## Regional Health Alliance Access to Care Tuesday, January 27, 2015 Grace Health

Present: Melinda Hautau, Community Action; Raymond Higbea, Grand Valley State University; Cheryl Hinds, Grace Health; Carl Gibson, Office of Senior Services; Justin Logsdon, Department of Human Services; Diane Marquess, Family & Children Services; Angela Myers, Regional Health Alliance; Samantha Pearl, Community HealthCare Connections; Sherry Postula, Grace Health; Jessica Rapelje, Battle Creek Community Foundation/RHA; Victoria Reese, Health Equity Alliance; Ron Slagell, LifeCare Ambulance; Kaci Sparks, Western Michigan University Nursing Student; Alyssa Stewart, United Way; Barb Travis, Community HealthCare Connections; Jennifer VanValkenburg, Regional Health Alliance; Jill Wise, Grace Health; and Nidia Wolf, Albion Health Care Alliance.

Agenda Item	Discussion	Action
1. Call to Order	Barb Travis called the meeting to order at 9:30 am. All members were introduced.	
2. Approval of minutes	There were no additions or corrections to the minutes from the October 28, 2014 meeting.	
	I make a motion to accept the October 28, 2014 minutes as presented.	
	Motion by: Samantha Pearl	
	Support by: Cheryl Hinds	
	Motion passed unanimously	
3. Review of 2014	List of 2014 Goals was reviewed.	
Goals		
	ACA Outreach & Enrollment: ACA Outreach & Enrollment has not met for a couple of	
	months due to enrollments. There have been a few different events at the hospital,	
	Oaklawn, and RMTC in Fort Custer. Open enrollment closes February 15.	
	Community PCP Database: We had a partnership with IHP to do two surveys last year. Responses for the 2 <sup>nd</sup> survey were less than the 1 <sup>st</sup> one. There will only be one survey done in 2015. Practice Coaches who work with provider offices will assist with getting offices to complete the survey. Goal is 100% participation. The survey will be given in May and results will be available in June.	
	High Risk Intervention: The High Risk Intervention group targets high risk individuals. At last Friday's meeting it was decided to have a steering committee to launch the pilot. There will be 1 to 2 teams who will start seeing patients. Updates will be given on a monthly basis. The pilot will be conducted for 1 year. If valid, it will be expanded.	
	<u>Unmet Needs:</u> A list of 16 unmet needs was compiled in 2014. In a previous meeting, it was discussed how to connect people and get them to the right place. Other areas of unmet needs discussed are:	
	Mental health – LifeCare Ambulance is routinely transporting people to other areas.  Psychiatrists are not always available.	

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3. Review of 2014	• Some middle income people are unable to afford health care. Employers are dropping	
Goals (cont.)	insurance for their staff and some are reducing staff hours. If an employer only covers	
	the employee and not their family, the family members do not qualify for insurance on	
	the exchange.	
	Healthy Michigan only goes for two years and we are in the second year. Our	
	community will struggle if we lose Healthy Michigan since there isn't a safety net.	
	• Some people do not see value in health insurance coverage; only want it when needed.	
	Middle income people are less likely to ask for Charity Care since they don't think they	
	qualify.	
	Approximately 29% of Calhoun County residents are just above poverty and are	
	struggling to pay their bills.	
	• The ALICE report was a little "weak" in health care since ACA was not in effect yet.	
	Recommended that Access to Care may want to partner with United Way to look at/study	
	the group in need.	
	<ul> <li>Dental Partnership is down a little since people have Healthy Michigan.</li> </ul>	
4. Profile of Health	Raymond is working on the Profile of Health Assessment and will try to have ready for	Jill and Samantha will
Assessment	review at the next meeting. He stated the numbers are looking a little better. The	share data from
11550551110110	methodology for the report needs to be changed due to Healthy Michigan. Uninsured is	surveys with Raymond
	approximately 8.5% which is the best it has been in 15 years. Raymond will be meeting	surveys with Raymond
	with Ruth and April of IHP to gather more information for the report. May be able to obtain	
	some data from the BC Pulse Survey.	
5. 2015 Goals	Although a little more time is needed to complete the 2015 goals list, the following	
	suggestions were discussed:	
	Insurance literacy	
	• Middle income earner – what do they need?	
	• Community Health Care Worker Model – Have people in the community who know	
	what resources are available and can help connect people.	
	Mental health	
	• Communication – help communicate needs of people and organizations. No one was	
	aware Planned Parenthood was closing until it closed. Some programs are seeing a drop	
	due to Healthy Michigan.	
	<ul> <li>Monitor effect of Healthy Michigan and ACA – how do we coordinate care? How is the</li> </ul>	
	change from fee for service to quality outcomes indicators effecting organizations? How	
	can organizations work together?	
	Access to Care members – what groups should be attending who are not currently	
	participating?	
	• State legislatures – get to know the legislatures and share what is happening in our	
	community.	

5. 2015 Goals (cont.)	Goals for 2015 may include a list of action items and a list of items to monitor. The list will be shared with the group in advance and discussed at February meeting.	
6. Announcements	The 6 <sup>th</sup> Annual Calhoun County Senior Fair will be held at the Marshall Middle School on Thursday, April 9 from 10:00 am until 1:30 pm. Carl stated the focus is on seniors, family members, and pre-retirement. Senior Millage services will be highlighted.	
7. Adjournment	Meeting adjourned at 10:50 a.m.	Next meeting: Tuesday, February 24, 9:30 a.m. – 11:00 a.m., Grace Health

Submitted by Diane Craig, January 30, 2015