N., Administrative Director, Jackson County Health Department

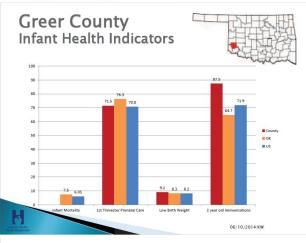


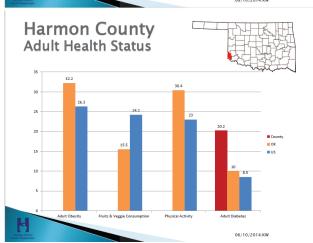


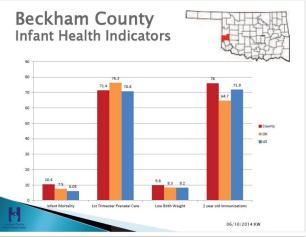
June 10, 2014

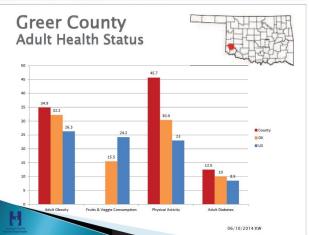






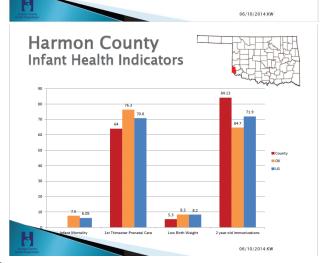








Harmon County

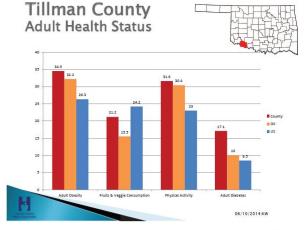


June 10, 2014

Tillman County Demographics



	County	OK	US
Population	7,822	3,850,568	316,128,839
Percent Change	-15.4%	2.6%	2.4%
Families Below Poverty	14.6%	12.3%	10.9%
Median Income	\$34,550	\$44,891	\$53,046
Unemployment Rate	4.7%	5.2%	8.1%
Adult Smokers (unstable)	25.4%	23.3%	19.6%



Tillman County Infant Health Indicators





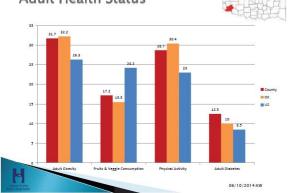


06/10/2014:KW

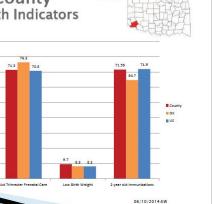
	County	OK	US
Population	26,237	3,850,568	316,128,839
Percent Change	-7.1%	2.6%	2.4%
Families Below Poverty	14.1%	12.3%	10.9%
Median Income	\$41,563	\$44,891	\$53,046
Unemployment Rate	4.7%	5.2%	8.1%
Adult Smokers	25.4%	23.3%	19.6%







Jackson County Infant Health Indicators



Changing the Horizon of the Plains



- Tobacco Policies and Ordinances
- Physical Activity & Nutrition Policies and Ordinances
- Certified Healthy Oklahoma
- Preparing for a Lifetime
- Caring Van Southwest Oklahoma



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Leverage Resources for Health Outcome Improvement Performance Measures Scorecard 0 (FY 2013)

Dr. Gerard inquired as to the explanation behind the large percentage increase in population and median income for Beckham County as presented. Mrs. Weaver indicated it is likely a result of an oil and gas boom along this region. At one time this region had the lowest unemployment rate in the state. During previous periods of expansion due to oil and gas, the region was unable to maintain the expansion. It is unknown if the region can sustain the growth. The area is receptive to health improvement issues; however, the transient population presents a challenge.

The presentation concluded.

Health System Performance Ranking Summary

Performance Quartile
Top Quartile
Second Quartile
Third Quartile
Bottom Quartile

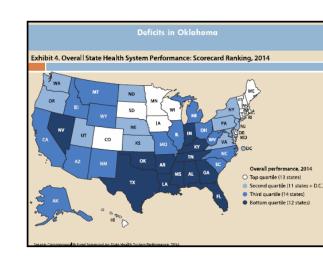
Florida Kentucky Indiana Texas Georgia Alabama Nevada Louisiana Oklahoma Arkansas

STRATEGIC MAP UPDATE PRESENTATION

LEVERAGE RESOURCES FOR **HEALTH OUTCOME IMPROVEMENT**

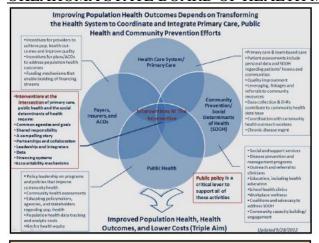
Deficits in Oklahoma

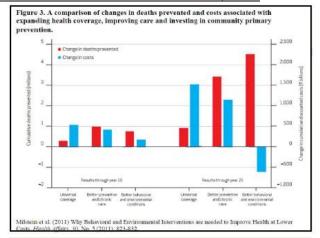
Julie Cox-Kain, M.P.A., Chief Operating Officer



	Strategic Map: SFY 2011-2015 Central Challenge		
Achieve Targeted Improvements in the Health Status of Oklahomans			
Improve Targeted Health Outcomes	Lead Public Health Policy & Advocacy Development	Strengthen Public Health Systems	
Achieve Improvements In Oklahama Health Improvement Plan (OHIP) Flagship Issues	Target Campaigns on Community Needs, Return on Investment, & Scientific Evidence	Evaluate Infrastructure to Support Public Health Systems	
Facus on Core Public Health Priorities	identify & Excision Public Health Champions	Advieve Accreditation & Create a Quality Improvement Culture	
Reduce Health Inequities	Serve as Educational Resource on the Value of AS Public Health lauses	Employ Strategies for Public Health Workforce Recruitment Achieve Compatible	
	- Santa	Health Information Exchange Across Public/Private Sector	
		Foster Collaborative Relationships With Public & Private Partnerships	
	Engage Communities to Utilize Social Determinants of Health i Responsibly Align Resources	& Whole Person Wellness Appro	

	Baseline	Most Recent Year	5 Year Target Goal
Team-Based Care Coordination Model – Piloting a team-based care coordination model with both health insurance carriers and health systems	0% (FY 2013)	100% (FY 2014)	N/A
Award FQHC "Start-up" or Development Dollars – Awarding annually appropriated dollars for new FQHC access points and start- ups	77.32% (FY 2011)	15.65% (FY 2014)	90.00% (FY 2017)
Shared Savings and Performance-Based Raimbursement Models – Developing a plan or waiver to pilot shared savings and performance-based reimbursement models with both health insurance carriers and health systems.	0% (FY 2013)	25% (FY 2014)	100% (FY 2015)





OSDH & OHCA QI Projects Working Across 5 Health Outcomes

- OSDH and OHCA engaged in a process to develop a joint strategic plan across short-term and long-term health outcome improvement areas
 - QI teams began meeting in early 2014, with results expected in Jan. 2015
- Short-Term Areas for Improvement:
 Tobacco, Rx Drug, Hypertension, Immunizations for Children, and Diabetes
- ➤ Long-Term Areas for Improvement:
 - ➤ Obesity and Preventable Hospitalizations
- Current Results:
 - Joint QI training across both agencies
 - Data sharing agreements (in process)
 - > Standardization of survey questions and data (in process)
 - Tracking health outcome data for the Medicaid population (in process)
 - Example: State of the State's Health Report Card

Heartland OK (Million Hearts)

ASTHO grant to pursue a care coordination model in targeted counties (Pittsburg, Atoka, Pontotoc, Coal, and Latimer)

- Health department nurses serving as the "hub" to connect patients with physicians, pharmacists, and community-based services to achieve NQF18 criteria (controlled hypertension)
- In conjunction with piloting the care coordination model/grant with ASTHO, OSDH also submitted a grant proposal to BCBSOK in pursuit of a performance-based reimbursement model when the "team" achieves NGF18 criteria
 - Grant proposal still in process; however, the OSDH is working to implement the same reimbursement model through contracts with community providers
- As of April 31, 2014, 8 patients are receiving blood pressure monitoring as requested by referring physicians
 - > 1 patient has already met the basic requirement for graduation
- OFMQ has recruited 24 providers that are now receiving technical assistance for tracking NQF18 criteria within their practice EHR/EMR
- > Team is working with OHCA to recruit additional patients into the program (QI)

NGA Policy Academy

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- The State of Oklahoma has been selected to participate in the National Governors Association (NGA) 18-month policy academy focused on building a transformed health workforce
 - OSDH is the team lead for this project and will work across multiple stakeholders, including the Governor's Office, OHCA, BCBSOK, Oklahoma State Chamber of Commerce, OESC, Department of Commerce, OU, and OSU
- > Oklahoma has identified 3 major goals:
 - Establishment of a high functioning and sustainable health workforce organization
 - Implementation of coordinated health workforce data collection and analysis strategy
 - Creation of an "Oklahoma Health Workforce Action Plan" that aligns with Governor's initiatives and supports the Oklahoma Health Improvement Plan
- Identified Focus Areas: Data Collection, Work Redesign, Pipeline and Retention, and Coordination Efforts



Access to Care Framework

| Section | Section | Section | Section | September | September | Section | September | September | September | Section | September | Section | September | Septem

Questions?

DELANGMA STATE DEPARTMENT OF HEALTH - CREATING A STATE OF HEALTH - WWW.HEALTH.OK.GOV

The presentation concluded.

CONSIDERATION OF STANDING COMMITTEES' REPORTS AND ACTION

Executive Committee

Organizational Strategic Alignment

Dr. Krishna directed attention to the proposed organizational chart revisions for the Oklahoma State Department of Health and asked Dr. Terry Cline, Commissioner of Health, to comment on the proposed organizational chart revisions.

Dr. Cline described the requirement for the Oklahoma State Board of Health to approve organizational chart changes of the Oklahoma State Department of Health (OSDH). Board members were given copies of the proposed changes. Dr. Cline asked for Board consideration and approval of the following changes:

 Creation of a new position titled Senior Deputy Commissioner and Deputy Secretary of Health and Human Services to directly oversee: Chief Financial Officer; Center for the Advancement of Wellness; Center for Health Innovation & Effectiveness, formerly Health Planning and Grants; Partnerships for Health Improvement, formerly Community Development Services; and Center for Health Statistics, consolidation of Informatics and Healthcare Information.

As Senior Deputy Commissioner, this position will maintain oversight of department operations and additional agency oversight. As the Deputy Secretary of Health and Human Services, this position will have a broader role across the Health and Human Services cabinet. If approved, Julie Cox-Kain would be appointed to this position. He indicated that the OSDH has taken steps toward integration of Health and Healthcare; however, we are limited by our organization structure. This change would allow the Department to better align the structure with our priorities.

Mr. Starkey inquired as to whether or not there would be a budgetary impact with this change. Dr. Cline indicated that in addition to the refill of the Chief Operating Officer position, Mrs. Cox-Kain would receive a slight increase in pay. He indicated that in the last 5 years we have been able to generate savings that have been utilized to offset budget reductions. This realignment will allow us to continue to focus on finding and creating efficiencies and savings.

Dr. Grim asked if the position is a politically appointed position. Dr. Cline indicated that it is not politically appointed and if approved by the Board would be appointed by the Commissioner of Health with the support of the Governor

Dr. Alexopulos commented on the organizational structure prior to the creation of the Center for the Advancement of Wellness. Since that realignment, much progress has occurred and it is the desire of the Board for the Department to continue in this progress. Dr. Cline added that this request is a result of this challenge from the Board to the Department to continually evaluate progress and realign the structure with the priorities.

Dr. Alexopulos moved Board approval of the proposed organization changes presented on June 10, 2014. Second Dr. Grim. Motion carried.

AYE: Alexopulos, Gerard, Grim, Krishna, Starkey, Stewart, Wolfe, Woodson ABSENT: Burger

The report concluded.

Finance Committee

Dr. Woodson directed attention to the Financial Report provided to each Board member and presented at the following SFY 2014 Finance Report and Board Brief as May 19, 2014:

• Approximately \$431 million budgeted for state fiscal year 2014

- Forecasted expenditure rate of 99.1% through June 30, 2014
- "Green Light" overall for Department and all divisions

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The *Financial Brief* this month focuses on the emergency preparedness and response activities:

- These activities are a public health imperative.
- During 2013, OSDH and its partners had organized emergency response to a variety of man-made and natural disasters, such as winter storms, the May 2013 tornado responses, and the Tulsa Dental Health Associated Infection.
- The activities are primarily supported by federal funding sources that support Public Health Emergency Response and the Hospital Preparedness Response systems.
- Oklahoma's health system's ability to be prepared for natural and man-made disasters may be hampered due to a significant reduction of approximately 37% or \$1.5 million to the Hospital Preparedness grant.

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Reductions to OSDH State General Appropriations:

- OSDH State Fiscal Year 2015 will be reduced by \$2.28 million or 3.6% over State Fiscal Year 2014 appropriation levels.
- In addition, a cash transfer of \$5 million from the State Trauma Care Assistance Revolving Fund and \$50 thousand from the Kidney Revolving fund into the Special Cash Fund of the State Treasury was authorized by the Oklahoma Legislature effective July 1, 2014.
- FQHC Uncompensated Care will be reduced by \$1,006,230 thereby spreading the impact of the reduction of uncompensated care funds to all providers receiving this type of funding.

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The report concluded.

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Accountability, Ethics, & Audit Committee

The Accountability, Ethics, & Audit Committee met with Jay Holland. Ms. Wolfe reported that there are no known significant Audit or Office of Accountability issues to report at this time.

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The report concluded.

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Policy Committee

33 The Policy Committee met on Tuesday, June 10, 2014. Dr. Gerard, Dr. Grim, and Mr. Starkey were present 34 35 36

and met with Mark Newman at the Jackson County Health Department in Altus, Oklahoma. The Policy Committee discussed the Governor's approval of multiple bills which will impact the budget, employee retirement and benefits, and additional mandates for the agency such as SB 1848, which would require the BOH to establish standards for abortion facilities in Oklahoma.

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The final version of the legislative tracking reports have been sent electronically to each member of the BOH and no further reports will be sent until after bills are introduced next year.

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The Policy Committee also discussed the importance of the OHIP Community Chats, the development of a legislative agenda for next session and potential issues for discussion at the BOH Retreat in August.

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If members of the Board have any questions regarding any policy issues or proposed legislation, please do not hesitate to contact Mark Newman for additional information or to provide your input. Dr. Gerard requested that all BOH members submit their suggestions for legislative agenda items for the next session to Mark Newman as soon as possible to prepare for the August BOH Retreat.

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The next meeting of the Policy Committee will be prior to the July Board Meeting in Oklahoma City.

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PRESIDENT'S REPORT

Dr. Krishna directed attention to copies of the 2014 State of the State's Health report provided to each Board member. He thanked the staff for the hard work reflected in the report as well as the efforts put into compiling the report. Oklahoma has improved in ranking, 44th in overall health status; however, there are still many

June 10, 2014

challenges facing the state if we are to continue to improve health. The next edition of the report will evolve into an interactive, web-based report.

NOMINATING COMMITTEE REPORT & ELECTION OF OFFICERS 2014-2015

Dr. Krishna asked Dr. Alexopulos to provide the Nominating Committee Report. Dr. Alexopulos, Tim Starkey and Dr. Gerard served on this committee. The Committee recommended the 2014-2015 Officers as follows: President, Ronald Woodson; Vice-President, Martha Burger; and Secretary/Treasurer, Cris Hart-Wolfe.

Dr. Grim moved Board approval to approve the Committee recommendations for President, Ronald Woodson as presented. Second Dr. Gerard. Motion carried.

AYE: Alexopulos, Gerard, Grim, Krishna, Starkey, Stewart, Wolfe,

ABSTAIN: Woodson ABSENT: Burger

Dr. Grim moved Board approval to approve the Committee recommendations for Vice President, Martha Burger as presented. Second Dr. Gerard. Motion carried.

AYE: Alexopulos, Gerard, Grim, Krishna, Starkey, Stewart, Wolfe, Woodson ABSENT: Burger

Dr. Alexopulos moved Board approval to approve the Committee recommendations for Secretary-Treasurer, Cris Hart-Wolfe as presented. Second Dr. Gerard. Motion carried.

AYE: Alexopulos, Gerard, Grim, Krishna, Starkey, Stewart, Woodson

ABSTAIN: Wolfe ABSENT: Burger

COMMISSIONER'S REPORT

Dr. Cline mentioned the annual Governor's Walk for Wellness held at the Capitol, May 21st. In addition to several Cabinet members, there were more than 350 participants. Dr. Cline thanked Governor Fallin for her commitment to increase awareness in this area.

Next, Dr. Cline spotlighted the Protective Health Services, Long Term Care Division for receiving the Quality Crown Award at the annual Quality Team Day Ceremony.

Dr. Cline briefly commented on the consolidated efforts of the Health and Human Services Cabinet establish Information Technology governance structure to inform decision making as it relates to the state's consolidation of shared services. It is important that the parties who best understand the services and work performed are involved in the process.

Dr. Cline updated the Board on the progress of the Oklahoma Health Improvement Plan Community Chats. Once the concerns of the communities have been compiled, the information will be pulled together for the rewrite of the next Oklahoma Health Improvement Plan. The most recent chat was conducted in Lawton, and there are two chats remaining which are scheduled in Little Axe and Guymon.

Lastly, Dr. Cline, along with several national groups, participated in an ASTHO WebMd Twitter Chat regarding prescription drug abuse. He briefly described the online forum and explained the purpose of the event was to push out information on this topic to followers who use this forum.

The report concluded.

NEW BUSINESS

No new business.

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Ronald Woodson, M.D.

July 8, 2014

President, Oklahoma State Board of Health