Contents
Message from the Co-Chairs..................................................................................................................3
Integration Forum – August 2016 ........................................................................................................5
Integration Forum’s Collaborative Structure and Activities .................................................................5
  All Partners Calls ..................................................................................................................................5
  Planning Committee ..............................................................................................................................6
  Successes/Measures Committee ..........................................................................................................7
  Sustainability Committee ......................................................................................................................8
  Workforce Committee .........................................................................................................................9
  Communications Committee .............................................................................................................11
  Resources ..........................................................................................................................................11
Strategic Planning for 2016 and Beyond..............................................................................................12
Appendix A: 2014-2016 Strategic Map ...............................................................................................14
Appendix B: Charter ..............................................................................................................................15
Appendix C: Participating Organizations ..............................................................................................18
Appendix D: ASTHO Staff ....................................................................................................................19
Message from the Co-Chairs
Sharon Moffatt and Ron Yee

Dear Primary Care and Public Health Partners,

In July 2012, the Association of State and Territorial Health Officials (ASTHO), the Institute of Medicine (IOM), and United Health Foundation partnered to host a two-day meeting to develop a strategic map for primary care and public health integration. The meeting was held in response to IOM’s March 2012 report, Primary Care and Public Health: Exploring Integration to Improve Population Health, and brought together key individuals from both sectors. The map outlined a strategic approach to integration created in response to the IOM report. Meeting participants included state and local health officials, federal agencies, insurance providers, individuals who wrote the IOM committee report, academic organizations, and professional associations.

Through a facilitated process, participants developed a strategic map to achieve the following objectives:

- Develop a strategy to strengthen and support public health and primary care integration that builds on Primary Care and Public Health: Exploring Integration to Improve Population Health.
- Prioritize efforts to increase integration of public health-primary care infrastructure.
- Identify possible collaborations and partnerships in and between primary care and public health entities to strengthen resources to improve the health of populations, achieve higher quality care, and lower healthcare costs.

As a result of this strategic mapping process, ASTHO launched a national collaborative to actively advance the priorities identified in the strategic map. The ASTHO-Supported Primary Care and Public Health Collaborative grew to include more than 50 organizations and 100 individual partners seeking to inform, align, and support the implementation of integrated efforts that improve population health and lower healthcare costs.

In 2014, ASTHO hosted a second strategic mapping session for the collaborative, which resulted in significant changes to the committee structures and functions, as well as a name change to the Integration Forum. At this session, national and state leaders in primary care and public health, including state health officials and partners, met to identify opportunities to expand on the work of the Forum in its first two years in an effort to narrow the focus of the Forum’s priorities. The 2014 strategic plan will expire at the end of this year.

In order to facilitate a new strategic direction of the Integration Forum, ASTHO leadership has conducted a series of strategic planning calls with committee chairs, members, and non-active members to discuss emerging issues and opportunities and to develop recommendations for next steps. We are excited to work with new and existing partners to shape our vision for the future, and we will continue to provide frequent communication and connections, which have been key to the ongoing success of this national learning forum. The following are examples of this ongoing connectivity:
Four committees have met to share work in the field through presentations, discussions, and review of materials and products. Each committee focused on a different topics: successes and measures, workforce, sustainability, and communication, and was co-chaired by a primary care leader and a public health leader to further model the desired partnership between primary care and public health.

All partners and committee members participated in a regular All Partners call that hosted high level speakers and presentations from primary care and public health on topics related to all aspects of integration, from the collaboration efforts to address Zika to the work of the Center for Medicare & Medicaid Innovation to support a new Accountable Health Communities Model.

ASTHO sends a monthly newsletter to all partners that highlights important resources, tools, and meetings.

As we continue on this journey to improve overall population health and the triple aim, it is crucial that healthcare, public health, payers, communities, and businesses work together to pool our resources and be aware of the rapidly changing environment so as not to duplicate efforts and to learn from successes and challenges. Though the Integration Forum is merely one among many groups trying to promote interoperability between sectors, we hope to continue to collaborate and contribute to better health and well-being for all Americans.

Sincerely,

Sharon Moffatt
Senior Advisor, Public Health Leadership and Transformation
Association of State and Territorial Health Officials

Ron Yee
Chief Medical Officer
National Association of Community Health Centers
Description

The Integration Forum (the Forum) is a partnership of more than 50 public health and primary care organizations and over 100 individual partners, collaborating to accelerate integration efforts to improve population health and lower healthcare costs. The Forum is comprised of partners from various sectors of the health industry, including, but not limited to, representatives from state and local public health agencies, medical societies, health insurance plans, federal agencies, academia, and more.

Background

The Integration Forum (formerly known as the ASTHO-Supported Primary Care and Public Health Collaborative) was formally launched by ASTHO in 2012 in response to a report of the National Academy of Medicine (formerly known as the IOM) that explored and recommended ways in which public health and primary care can integrate efforts to improve population health. In collaboration with the National Academy of Medicine and United Health Foundation, a strategic map for the Integration Forum was developed with the help of state and local health officials, federal agencies, health insurance plans, professional medical societies, academicians and the individuals who authored the IOM committee report.

In 2014, ASTHO hosted a second strategic mapping session for the Integration Forum in partnership with national and state leaders in primary care and public health, including state health officials and partners. The goal of this two day meeting was to identify opportunities to expand on the work of the Forum in its first two years. Significant changes were made to the Forum’s structure and function during this planning meeting in an effort to narrow the focus of the Forum’s priorities. As a result, in 2014, the Integration Forum began focusing its efforts on three strategic priorities, instead of five priorities as defined by the 2012 strategic map (see Appendix A for the 2014 Strategic Map). The Integration Forum’s strategic plan will expire in 2016.

Integration Forum’s Collaborative Structure and Activities

All Partners Calls

The Integration Forum holds regular calls for all forum members with presentations from primary care and public health and sharing of committee activities. Each call also offers the opportunity for new partners to introduce themselves to the full Integration Forum, as well as for members to give organizational updates and announcements.

The All Partner Calls are co-facilitated by Ron Yee, chief medical officer, National Association of Community Health Centers, and Sharon Moffatt, senior advisor, Public Health Leadership and Transformation, ASTHO.

September 2015

On the September 22, 2015 All Partners Call, presenters described the BUILD Health Challenge, which supports Bold, Upstream, Integrated, Local, and Data-Driven collaborations. Presentation slides are available. Brian Castrucci, chief strategy officer for the de Beaumont Foundation, gave an overview of
the BUILD Health Challenge. He was followed by two presenters, who discussed how Integration Forum members can learn from BUILD and apply their learnings in their own work. Chris Kabel, senior program officer for the Kresge Foundation, discussed the implementation of BUILD communities. Rocaille Roberts, director, Office of Policy and Planning for Harris County Public Health & Environmental Services, presented on the Pasadena Texas Food Systems, which is Harris County’s BUILD Health Partnership’s visionary work to improve nutrition equity.

December 2015
The December 1, 2015 All Partners Call introduced ASTHO’s President’s Challenge: Achieving Health Equity and Optimal Health for All (Presentation slides are available). Ed Ehlinger, commissioner of the Minnesota Department of Health and 2015-2016 ASTHO president, discussed how disparities affect the health of the entire population, and he proposed the implementation of a “health in all policies” approach with health equity as the goal.

January 2016
The January 26, 2016 All Partners Call featured Build Healthy Places Network Innovations, presented by Dr. Doug Jutte, executive director, Build Healthy Places Network. Build Healthy Places was created to connect audiences across sectors, provide access to research and best practices, highlight the health-related value of community development work, and encourage and enable measurement of health-related impact. Dr. Jutte shared information on the network’s work in zip code improvement, funding innovations, and hospital partnership development.

April 2016
On the April 8, 2016 All Partners Call, Jim Macrae, acting administrator, Health Resources and Services Administration (HRSA) presented on Health Resources and Services Administration Priorities. Mr. Macrae also shared an overview of HRSA’s strategic goals, including: to improve access to quality healthcare and services, to strengthen the health workforce, to build healthy communities, to improve health equity, and to strengthen HRSA program management and operations.

June 2016
The June 9, 2016 All Partners Call discussed implications of Zika Virus – Mitigating Adverse Pregnancy and Birth Outcomes (Presentation slides are available online). Debra Hawks, senior director, Practice Activities, Obstetrics and Immunization American Congress of Obstetricians and Gynecologists (ACOG), provided an overview of ACOG’s resources, clinical guidance, and practical advisories to its membership regarding maternal health. Caroline Stampfel, director of programs, Association of Maternal and Child Health Programs (AMCHP), followed with a presentation on AMCHP’s policy and legislative activities and approach to Zika response.

Planning Committee
The Planning Committee was formed to have final decisionmaking authority on the revised strategic map, deciding on the structure of the Forum and committee charges, and funding and resource development. The Planning Committee aims to: assist with collaborative decisionmaking processes, assist with establishing committee priorities, align committee efforts, coordinate the marketing and outreach efforts of the Integration Forum, and strategize means to ensure there are sufficient resources to support committee and forum work.
The Planning Committee charter determined that the committee would convene for one year (July
2014-July 2015), at which time its members would assess its continuation and value. In September 2015,
the committee agreed to continue meeting ad hoc every 2-4 months and to reevaluate the meeting
schedule in summer 2016.

The Planning Committee is co-chaired by Sharon Moffatt (ASTHO) and Ron Yee (NACHC). Committee
members include:

- John Auerbach (CDC)
- Jeff Engel (CSTE)
- Fran Harding (SAMHSA)
- Bill Kassler (IBM)
- Karen Kmetik (AMA)
- Sarah Linde (HRSA)
- Lloyd Michener (Duke University)
- Jose Montero (Cheshire Medical Center/Dartmouth-Hitchcock Keene)
- David Sundwall (University of Utah)
- Julie Wood (AAFP)
- Ted Wymyslo (OH-CHC)

**Successes/Measures Committee**

The Successes/Measures Committee aims to determine appropriate measures for successful integration.
The committee meets bimonthly.

The Successes/Measures Committee is co-chaired by Sharon Moffatt (ASTHO) and Lloyd Michener
(Practical Playbook). Committee members include:

- Girma Alemu (HRSA)
- Brian Castrucci (de Beaumont)
- Natasha Coulouris (HRSA)
- Merle Cunningham (NYAM)
- Jeff Engel (CSTE)
- Malika Fair (AAMC)
- Jim Galloway (Admiral Innovations)
- Jan Genevro (AHRQ)
- Ed Hammond (Duke)
- Carrie Horwitch (ACP)
- Gail Janes (CDC)
- Bill Kassler (IBM)
- Arthur Kaufman (UNM)
- Denise Koo (CDC)
- Jose Montero (Cheshire Medical Center/Dartmouth-Hitchcock Keene)
- Deborah Porterfield (UNC)
- Maria Prince (Aetna)
- Larry Prybil (UKY)
- Rebecca Roper (AHRQ)
- Douglas Scutchfield (UKY)
- Mina Silberberg (Duke)
- Paula Soper (ASTHO)
- Paul Targonski (UVA)
- David de Voursney (SAMHSA)
- Janet Williams (AMA)
- Ted Wymyslo (OH-CHC)
- Matthew Wynia (AMA)

_**September 2015**_

The September 15, 2015 meeting featured a Measures Sub-group Update by subgroup members
Deborah Porterfield, University of North Carolina, and Gail Janes, CDC. The updated was followed by a
presentation on the Institute for Healthcare Improvement SCALE initiative (100 Million Healthier Lives)
from Soma Stout, executive external lead for Health Improvement, Institute for Healthcare
Improvement, and executive lead, 100 Million Healthier Lives Leadership Team.

_**November 2015**_
The November 20, 2015 meeting provided an update on the National Quality Forum Population Health Action Guide 2.0, from Nancy Wilson, senior advisor, Agency for Healthcare Research and Quality, and Allen Leavens, senior director, National Quality Forum. Action Guide 1.0 provides guidance to communities at varying levels of readiness to do population health work, and the revised 2.0 version has been vetted with communities for feedback. The biggest theme is that all communities were interested in receiving additional guidance on how to establish new connections across sectors, as well as on how to maintain existing collaborations and build on them over time.

**March 2016**

The March 9, 2016 meeting featured a presentation by Laura Seeff, director, Office of Health Systems Collaboration, Office of the Associate Director for Policy, CDC, entitled, 6|18 Initiative: Accelerating Evidence into Action. Through a webinar format, the committee members reviewed the 6|18 Initiative Discussion Paper.

**May 2016**

The May 3, 2016 meeting featured a presentation on the Accountable Health Communities Model and was led by Chisara Asomugha, director, Division of Population Health Incentives & Infrastructure, Center for Medicare & Medicaid Innovation (CMMI). The committee members learned about the CMMI Accountable Health Communities Model.

**July 2016**

The July 27, 2016 meeting provided an overview of the National Committee on Vital and Health Statistics (NCVHS) Community Health and Wellbeing Measurement Framework. William W. Stead, co-chair, Population Health Subcommittee, NCVHS, requested feedback from committee members on the newly released version of the recommended measurements following the publication of the 2016 Environmental Scan of Existing Domains and Indicators and summary of the 2016 Workshop Report on Advancing Community-Level Core Measurement. Presentation slides and NCVHS Framework are available.

**August 2016**

The August 19, 2016 meeting featured two presentations. Stephen Cha, director, State Innovations Group, Center for Medicare and Medicaid Innovation, Centers for Medicare and Medicaid Services, provided an overview of the CMMI State Innovation Models Initiative. He was followed by Elizabeth Walker-Romero, senior director, Health Improvement, ASTHO, who discussed the ASTHO Million Hearts State Learning Collaborative to Improve Blood Pressure Control.

**Sustainability Committee**

The Sustainability Committee works to identify resources available and needed to support integration work. The committee is scheduled to meet bimonthly.

The Sustainability Committee has three joint chairs: John Auerbach (CDC), David Sundwall (University of Utah), and Julie Wood (AAFP). Committee members include:

- Mike Barry (ACPM)
- Chris Carroll (SAMHSA)
- Sana Chehimi (Prevention Institute)
- Merle Cunningham (NYAM)
- Ardis Davis (ADFM)
- Steve Holloway (CO)
- Bill Kassler (IBM)
- Jim Hester (CMMI)
November 2015
The November 18, 2015 meeting featured John Auerbach, associate director for policy, CDC, who presented on the 6|18 Initiative: CDC Collaboration with Health Care Purchasers, Payers, and Providers. CDC’s goal is to create tools for public health that are useful for interactions with the delivery system, and so public health can make positive contributions to discussions occurring at those tables. Julie Cox-Kain, senior deputy commissioner and deputy secretary of Health and Human Services, Oklahoma State Department of Health, also gave a state example on Oklahoma’s tobacco cessation work related to the 6|18 Initiative.

January 2016
The January 22, 2016 meeting included a presentation on The Hilltop Institute’s Community Benefit/Community Health Needs Assessment Work by Gayle Nelson, director, Hospital Community Benefit Program, The Hilltop Institute. The Hilltop Institute serves as a central resource created specifically for state and local policymakers who seek to ensure that tax-exempt hospital community benefit activities are responsive to significant community health needs.

Workforce Committee

The Workforce Committee identifies opportunities for integration in primary care and public health workforce education, training, and certification. The committee meets bimonthly, typically on the last Friday of every other month.

The Workforce Committee is co-chaired by Yumi Jarris (Georgetown University School of Medicine) and Randy Wykoff (East Tennessee State University). Committee members include:

- Elaine Auld (SOPHE)
- Wendy Braund (WY-SHO)
- Frank Cerra (UMN)
- Merle Cunningham (NYAM)
- Patricia Drehobl (CDC)
- Terry Dwelle (ND – SHO)
- Ashley Edmiston (NACCHO)
- Emma Eggleston (Harvard)
- Malika Fair (AAMC)
- Nicholas H. Fiebach (Columbia)
- John Finnegan (UMN)
- Paul Halverson (IU)
- Kate Blackman (NCSL)
- Anne Herron (SAMHSA)
- Stan Kozakowski (AAFP)
- Alice Kuo (UCLA)

- Lloyd Novick (ECU)
- Vera Oziransky (The Vitality Group)
- Donna Petersen (USF)
- Bob Phillips (ABFM)
- David Popiel (GW)
- Laura Rudkin (UTMB)
- Julia Sheen-Aaron (HRSA)
- Harrison Spencer (ASPPH)
- Freya Spielberg (GW)
- Joan Stanley (AACN)
- Sharon Stanley (APHN)
- Justine Strand de Oliveira (Duke)
- Stephen Wyatt (UKY)
- Ted Wymyslo (OH-CHC)
- Elizabeth Weist (ASPPH)
- Matt Wynia (AMA)
November 2015
The November 18, 2015 meeting featured a presentation on Innovation and Transformation in Public Health and Medicine: Launching a dual degree program at the University of Miami Miller School of Medicine by Julie Kornfield, assistant dean, Public Health, University of Miami Miller School of Medicine. The dual degree program was supported by the Dean of the University of Miami Miller School of Medicine, who wanted students to graduate with two degrees and to prepare them with the skills to manage the changing healthcare delivery system.

January 2016
The January 29, 2016 meeting featured Alina Baciu, senior program officer in the Board on Population Health and Public Health Practice at the Institute of Medicine (IOM), who discussed Quality Measures for Population Health: Highlights from an IOM report and roundtable workshop. The report describes the purpose of measurement and it offers a lucid and practical guide to thinking about quality measurement in public health practice against the evolving backdrop of the Affordable Care Act, hospital community benefit efforts, and community health needs environment and the initial mixed forays into accountable health communities.

March 2016
The March 25, 2016 meeting was led by J. Lloyd Michener, professor and chair, Department of Community and Family Medicine, Duke Health. He discussed Population Health Milestones in Graduate Medical Education. Duke Community and Family Medicine is part of a multi-organizational team that has raised the visibility of population health in medical training, and the full report on this topic is available online.

May 2016
The May 27, 2016 meeting features two presentations on Behavioral Health Integration and Financing (Presentation slides available online). The Workforce Committee was joined by Chris Carroll, director, Health Care Financing and Systems Integration, Substance Abuse and Mental Health Services Administration (SAMHSA), and Alex Ross, senior behavioral health advisor, Office of Planning, Evaluation and Analysis, Health Resources and Services Administration (HRSA). Mr. Carroll offered a presentation titled, “Behavioral Health is Essential to Health,” and Dr. Ross followed with his presentation, “Increasing Access to Behavioral Health Services.” Additional SAMHSA/HRSA Center reports are also available online.

July 2016
The July 29, 2016 meeting showcased CDC’s Health and Well-Being for All: Meeting in a Box through a presentation by Denise Koo, advisor to the associate director for policy, CDC, and Virginia Watson, instructional designer, the CDCE Fellowship Legacy Project. Presentation slides are available. The Meeting in a Box tool helps to accelerate learning about social determinants, and it can be used by hospitals, public health, community-based organizations, and other stakeholder to support multi-sector collaboration to improve community health.

August 2016
On the August 18, 2016 webinar, Robert P. Pack, associate dean, Academic Affairs, College of Public Health, East Tennessee State University (ETSU), discussed Lessons Learned in Tennessee: A Decade into the Prescription Drug Abuse Epidemic. Dr. Pack also provided his perspective as director of the new ETSU Center for Prescription Drug Abuse Prevention and Treatment, which grew out of a university and
community collaborative that was started in 2012 to address the regional problem of prescription opioid abuse. Presentation slides are available.

Communications Committee

The Communications Committee supports internal communication and promotes and spreads the Integration Forum’s work externally.

The Communications Committee is chaired by Dave O’Gurek (AAFP). Committee members include:

- Brian Altman (SAMHSA)
- Sana Chehimi (Prevention Institute)
- Michelle Daniels (HRSA)
- Carrie Horwitch (ACP)
- Susan Laird (CDC)
- Sarah Linde (HRSA)
- Sara Ramey (CSTE)
- Sarah Thomas (AAFP)
- Danielle Turnipseed (AHIP)

January 2016

On the January 7, 2016 webinar, the committee discussed recent activities, including the adoption of a new name and logo, a new newsletter template, a survey of members, and recent blog posts and videos. Dave O’Gurek, chair, then led a review of introductory packet materials, soliciting feedback from committee members on what sort of materials various organizations are utilizing in member toolkits and how the Communications Committee can assist with those efforts and products.

Resources

Leaders and stakeholders within primary care and public health have access to strategies and models for engagement through the Integration Forum’s communication channels, which include a monthly newsletter, ASTHO’s Primary Care and Prevention Newsletter, and ASTHO’s website, which provides a clearinghouse of resources, tools and products developed and/or recommended by the Forum.
Strategic Planning for 2016 and Beyond

The Integration Forum’s strategic planning for 2015-2016, included the name change from the ASTHO-supported Public Health and Primary Care Collaborative, to Integration Forum. The impetus for this change was to re-brand and re-launch the Integration Forum as a “think tank” and leader in convening key stakeholders and organizations with great ideas on the integration of primary care and public health.

Strategic Planning with Integration Forum Members

The Integration Forum’s strategic map will expire in 2016. To plan for next steps, ASTHO leadership convened individual strategic planning calls with the Forum committee chairs, as well as current and non-active members between June and September 2016. Questions were sent to participants prior to each call to help guide the discussion and identify trends. ASTHO compiled a summary of common themes that emerged, which are noted below.

The call objectives included:
• Identifying Integration Forum challenges and strengths
• Discussing emerging issues and opportunities within the broader landscape of integration
• Developing recommendations for next steps for the Integration Forum

Strategic Planning Questions:
1. What is the Integration Forum’s distinct role as it relates to the broader landscape of integration?
2. What topic areas, enabling learning or training tools, and resources would you like to see discussed, developed, and/or disseminated by the Forum that would be useful to the broader integration community?
3. What are your recommendations on advancing the discussion of integration focusing on the social determinants of health, integration of public health, healthcare, and social services?
4. What are your thoughts on aligning the Forum each year with the President’s Challenge?
   o How would this add value to the broader landscape of integration?
   o Would this be of interest to our current partners and members?
5. Should we keep the committees and structure in place or reduce the number of committees and realign their focus?

Themes from Strategic Planning Calls with Forum Leaders and Members

1. Theme #1: Value
   Call participants believe there is value in the Integration Forum, but it needs to be reframed and reinvigorated. To distinguish the role of the Forum, there must be added value from a deeper lens.

2. Theme #2: Products and Topics
   The Integration Forum needs defined products and deliverables to disseminate to the broader integration community and add value. The Forum should focus on public health integration efforts at the national, state, and local levels, as well as help further an understanding of how all levels can collaborate with one another. State and local examples of integration and collaboration would be helpful to many partners.
3. **Theme #3: Scope**
   The Integration Forum should broaden the focus to include the social determinants of health. The scope should expand beyond public health integration to incorporate behavioral health, environmental health, health systems, and integration with Medicaid, among other topics.

4. **Theme #4: President’s Challenge**
   The Integration Forum should consider aligning efforts with the ASTHO’s President’s Challenge, but the structure should remain flexible enough to address emerging integration issues.

5. **Theme #5: Structure**
   The strategic vision of the Integration Forum will define its operational choices and committee structures.

Following the individual strategic planning calls ASTHO held with the Integration Forum stakeholders, ASTHO staff are working on a set of recommendations to align the future direction of the Forum with the themes from these calls. In October 2016, ASTHO will host a strategic planning call with the Integration Forum Planning Committee to help solidify next steps and recommendations. After receiving feedback from the Planning Committee, ASTHO will launch a modified Integration Forum in November 2016.
Appendix A: 2014-2016 Strategic Map

Primary Care and Public Health Integration
Strategic Map: 2014-2016

Accelerate Integration Efforts that Improve Population Health and Lower Health Cost

A
Accelerate Integration Through Innovation and Dissemination
1. Promote the Value Proposition/ Business Case for Integration
2. Identify & Disseminate Concepts, Methods and Tools to Support Integration
3. Use Professional Meetings to Promote Integration
4. Help Shape the Future Workforce Required for Successful Integration
5. Promote Ways Health Information Technology Can Accelerate Integration

B
Leverage Initiatives and Opportunities for Integration
6. Leverage Community Health Needs Assessment and Improvement Efforts
7. Leverage SIM and State Initiatives to Increase Effective Integration
8. Leverage National Initiatives to Integrate Behavioral Health and Promote Integration
9. Emphasize Integration in Primary Care Facilitation and Community Infrastructure
10. Use QA/QI Processes to Engage Primary Care and Public Health to Improve Population Health

C
Expand and Strengthen the Collaboration and Integration
11. Encourage Bold Leadership Among Organizations to Assure Integration
12. Facilitate the Success of Partnering Organizations in Accelerating Integration
13. Develop and Implement a Strategy for Recruiting and Engaging Partners
14. Develop and Implement the Organizational Structure to Support Collaboration
15. Secure the Needed Resources to Support Collaboration
16. Develop and Implement Effective Evaluation

D
Realignment Resources and Create Sustainable Models to Support Integration

E
Realignment Infrastructure to Support Integration and Sustainability
Appendix B: Charter

CHARTER: Planning Committee for the ASTHO-Supported Primary Care and Public Health Collaborative

May 1, 2015

Mission/Goal

The goal of the Planning Committee serve as the guiding body that best enables the PCPH Collaborative to advance the integration of primary care and public health and ultimately achieve the triple aim:

- Improve the patient experience of care (including quality and satisfaction);
- Improve the health of populations; and
- Reduce the per capita cost of health care.

The committee will convene for one year (July 2014- July 2015), at which time members will reevaluate its necessity, purpose, and assess the value of continuing in the same capacity.

Purpose

The purpose of the Planning Committee is to:

- Serve as a decision-making body – This group will serve as a decision-making body for the PCPH Collaborative, so that one sole organization is not responsible for making decisions that affect the group as a whole.
  - Strategic Map - The planning committee will have final approval on any changes to the PCPH Integration Strategic Map, including deciding when the map needs to be updated, and finalizing revised maps.
  - Collaborative structure – The committee will make decisions on any significant issues related to the collaborative structure, i.e. forming/dissolving/merging Tracks of Work Committees, designating Co-chairs, and assigning/approving members to committees.
- Set Committee Priorities – Assist in determining each committee’s charge and priorities.
- Align Committee Efforts – Making sure each committee’s activities are coordinated and not duplicative of other committees work.
- Coordinate marketing and outreach efforts of the collaborative – much of this work will align with the Communications Committee, but the planning committee will provide guidance and oversight to coordinate efforts of the entire collaborative.
  - Review and Approve a Communications Plan
  - Engaging other partners – i.e. which partners we need to reach out to who are not involved, how to market the collaborative to others.
  - Dissemination of efforts – The committee will plan for disseminating any resources and work that comes out of the committees, and sharing information and best-practices throughout collaborative member networks.
Speaking engagements, publications – Planning and identifying speaking engagements at conferences, etc., and reviewing and suggesting opportunities for publication of the work.

- Identify funding opportunities and strategize means to ensure there are sufficient resources to support committee and collaborative work.

Roles and Responsibilities

**Primary Care Co-Chair**: Serves as facilitator. Works with ASTHO staff and co-facilitator to develop agendas for each call. Bi-monthly calls with co-chair and ASTHO staff to coordinate work in between committee meetings.

**Public Health Co-Chair**: Serves as facilitator. Works with ASTHO staff and co-facilitator to develop agendas for each call. Bi-monthly calls with co-chair and ASTHO staff to coordinate work in between committee meetings.

**ASTHO Support Staff**: schedules up call times/dates, sends out meeting invites, develops agendas (with oversight from the co-chairs), takes and distributes meeting minutes.

Responsibilities:

- Committee Members may not be available for all meetings, yet meetings will proceed when majority of members are present.
- Committee members may decide to cancel a meeting to allow members to participate in another integration-related activity (must have agreement of the majority of members).
- Committee members shall not delegate participation and decision making authority.

Connections

The Planning Committee shall coordinate and communicate its efforts with the co-chairs of the tracks of work committees, to ensure alignment, agreement, and understanding of the work and goals. The planning committee will also report out on any major decisions on the bi-monthly All Partner calls.

Team Procedures

Meetings:
- When: bi-weekly until end of September 2014 and then ad-hoc starting in October 2014.
- Where: via phone or webinar.
- Duration: 1 hour

Agenda:
- Members will prioritize agenda items with a focus on immediate issues that require decision making.
- ASTHO support staff will draft the agendas with input from the committee members, and the co-chair will finalize the agendas.

Methods:
• Decision making will be by consensus. “Silence means assent.”
• Facilitated discussion focusing on specific areas of improvement and plan for solutions.
• Summary notes will be drafted and distributed to all members by ASTHO staff.
• Committee members will suggest high priority topics for all partner calls and help with identifying speakers.

Additional time commitments:
- Members of the planning committee will be asked to participate on the All Partner calls, as well as designated TOW committee calls.

Committee Performance Assessment:
Utilize an electronic evaluation form to inform future meeting improvements.
Appendix C: Participating Organizations

Private/Non-Profit Organizations
- Admiral Innovations
- American Academy of Family Physicians (AAFP)
- American Board of Family Medicine (ABFM)
- American College of Physicians (ACP)
- American College of Preventative Medicine (ACPM)
- American Health Care Association (AHCA)
- America’s Health Insurance Plans (AHIP)
- Association of Public Health Nurses (APHN)
- de Beaumont Foundation
- Council for State and Territorial Epidemiologists
- Deloitte Consulting
- Johnson & Johnson
- Kaiser Permanente
- Mayo Clinic
- National Academy for State Health Policy (NASHP)
- National Association of Community Health Centers (NACHC)
- National Association of Medicaid Directors (NAMD)
- National Committee for Quality Assurance (NCQA)
- RTI International
- The Lewin Group
- Trust for America’s Health
- UnitedHealth Group

State/Local Health Agencies
- California Department of Healthcare Services (CA)
- Colorado Department of Public Health (CO)
- Delaware Department of Health and Human Services (DE)
- Georgia Department of Public Health (GA)
- Kansas Department of Health and the Environment (KS)
- National Association of County and City Health Officials (NACCHO)
- New Hampshire Department of Health and Human Services (NH)
- North Dakota Department of Health (ND)
- Ohio Department of Health (OH)
- Rhode Island Department of Health (RI)
- Wisconsin Primary Health Care Association (WI)

Federal Agencies
- Agency for Health Research and Quality (AHRQ)
- Center for Disease Control and Prevention (CDC)
- Center for Medicare and Medicaid Services (CMS)
- Center for Medicare and Medicaid Innovation (CMMI)
- Health Resources and Services Administration (HRSA)
- Institute of Medicine (IOM)

Universities
- Duke University
- George Washington School of Public Health and Health Services
- Georgetown University
- University Of New Mexico
- University of Utah
- Virginia Commonwealth University
Appendix D: ASTHO Staff

Sharon Moffatt
ASTHO Senior Advisor, Public Health Leadership and Transformation
Co-Lead of All Partners Calls
Co-Chair of Successes and Measures Committee

Mary Ann Cooney
ASTHO Chief, Health Systems Transformation
Senior Project Advisor

Megan Miller
ASTHO Senior Director, Health Integration
Senior Project Advisor

Natalie Slaughter
ASTHO Director, Health Integration
Project Lead

Anna Bartels
ASTHO Analyst, Health Systems Transformation
Project Support

About ASTHO
ASTHO is the national nonprofit organization representing public health agencies in the United States, the U.S. Territories, and the District of Columbia, and over 100,000 public health professionals these agencies employ. ASTHO members, the chief health officials of these jurisdictions, formulate and influence sound public health policy and ensure excellence in state-based public health practice. ASTHO’s primary function is to track, evaluate, and advise members on the impact and formation of public or private health policy which may affect them and to provide them with guidance and technical assistance on improving the nation’s health.