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## FHCQ | Social Needs and Health Equity Steering Committee

Social Needs Interventions Workgroup

May 16<sup>th</sup>, 2023 | 3:00 – 4:00 p.m.

Virtual

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### MEMBERS PRESENT

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Ashley Bennet, WA Health Care Authority

Beth Weitensteiner, DO, International  
Community Health Services

Janice Tufte, PCORI West Ambassador/  
Hassanah Consulting

Jessica Beach, Molina Healthcare

Jon Liu, MD, Amazon

Karma Kreizenbeck, HICOR Fred Hutch

Shelby Kantner, MPH, Community Health Plan  
of Washington

### STAFF AND MEMBERS OF THE PUBLIC

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Nick Locke, MPH, Foundation for Health Care Quality

Karie Nicholas, MSc, Foundation for Health Care Quality

Kerry McMillen, HICOR Fred Hutch

### WELCOME

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Nick Locke, Bree Collaborative, welcomed the group to the Social Needs Interventions workgroup, an ad-hoc workgroup of the Social Needs and Health Equity Steering Committee. Members briefly introduced themselves and reviewed the April minutes.

### DISCUSSION: DRAFT RECOMMENDATION DOCUMENT

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Mr. Locke shared the workgroup's full draft recommendation document for discussion. The group walked through the document, starting with External Organization recommendations, where they left off after the April meeting.

- External Organization Interventions:
  - Members recommended that research institutions/organizations work to develop more best practices for org partnerships. Some examples of current best practices come from Kasier and OCHIN, and members shared the One Stop Shop resource center that offers recommendations for organization partnerships.
  - Members discussed funding for partnerships. Funding should include incentives for community organizations to participate, but also recommendations for clinics and health delivery sites to be able to spend the time and effort to develop partnerships.
  - Members highlighted that recommendations may be different for partnerships with government organizations versus other community organizations.
  - Members discussed co-location of services as an option for partnerships. This option is not possible in all cases given funding and space restrictions.
  - There should be no wrong door for partnerships, but many partnerships or initiatives are short-term and may expire quickly.
  - Other options for funding include Medicaid changes during the 1115 waiver.
- Structural interventions:
  - Members began discussing recommendations related to alignment. Members agreed that we don't just want to integrate social care into health care delivery, but we also want to increase access to health care services in community sites.

- This may include embedding healthcare services in the community, considering healthcare access during planning and development, or offering creative service solutions such as mobile clinics.
- Members decided this is an important recommendation related to alignment (across health and social service organizations), but also a recommendation for policy members to consider health access and infrastructure.
- It may be useful to provide more guidance about how to incorporate in policy, such as considering the area deprivation index.
- Funding recommendations were expanded to include risk adjustment related to social need in value-based contracting.
- Policy recommendations should include not just the content of the policy, but information about how to share policies with state, organizations, and community members to ensure impact.

Following the discussion on the current draft recommendations, members recommended additional partners to provide comments. Members recommended:

- The Washington Health Alliance
- Washington State Hospital Association

#### **PUBLIC COMMENT AND GOOD OF THE ORDER**

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Mr. Locke shared the workgroup's next steps. At the next meeting the workgroup will review feedback on the recommendations from external stakeholders and finalize the recommendations. The next meeting will be held in June 2023.