Southwest Collaborative Planning & Implementation Group

Date:
Wednesday, November 29

Start/End Time: 01:00 pm – 2:30 pm PT

Location:
Access Zoom

Facilitator Organization:
Population Health Innovation Lab, Public Health Institute

Total Number of Attendees: 76

Meeting Objectives:

- Build relationships and increase awareness of partners in the Southwest CPI Collaborative Region.
- Learn about Partnership HealthPlan's improvements and resources.
- Cultivate a comprehensive understanding of the vision and trajectory outlined in the Population Health Management Initiative to align stakeholders with its overarching goals and principles.
- Heighten awareness of state initiatives designed to equitably address clients' needs and bolster the effectiveness of agencies, fostering a deeper commitment to supporting diverse communities.
- Strengthen participating organizations' grasp of upcoming advancements in interoperability, particularly within cross-sector approaches to whole-person care. Emphasize the significance of non-clinical Community-Based Organizations (CBOs) gaining access to integrated delivery systems for a more holistic and interconnected healthcare landscape.

High Level Agenda

No.	Topic	Key Questions
1.	Welcome & Framing for the Day	
2.	Local Organization Spotlight with Open Door Community Health Centers	• Which CalAIM benefits and opportunities are being leveraged locally to serve communities? • What are your successes and challenges of implementing ECM and/or Community Supports in your community.
3.	Presentation and Facilitated Q&A from the Department of Health Care Services (DHCS) – Randi Arias-Fontenot RN, MS-L, Doctoral Candidate	• What is the vision and trajectory outlined in the Population Health Management Initiative? How does it link to the vision of PATH initiatives, and overall integrated service delivery for Medi-Cal beneficiaries in our communities? • How might Managed Care Plans support care coordination, navigation, and referrals across all health and social services, including community supports between health centers, CBO's, and similar social services providers? • How is DHCS aiming to support more CBO's, tribal entities, and organizations that serve historically underserved populations for interoperability with health clinics without them having to compromise culturally appropriate services?
4.	Update from Partnership HealthPlan of California	• What updates from PHC will impact existing and prospective ECM and Community Supports workflow processes?
5.	Wrap-up and Next Steps	

Notes/Meeting Summary

Key Takeaways & Discussion Themes by Agenda Topic

Topic	Discussion Themes/ Key Takeaways	Actions Taken/ Next Steps	Best Practices/ Lessons Learned
Welcome & Framing for the Day	N/A	N/A	N/A
Local Organization Spotlight with Community Supports Network (CSN)	**Key Takeaways:** • As of this morning and onset of this program, Community Supports Network has housed 160 people. • CSN share a story illustrating how CalAIM, ECM, CS and other initiatives have created more holistic and whole care. ○ A 75-year-old who came in as a referral had been missing a leg and came in a wheelchair. She previously identified as having a "dependent pill problem" and "medical trauma". Using the committed CSN team for ECM, she was approved to get a new prosthetic leg. She now walks and drives, and has an improved quality of life.	**Next Steps:** Request a meeting with CSN to submit a "Success Story" form for the Department of Health Care Services.	**Lessons Learned:** Case management and care management are two different words. Understanding these differences helped CSN create their approach to whole person care.

Presentation and Facilitated Q&A from the Department of Health Care Services (DHCS) – Randi Arias-Fontenot RN, MS-L, Doctoral Candidate	**Discussion Themes:** *See video posted on website* • Transforming Medi-Cal • Population Health Management • Long-Term Care (LTC) • MCP Transition • Dual Eligible Members • Behavioral Health • Justice-Involved	**Next Steps:** Develop a Q&A document for questions that were not answered. Once answered, the Q&A document will be sent to participants and will be added to the Readiness Roadmap website.	**Lessons Learned:** Having the Department of Health Care Services present on the Population Health Management (PHM) Strategy was mostly received well. Participants responses to the meetings objectives are as followed: 1. **19 of 26** survey respondents selected "Agree" or "Somewhat agree" to the following statement: This session helped me cultivate a comprehensive understanding of the vision and trajectory outlined in the Population Health Management Initiative 2. **18 of 26** survey respondents selected "Agree" or "Somewhat agree" to the following statement: I have a better understanding of how the Population Health Management Initiative intends to improve access and opportunities, such as cross-sector approaches to whole-person care, using non-traditional Medi-Cal providers such as non-clinical Community-Based Organizations (CBOs). 3. **23 of 26** survey respondents selected "Agree" or "Somewhat agree" to the following statement: I have increased my awareness of state initiatives that are designed to equitably address clients' needs and bolster the effectiveness of agencies.
Update from Partnership HealthPlan of California	**Discussion Themes:** • Partnership Health Plan of California updates and upcoming events • Resources and webpages *See "Shared Collaborative Resources" section below for links.*	None	None

Wrap-up and Next Steps			

Identified Gaps/Challenges in CalAIM/ECM/Community Supports

Topic	Gaps/Challenges Identified	Actions Taken/Next Steps	Best Practices/Lessons Learned
Medically Tailored Meals contracts in Kaiser Permanente expansion counties	Concerns are raising that Kaiser Permanente has no plans to add any providers to KP's roster for meal services, besides a large for-profit entity based out of state.	Facilitate and support conversations with local MTM entity and DHCS.	Lessons Learned: Transition of Care Model in 2024 is complex, and it is important as a CPI Facilitator to uplift these types of concerns to DHCS and PCG.
Justice Involved Initiative	Contractual obligations for pre-release and post-release services are unclear. For example, if the county contracts out for JI pre-release services, does that mean that the contracted provider also provides ECM services? What happens on January 1, 2024 since post-release is pushed back to October?	PHIL will identify subject matter experts, spotlight organizations, and request presentations on JI initiative in 2024. Partnership HealthPlan will be presenting on Birth Equity and JI in December 2023.	Lessons Learned: January 1 is all about preparation and what jurisdictions are ready for . Addies believes that post-release is allowed to start January 1st, but recommends issuing questions about JI to PHMSection@dhcs.ca.gov
Birth Equity	Providers are interested in the impact that "mixed race" has on the mortality and morbidity POF. How does access impact eligibility? Or is it only equity?	PHIL will identify subject matter experts, spotlight organizations, and request presentations on Birth Equity initiative in 2024. Partnership HealthPlan will be presenting on Birth Equity and JI in December 2023.	None
Technology Platforms	Transparency gap in DHCS's care coordination platforms platform visions.	PHIL will identify subject matter experts, spotlight organizations, and request presentations on the data exchange framework in 2024. PHIL will be spotlighting technological platform semi-annually starting 2024.	Lesson Learned: Organizations and Managed Care Plans are not mandating any particular care management platform now, however DHCS may provide guidance on platform procedures in the future.

Identified Successes Experienced by Participants

Topic	Successes Identified	Actions Taken/Next Steps	Best Practices/Lessons Learned
ECM Success	Wrap around, high quality ECM support to a 75 year old	Request a meeting with CSN to submit a "Success Story" form	Case management and care management are two different words. Understanding these

	patient has drastically improved their quality of life.	for the Department of Health Care Services.	differences helped CSN create their approach to whole person care.

Summary of Complaints & Grievances

Topic	Summary of Complaint/Grievance	Actions Taken	Next Steps
Presentation	While the presentation addressed some specific questions, an audience member expressed a desire for content that resonated more broadly with a wider range of interests. They stated that the presentation was more designed for direct providers and not executive members of organizations.	None	There's an opportunity to enhance future presentations by incorporating elements that capture the broader enthusiasm of the audience and foster a more inclusive engagement. Additionally, PHIL will aim to identify and share target participant groups, ensuring participants can attend more appropriate meetings and pop-ups.

Specific comments, questions, or concerns regarding policy/implementation/change goals for TPA/DHCS

Topic	Comment/Concern/Question	Actions Taken	Next Steps
Contracts in Kaiser Permanente expansion counties	Concerns are raising that Kaiser Permanente has no plans to add any providers to KP's roster for meal services, besides a large for-profit entity based out of state. This is especially tense considering the other local MCP has worked to build local capacity with other Community Supports and ECM providers.	Facilitate and support conversations between ECM, Community Supports providers and Kaiser Permanente.	PHIL will uplift any new identified gaps and challenges that arise within the MCP transition in the region.

Shared Collaborative Resources

#	Resource	Category/Type	Link/Access Information
Partnership HealthPlan of California Resources			
1.	PHC ECM Webpage	Website	http://www.partnershiphp.org/Community/Pages/Enhanced-Care-Management.aspx
2.	PHC Community Supports Webpage	Website	http://www.partnershiphp.org/Community/Pages/Community-Supports.aspx
3.	Care Coordination Department	Phone Number	800-809-1350
4.	Transportation Services Department	Phone Number	866-828-2303
5.	Provider Relations Department	Phone Number	707-863-4100
6.	Claims Customer Service	Phone Number	855-798-8757

#	Resource	Category/Type	Link/Access Information
7.	Registration page for Partnership HealthPlan ECM RoundTables	Website	https://bit.ly/3GkjqKL
Other Resources Shared			
8.	PHIL PATH CPI Website	Website	https://pophealthinnovationlab.org/projects/path/
9.	Native Lands map	Website	https://native-land.ca
10.	PHIL Post-event Survey	Survey	https://bit.ly/3Rj1yGf
11.	PHIL Continuous Feedback Survey	Survey	https://bit.ly/3MknLRy
12.	PATH CPI Best Practices Webinar	Registration	https://bit.ly/47Xms3o
13.	Full DHCS Q2 Data Implementation Update	Website	https://www.dhcs.ca.gov/Documents/MCQMD/ECM-and-Community-Supports-Q2-2023-Implementation-Update.pdf
14.	2024 Medi-Cal Managed Care Plan Transition Policy Guide	Policy Guide	https://www.dhcs.ca.gov/Documents/Managed_Care_Plan_Transition_Policy_Guide.pdf

Individuals in Attendance

	Name	Organization	Position / Title	MCP Y/N	Email
1.	17075696029	Unknown	Unknown	N	Unknown
2.	17078891329	Unknown	Unknown	N	Unknown
3.	Addie Sherman	Department of Health Care Services	Section Chief, Policy	N	Addie.Sherman@dhcs.ca.gov
4.	Alayna Effron	Unknown	Unknown	N	Unknown
5.	Amber Gonzales	County of Sonoma, Home Visiting	Department Analyst	N	amber.gonzales@sonoma-county.org
6.	Amy Anderson	Aliados Health	Sr. Program Manager/ CalAIM	N	aanderson@rchc.net
7.	Ana Victoria Salcido	Unknown	Unknown	N	Unknown
8.	Andrea Mendoza	Unknown	Unknown	N	Unknown
9.	Ashleigh Bowman	Unknown	Unknown	N	Unknown
10.	Ashley Peel	Partnership HealthPlan of California	ECM Program Manager	Y	apeel@partnershiphp.org
11.	Aura Silva	Providence Queen of the Valley Medical Center	Manager, Care Management, CARE Network	N	aura.silva@stjoe.org
12.	Benjamin Leroi	Santa Rosa Community Health Centers	Director	N	benl@srhealth.org

13.	Beth Paul	Aliados Health	Director Health	N	bpaul@rchc.net
14.	Brenda Paulucci-Whiting	Cere's Project	Chief Program Officer	N	bpaulucci-whiting@ceresproject.org
15.	Brittany Lobo	Sonoma County Dept of Health Services	Community & Family Health Section Manager	N	Brittany.Lobo@sonoma-county.org
16.	Carla Denner	Aliados Health	Unknown	N	cdenner@aliadoshealth.org
17.	Caroline Yoss	Homeward Bound of Marin	Unknown	N	cyoss@hbofm.org
18.	Carrie Lara	Community Support Network	Clinical Director	N	carrie@csn-mh.com
19.	Casey Ogelvie-Armstrong	Turning Point Community Programs	Director of ECM & CS	N	caseyogelvie-armstrong@tpcp.org
20.	Cathryn Couch	Ceres Community Project	CEO	N	ccouch@ceresproject.org
21.	Cayenne Bierman	Marin Community Clinic	Director of Complex Care	N	cbierman@marinclinic.org
22.	Christina Olson	Population Health Innovation Lab	Program Manager	N	COlson@phi.org
23.	Christina Palomo	Anchor Health Management	Supervisor	N	palomoc@anchorhm.org
24.	Clare Margason	United Way Bay Area	211 Director	N	cmargason@uwba.org
25.	Dana Swilley	Sonoma Unidos	Senior Program Manager	N	dswilley@sonomaconnect.org
26.	Daniella Donaldson	West County Health Centers	Project Manager	N	ddonaldson@wchealth.org
27.	Daphne Cummings	Unknown	Unknown	N	Unknown
28.	Denise Kirnig	Innovative Health Solutions	Unknown	N	denisekirnig@innovativehealths.com
29.	Elizabeth Vermilyea	Child Parent Institute	Deputy Director	N	elizabethv@calparents.org
30.	Esmeralda Salas	Population Health Innovation Lab	Research Associate II	N	esalas@phi.org
31.	Harriett Hernandez	Community Action Marin	Community Support Specialist	N	hsalinas@camarin.org
32.	Heather Criss	Mendocino County	Program Administrator	N	crissh@mendocinocounty.org
33.	Heather Frawley	Adventist Health Lake County	Program Manager	N	frawlehj@ah.org
34.	Helen Myers	Food For Thought	Director of Community Engagement	N	HelenM@FFTfoodbank.org
35.	Norma Lisenko	Innovative Health Solutions	CEO	N	normalisenko@innovativehealths.com
36.	Jade Weymouth	La Familia Sana	Executive Director	N	jweymouth@lafamiliasana.org
37.	Jessica Sanchez	Population Health Innovation Lab	Program Associate	N	jsanchez2@phi.org

38.	Joann Brewer	Redwood Community Services	Homelessness and Housing Program Manager	N	brewerj@redwoodcommunityservices.org
39.	Joanne Halliday	Marin Center for Independent Living	Consultant	N	joanne@marincil.org
40.	Joni Chroman	Monarch	Managing Director	N	jonichroman@gmail.com
41.	Karin Pimentel	Ceres Community Project	Contracts & Business Development Manager	N	kpimentel@ceresproject.org
42.	Katherine Flink	Unknown	Unknown	N	Unknown
43.	Kathryn Stewart	Population Health Innovation Lab	Director of Learning and Action	N	kastewart@phi.org
44.	Katie Christian	Population Health Innovation Lab	Communications Coordinator	N	KChristian@phi.org
45.	Ken Moeller	Community Action Partnership of Sonoma County	Consultant	N	'ken@kenamoe.com'
46.	Kerry Landry	Kerry Landry Health Care Consulting, LLC	Consultant	N	kerry@klhcc.com
47.	KARI HINKLE	Home & Health Care Management, Inc.	ECM AND CS PROGRAM MANAGER	N	khinkle@homeandhealthcaremgmt.com
48.	Kymberly Centaro	Community Support Network	Director	N	kym@csn-mh.com
49.	Laurel te Velde	Homeward Bound of Marin	Program Analysis Manager	N	ltevelde@hbofm.org
50.	Lauren Jacobson	Blue Path	Manager	N	lauren.jacobson@bluepathhealth.com
51.	Lori Houston	Sonoma County Dept of Health Services	Program Planning & Evaluation Analyst	N	Lori.Houston@sonoma-county.org
52.	Lynn Scuri	Partnership Health Plan of California	Regional Director	N	lscuri@partnershiphp.org
53.	Megan Kenney	Population Health Innovation Lab	Program Specialist	N	MKenney@phi.org
54.	Megan Van Sant	County of Mendocino	Senior Program Manager	N	vansantm@mendocinocounty.org
55.	Melinda Rivera	Sonoma County Department of Health Services	Legislative Policy and External Affairs	N	melinda.rivera@sonoma-county.org
56.	Nancy Geisse	Marin Center for Independent Living	Chief Strategy Officer	N	nancy@marincil.org
57.	Natalie Sousa	J&M Homecare Services, LLC	Strategic Partnerships Care Manager	N	nsousa@jmhomecare.com
58.	Natalie Wright	First 5 Sonoma County	Program Manager	N	nwright@first5sonomacounty.org
59.	Nora Reilly	Providence Adult Day Health	ECM Program Manager	N	nora.reilly@providence.org

60.	Patty Bruder	NCO	ED	N	pbruder@ncoinc.org
61.	Ramon Anguiano	Serene Health Group	Unknown	N	ramon@serenehealth.com
62.	Randi Arias-Fontenot	Department of Health Care Services	Nurse Consultant III	N	Randi.Arias-Fontenot@dhcs.ca.gov
63.	Rebecca Rose	rrose@pcgus.com	Program Manager, Health	N	Public Consulting Group
64.	Sage Wolf	Redwood Community Services	Director of Integrated Health	N	wolfs@redwoodcommunityservices.org
65.	Sarah Vetter	Santa Rosa Community Health	Program Director, Medi-Cal PHM	N	sarahve@srhealth.org
66.	Shari Brenner	Private Consultant	Consultant	N	sbrenner@sonic.net
67.	Stefani Hartsfield	Population Health Innovation Lab	Consultant	N	stefani@hartsfieldhealth.com
68.	Sue Grinnell	Population Health Innovation Lab	Director	N	SGrinnell@phi.org
69.	Tammy Chandler	North Coast Opportunities Inc	CalAIM Project Director/Community Action Development Director	N	tchandler@ncoinc.org
70.	Teresa Tillman	Committee on the Shelterless	CalAIM Implementation Consultant	N	teresat319@gmail.com
71.	Teresa White	Unknown	Unknown	N	Unknown
72.	Tiffany Gibson	NCO	Communications & Healthy Mendocino Director	N	tgibson@ncoinc.org
73.	Vanessa Davis	Kaiser Permanente	#N/A	N	vanessa.w.davis@kp.org
74.	Whitney Vonfeldt	Redwood Quality Management Company	ECM Program Director	N	vonfeldtw@anchorhm.org
75.	Zachary Ray	Native Spirit Consulting	Executive Director	N	zray@nativespiritconsulting.com
76.	Zenia Leyva Chou	North Coast Opportunities	CalAIM Project Manager	N	zchou@ncoinc.org

MCP Engagement (List all MCPs who should be engaged regardless of attendance)

MCP Name	Current Status of Relationship i.e. Excellent > Acceptable > Needs Improvement > In Direct Contact With > No Contact	MCP Engagement in Collaborative Yes/No	Engagement Concerns & Notes
Partnership HealthPlan of California (PHC)	Excellent	Yes	Members of PHC and Northern California PATH CPI Facilitators met on 11/14/23 to discuss regional collaboration of prioritized issues listed in the Issue Tracker.
In Direct Contact With	Kaiser Permanente	Yes	Prior to the 2024 start date of KPs transition into Napa, Marin and Sonoma, Kaiser was

			scheduled to present on the transition on 12/05.

KEY Acceptable	MCP attends 50%-75% collaborative convenings, MCP is responsive to collaborative requests but follow up is needed by facilitator
Excellent	MCP is engaged in collaborative, MCP attends 75%-100% collaborative convenings, MCP is presenter during collaborative meetings, MCP provides feedback and data where applicable, MCP works in partnership with facilitator and collaborative
In Direct Contact With	Facilitator has direct contact with MCP, MCP may not currently be attending collaboratives, MCP may be transitioning in 2024 and not yet active in collaborative
Needs Improvement	MCP is not or inconsistently engaged in collaborative, MCP attends 0%-25% of collaborative convenings, difficulties consulting with MCP, further partnership and relationship building is required
No Contact	There is no contact with MCP, MCP is not present for collaborative meetings, no relationship built with MCP

New Action Items (Identified this Meeting)

No.	Action Item	Owner	Created	Deadline	Status
1.	Request a meeting with CSN to submit a "Success Story" form for the Department of Health Care Services.	PHIL	12/05/2023	12/30/2024	Incomplete
2.	Develop a Q&A document for questions that were not answered. Once answered, the Q&A document will be sent to participants and will be added to the Readiness Roadmap website.	PHIL	12/05/2023	12/30/2024	Incomplete
3.	Facilitate and support conversations with local MTM entity and DHCS.	PHIL	12/05/2023	12/30/2024	Incomplete
4.	PHIL will identify subject matter experts, spotlight organizations, and request presentations on JI initiative in 2024.	PHIL	12/05/2023	12/30/2024	Incomplete
5.	PHIL will identify subject matter experts, spotlight organizations, and request presentations on Birth Equity initiative in 2024.	PHIL	12/05/2023	12/30/2024	Incomplete
6.	PHIL will identify subject matter experts, spotlight organizations, and request presentations on the data exchange framework in 2024.	PHIL	12/05/2023	12/30/2024	Incomplete
7.	Facilitate and support conversations between ECM, Community Supports providers and Kaiser Permanente.	PHIL	12/05/2023	Continuous	C Incomplete

Action Items (Ongoing)

No.	Action Item	Owner	Created	Deadline	Status
1.	Integrate tools for sustainability through the upcoming convenings, resources and conversations.	PHIL	8/28/2023	Continuous	Incomplete

No.	Action Item	Owner	Created	Deadline	Status
2.	Integrate updated tools and resources in the Pre-Contract and Post-Contract Process, Tools, and Solutions packet. Share updates with collaboratives and CPI Facilitators as they become available.	PHIL	8/28/2023	Continuous	Incomplete
3.	Follow up with organizations who show great and minimal progress along the Readiness Roadmap for support and guidance.	PHIL	6/29/2023	Continuous	Strategizing
4.	Re-vamp website with developing resource and information needs to continue serving current and prospective CPI participants	PHIL	5/30/2023	Continuous	Implementing
5.	Re-connecting with participants with whom we've had discovery calls and other forms of communication to provide continuous support, assess progress and satisfaction	PHIL	5/30/2023	Continuous	Implementing
6.	Develop *collaborative systems improvement* strategies.	PHIL	4/21/2023	Continuous	Strategizing
7.	Identify specific *capacity building* training.	PHIL	4/21/2023	Continuous	Outlined and finalizing
8.	*Network and relationship building* with new members added to the asset maps.	PHIL	4/21/2023	Continuous	Strategizing
9.	MERLIN to review accuracy of maps (e.g., Redwood Quality Management were combined with Aliados)	MERLIN	4/21/2023	Continuous	Updating with new CPI participants
10.	Develop *collaborative systems improvement* strategies.	PHIL	4/21/2023	Continuous	Strategizing
11.	Identify existing coalitions, collaboratives and roundtables for ECM, Community supports	PHIL and CPI Partners	3/30/2023	Continuous	Data synthesized by mapping project will help to identify these initiatives.
12.	Appropriately share DHCS updates as they become available during this season of major updates to ECM and CS policy and implementation.	PHIL	1/29/2023	Continuous	Implementing during convenings and newsletters.
13.	Recruitment of new CPI participants	PHIL and CPI Partners	1/1/2023	Continuous	Implementing

Open Action Items

No.	Action Item	Owner	Created	Deadline	Status
1.	PHIL will connect with Turning Point to design workflows on case consultation efforts.	PHIL	11/01/2023	11/15/2023	Incomplete

No.	Action Item	Owner	Created	Deadline	Status
2.	PHIL will connect with Child Parent Institute and Ranta Rosa Community Health Centers to learn more about their ECM implementation improvements.	PHIL	11/01/2023	11/15/2023	Incomplete
3.	PHIL will share updates with collaborative participants.	PHIL	11/01/2023	11/15/2023	Incomplete
4.	PHIL will connect with IHS to design workflows on their billing improvements.	PHIL	11/01/2023	11/15/2023	Incomplete
5.	Learn how HealthBegins is supporting their collaboratives with Case Consulting.	PHIL	11/01/2023	11/15/2023	Incomplete
6.	Identify strategies to address gaps in data exchange in organizations and in counties.	PHIL	11/01/2023	11/15/2023	Incomplete
7.	Collaborate with MCP to learn how we can reduce duplicative efforts with our collaborative's asset maps.	PHIL	11/01/2023	11/15/2023	Incomplete
8.	Design opportunities for shared leadership with participants to lead efforts.	PHIL	11/01/2023	11/15/2023	Incomplete
9.	Integrate recommended improvements in workplans and programing through 2024	PHIL	11/01/2023	11/15/2023	Incomplete
10.	Set a date for Kaiser to share updates with local ECM and CS providers.	PHIL	11/01/2023	11/15/2023	Incomplete
11.	Uplift provider concerns for DHCS' marketing strategies for ECM and CS.	PHIL	11/01/2023	11/15/2023	Incomplete
12.	Identify strategies to address gaps in outreach and recruitment strategies.	PHIL	11/01/2023	11/15/2023	Incomplete
13.	Asset Map Updates: PHIL will collaborate with PHC on their Provider Directory. PHIL will request reports from contracted entities monthly. PHIL will continue to adapt submission for the asset maps and will monitor its utilization.	PHIL	11/01/2023	11/15/2023	Incomplete
14.	PHIL will connect with Turning Point to design workflows on case consultation efforts.	PHIL	11/01/2023	11/15/2023	Incomplete
15.	PHIL will connect with Child Parent Institute and Ranta Rosa Community Health Centers to learn more about their ECM implementation improvements.	PHIL	11/01/2023	11/15/2023	Incomplete
16.	PHIL will share updates with collaborative participants.	PHIL	11/01/2023	11/15/2023	Incomplete
17.	PHIL will connect with IHS to design workflows on their billing improvements.	PHIL	11/01/2023	11/15/2023	Incomplete

No.	Action Item	Owner	Created	Deadline	Status
18.	Continue populating a system for collecting, collating, collaborating, and sharing workarounds to issues identified in the collaborative.	PHIL	6/14/2023	7/15/2023	Drafting
19.	Updating stakeholder information with participants' positions on the readiness roadmap to track advancement towards our Aim.	PHIL	5/30/2023	7/15/2023	Updating
20.	Incorporating breakout discussions into our Solutions Approach strategy	PHIL	5/30/2023	6/12/2023	Strategizing
21.	Create a concrete plan for the future of PHIL's Asset Maps	PHIL + MERLIN	4/21/2023	5/15/2023	Strategizing

Closed Action Items

No.	Action Item	Owner	Created	Deadline	Status
1.	Issue Tracker additions: • Accessibility to tools from PHC including z codes, g code sheets, and eligible participant lists. ECM and/or CS implementation barriers unique to school-based clinics.	PHIL	8/28/2023	9/15/2023	Completed
2.	Mapping care coordination processes.	PHIL	6/29/2023	8/5/2023	No longer a priority of the collaborative
3.	Propose monthly meetings with Camden, HC2, HealthBegins and Partnership to efficiently collate common issues among CPI collaboratives across Northern California counties	PHIL	5/30/2023	6/5/2023	Completed
4.	Strategize methods of collecting the step all participants are at on the Readiness Roadmap (polled during meetings as well as follow-up conversations)	PHIL	4/21/2023	5/5/2023	Completed
5.	A report of the initial Asset Mapping Survey findings is to be shared with the participants on the website.	MERLIN	4/21/2023	6/5/2023	Completed
6.	Incorporating charter feedback	PHIL	1/1/2023	3/31/2023	Completed
7.	PATH CPI Asset Mapping Survey	PHIL	1/1/2023	5/15/2023	Completed