MINNESOTA

FINAL COMMITTEE AGENDA

BOARD OF HENNEPIN COUNTY COMMISSIONERS HEALTH COMMITTEE

THURSDAY, NOVEMBER 15, 2018

1:30 PM

Chair: Marion Greene, District 3
Vice-Chair: Debbie Goettel, District 5

Members: Mike Opat, District 1

Linda Higgins, District 2
Peter McLaughlin, District 4
Jan Callison, District 6
Jeff Johnson, District 7

1. Presentation

A. 2019 Proposed Hennepin Healthcare System, Inc. Financial Plan

2. Minutes From Previous Meeting

A. 10/30/2018 Health Minutes

3. New Business

Routine Items

A. 18-0471

Human Services & Public Health resolution, including contracts and amendments to contracts with HEALTH SERVICES providers – Report 1819

Items for Discussion and Action

B. **18-0472**

Agmt PR00000632 with Health Management Systems, Inc., for services and cloud-based software related to care management, 12/01/18–36 months from production go-live date, with two optional one year extensions through 2024, NTE \$1,427,500

C. 18-0473

Response time standards recommendation for Advanced Life Support Code 3 and Code 2 ambulances within Hennepin County per Hennepin County Ordinance 9, 01/01/19-12/31/20

Addendum

D. **18-0501**

Approval of the 2019 Hennepin Healthcare System, Inc. Financial Plan as submitted by the Hennepin Healthcare System, Inc. Board of Directors

E. 18-0502

Approval of slate of candidates for three year terms on the HHS Board of Directors

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COMMITTEE MINUTES

Chair: Marion Greene, District 3 Vice-Chair: Debbie Goettel, District 5

BOARD OF HENNEPIN COUNTY COMMISSIONERS HEALTH COMMITTEE

TUESDAY, OCTOBER 30, 2018

1:30 AM

Members: Mike Opat, District 1
Linda Higgins, District 2
Peter McLaughlin, District 4
Jan Callison, District 6
Jeff Johnson, District 7

Commissioner Marion Greene, Chair, called the meeting of the Health Committee for Tuesday, October 30, 2018 at 2:25 PM. All Commissioners were present except Commissioner Jeff Johnson who was absent.

1. Minutes From Previous Meeting

A. 10-16-2018 Minutes

APPROVED

Commissioner Peter McLaughlin moved to approve the Minutes from the Previous Meeting, seconded by Commissioner Mike Opat and approved - 6 Yeas 1 Absent: Johnson

2. New Business

Routine Items

A. 18-0446

Human Services & Public Health resolution, including contracts and amendments to contracts with HEALTH SERVICES providers – Report 1818

CONSENT

Commissioner Peter McLaughlin moved to approve, seconded by Commissioner Debbie Goettel and approved - 6 Yeas 1 Absent: Johnson

B. **18-0447**

Amd 1 to Agmt PR0000474 with Intersection Media, LLC to provide Hennepin Health advertising panels and space on city buses and light rail platforms for health plan promotion purposes, no change to contract dates, incr NTE by \$5,000 for new total NTE of \$104,570

CONSENT

Commissioner Mike Opat moved to approve, seconded by Commissioner Marion Greene and approved - 6 Yeas 1 Absent: Johnson

C. 18-0448

Agmt MDHA189253 with the MN Dept of Health to provide Hennepin County delegated authority to commence action related to Tuberculosis Health Threat Act; 12/31/18-12/31/23, confirm Hennepin County's ability to further delegate this authority

CONSENT

Commissioner Jan Callison moved to approve, seconded by Commissioner Debbie Goettel and approved - 6 Yeas 1 Absent: Johnson

Items for Discussion and Action

D. 18-0449

Acceptance of \$285,000 from federal Health Resources and Services Administration to expand substance use disorder and mental health services at NorthPoint clinics, 09/01/18– 08/31/19; supp appr of \$25,000 to 2018 HSPH budget

CONSENT

Commissioner Linda Higgins moved to approve, seconded by Commissioner Marion Greene and approved - 6 Yeas 1 Absent: Johnson

Commissioner Marion Greene led the discussion surrounding article published October 29, 2018 in the StarTribune regarding FDA analysis of Hennepin Healthcare System research. Also commenting were Commissioner Mike Opat, Commissioner Peter McLaughlin, and Commissioner Jan Callison.

3. Adjourn

There being no further business, the meeting of the Health Committee for Tuesday, October 30, 2018 was declared adjourned at 2:37 PM.

Yolanda C Clark Deputy Clerk to the Board

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Board Action Request 18-0471

Item Description:

Human Services & Public Health resolution, including contracts and amendments to contracts with HEALTH SERVICES providers – Report 1819

Resolution:

BE IT RESOLVED, that the contracts, contract amendments and administrative actions of the Human Services and Public Health Department made pursuant to Chapters 256E and 393 of Minnesota Statutes, as detailed in Human Services and Public Health Contract Report 1819, be approved; that the report be filed in the Contract Administration Office; that the Chair of the Board be authorized to sign the contracts, contract amendments and administrative actions on behalf of the County; and that the Controller be authorized to disburse funds as directed. Such contracts are subject to ministerial adjustment, when such adjustments are done within the constraints of the approved Hennepin County Budget and when signed by the County Department Director or Designee.

Background:

The contracted dollar amounts are based on estimates of program costs and/or utilization during prior periods. Funding for each contract is provided for within service categories in the Human Services and Public Health Department approved annual budgets. Occasionally new services are implemented which are not in the budget but which are fully funded under state or federal grants or other new funding.

Contracted dollar estimates are based upon prior year usage and are subject to fluctuation in placement patterns, service need, and cost shifts. Therefore, it may be necessary to process ministerial adjustments to contracts to increase or decrease contract amounts or to make minor service changes consistent with the department budget and strategic plan. Placement agreements are also processed administratively.

Contracts include services in the following areas: adult mental health; developmental disabilities; chemical health; adult housing; early intervention and family intervention services, day treatment services; emergency shelter; day care; training and employment services, interpreter services, health services, welfare advocacy, and various other human services. Expectations for ongoing outcome measurement are included in all new, renewal, or extended contracts. Outcome measures are developed by the county and contracted providers. Typically they include measures of client service recipient's condition or functioning level. Outcome information is used to modify or improve programs as well as to evaluate effectiveness of different types of intervention and providers. A detailed listing of the specific actions requested by this BAR and an explanation of all unusual items is reflected in the summary of the report.

ATTACHMENTS:

Description Upload Date Type

Rpt 1819 11/9/2018 Backup Material



Human Services and Public Health Department - Health Services Contract Report #1819

Date: 11-8-18

To: Clerk of the County Board

From: Human Services and Public Health Department

Subject: BAR Number 18-0471 Board Action Date: 11-27-18 Electronic Provider File (EPF)

HSPH Board Reports page

Summary of Contract Actions

New Co	ontracts		
	Service Area	Number	Amount
PHPP		1	\$7,940
	Health Services Total	1	\$7,940

Renewed Contracts				
	Service Area	Number	Amount	
PHPP		3	\$1,065,287	
	Health Services Total	3	\$1,065,287	

Amende Change	ed Contracts: Increase; (es	(<u>Decrease);</u>	<u>Service</u>
	Service Area	Number	Amount
NP PHA PHPP		2 2 1	\$80,100 \$30,000 \$85,087
	Health Services Total	5	\$195,187

Administrative Actions Description	Contract #
Cancellation	A166175

Service Area List and Key		
NP = NorthPoint PHA = Public Health Administration PHPP = Public Health Protection and Promotion		

Vendor	Contract #	Service/Description	Service Area	Term	Previous Annual NTE	New Annual NTE	Funding Source	Notes
New Contracts		осилом досем риси	00.7100711101					
St. Louis Park Public Schools - ISD 283	PR00000587	Creation and implementation of school healthy eating project for students.	PHPP	11/15/18 - 10/31/19	NA	\$7,940	State	SHIP Grant
Renewed Contracts								
Annex Teen Clinic	HS00000177	Sexual health education and clinical services for adolescent and young adults who are at high risk for unplanned pregnancies and sexually transmitted infections.	PHPP	1/1/19 - 6/30/22	NA	\$169,566	Federal	TANF and Maternal Child Health Special Projects (MCHSP)
Catholic Charities of the Archdiocese of Saint Paul and Minneapolis	HS00000154	Intensive home visiting for families with children who are at risk for maltreatment and/or poor	PHPP	1/1/19 - 12/31/22	NA	\$172,950	Federal/County	Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grant.
St. David's Center	HS00000155	developmental outcomes. Intensive home visiting for families with children who are at risk for maltreatment and/or poor developmental outcomes.	PHPP	1/1/19 - 12/31/22	NA	\$722,771	Federal/State/ County	Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grant and Metro Alliance Healthy Families (MAHF) grant.
Amended Contracts								
Apex Print Technologies, LLC	<u>A178259</u>	Patient billing statement printing services provided to NorthPoint Health & Wellness Center.	NP	1/1/18 - 12/31/20	\$45,000	\$48,000	County	Extend the contract to 12/31/20. Add \$48,000 to the total NTE.
Center for Communication and Development	<u>A188612</u>	Radio campaign addresses the health, fitness, and social needs of the community.	NP	2/1/18 - 12/31/19	\$32,100	\$32,100	County	Extend the contract to 12/31/19. Add \$32,100 to the total NTE.
Community Consulting Group, LLC	A177089	Consulting services to providers and consumers in the Ryan White HIV/AIDS Program.	PHA	3/1/17 - 2/29/20	\$61,000	TBD	Federal - Ryan White Part A	Extend the contract to 2/29/20. NTE will be determined in January.
HealthPartners Institute	A165023-SR	Primary care health and medical case management services for individuals living with HIV/AIDS.	PHA	3/1/16 - 2/29/20	\$435,850	\$465,850	Federal - Ryan White Part A	Extend the contract to 2/29/20. Add \$30,000 to the total NTE for 3/1/18-2/28/19. Future NTE will be determined in January.
myHealth for Teens and Young Adults, Inc.	<u>A142244</u>	Sexual health education and clinical services for adolescents and young adults who are at high risk for unplanned pregnancies and sexually transmitted infections.	РНРР	1/1/15 - 6/30/19	\$170,174	\$85,087	Federal - TANF	Temporary Assistance for Needy Families, Maternal Child. Extend the contract to 6/30/19. Add NTE of \$85,087 for 1/1/19-6/30/19.

Administrative Actions

Cancel contract A166175 FamilyWise Services, for mentorship services, effective 12/31/18. The contract is being cancelled as a part of the 2019 contract reduction effort.

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Board Action Request 18-0472

Item Description:

Agmt PR00000632 with Health Management Systems, Inc., for services and cloud-based software related to care management, 12/01/18–36 months from production go-live date, with two optional one year extensions through 2024, NTE \$1,427,500

Resolution:

BE IT RESOLVED, that Agreement PR00000632 with Health Management Systems, Inc., for services and cloud-based software related to care management, during the period December 1, 2018 through 36 months from production go-live date, with two optional one year extensions through 2024 in the not to exceed amount of \$1,427,500, be approved; that the Chair of the Board be authorized to sign the Agreement on behalf of the county; and that the Controller be authorized to disburse funds as directed.

Background:

Hennepin Health leverages care management software to provide care coordination to its members to increase the quality of care Hennepin Health members receive while reducing the cost of care for its members. Hennepin Health also leverages care management in its Accountable Care Organization partnership with NorthPoint, Hennepin Healthcare and Hennepin County Health and Human Services. It is imperative that Hennepin Health replace the existing care management software to continue its collaborative work for Hennepin Health members as the current software will no longer be supported after December 31, 2019.

A Request for Information was conducted in 2017 and revealed several vendors who have competitive systems in the care management market. Later in 2017, a Request for Proposal was issued and included an extensive evaluation of vendor offerings, ultimately bringing three vendors in to demonstrate their products and capabilities.

Health Management Systems, Inc., was selected based on attention to project management and coordination, business process evaluation, and quality standard product and the limited requirements for customization. In addition, Hennepin Health was interested in a cloud-based solution that offered integration with its first tier downstream vendors.

The county has successfully negotiated an agreement with Health Management Systems, Inc., for 3 years, with two optional one year extensions at the sole discretion of the county.

This request has been reviewed and approved by the Office of the CIO.

Current Request: The current request seeks approval of Agreement PR00000632 with Health Management Systems, Inc., for services and cloud-based software to provide care coordination, increase quality of care and reduce cost of care for Hennepin Health members for the period of December 1, 2018 through 36 months from the production go-live date, with two optional one year extensions through 2024, in the not to exceed amount of \$1,427,500.

ATTACHMENTS:

MINNESOTA

Board Action Request 18-0473

Item Description:

Response time standards recommendation for Advanced Life Support Code 3 and Code 2 ambulances within Hennepin County per Hennepin County Ordinance 9, 01/01/19-12/31/20

Resolution:

BE IT RESOLVED, that the 2017-2018 response time standards for Advanced Life Support Code 3 and Code 2 ambulances within Hennepin County be continued for 2019-2020.

Background:

Response Time Standards: Hennepin County Ordinance 9 requires the Emergency Medical Services Council to make recommendations to the County Board every two years on ambulance response time standards for Code 3 (lights and siren, for life-threatening illnesses or injuries) and Code 2 (no lights and siren, for non-life-threatening illnesses or injuries) ambulances.

The ordinance also requires consideration of "... maintenance and improvement of response times within a municipality, contiguous municipalities, or primary service areas" in setting response time standards. It also specifies performance must be monitored at the municipal level.

Data: Our review of 2016-2017 data found that residents received ambulance service which exceeds the standards (see Table 1, below): county-wide, over 91% of Code 3 ambulances arrived in less than eleven minutes, better than the current standard of 90%; county-wide, over 96% of Code 2 ambulances arrived in less than 21 minutes, better than the current standard of 90%.

The EMS Council, Quality Committee and Operations Committee also reviewed 2016-2017 data for municipalities and community clusters. Data indicate that ambulance response performance met the standard county-wide; community clusters "Developed" and "Developed Lake," did not meet the standard because a some municipalities continue to be more difficult to serve due to their location or low volume. The ALS ambulance services operating in these municipalities are currently working to adjust their resources to address service needs accordingly.

There is agreement within the EMS Council that while response time standards support system readiness, they provide a single time-based measure of performance; there continues to be discussion about the specific relationship between response times and patient outcomes. The EMS Council is considering other performance measures that may be better indicators of service and system performance.

Recommendation: The EMS Council recommends continuation of the 2017-2018 standards for 2019-2020.

Table 1. 2016-2017 Response Time Standards and Actuals

Standards for	Standards for
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Community Clusters [1]	Life-threatening 9-1-1 Calls ("Code 3")	Non-life-threatening Calls ("Code 2")
A. Hennepin County as a whole	Standard: Arrive within 10:59 minutes, for at least 90% of the calls	Standard: Arrive within 20:59 minutes, for at least 90% of the calls
	Actual: 91.51%	Actual: 96.18%
B. City of Minneapolis	Standard: Arrive within 10:59 minutes, for at least 90% of the calls	Standard: Arrive within 20:59 minutes, for at least 90% of the calls
	Actual: 96.22%	Actual: 97.66%
C. "Developed" communities of Bloomington, Brooklyn Center, Champlin, Crystal, Edina, Fort Snelling, Golden Valley, Hopkins, Medicine Lake, Minnetonka, New Hope, Osseo, Richfield, Robbinsdale, St. Anthony, St. Louis Park, plus the contiguous areas of the Airport, Brooklyn Park, Eden Prairie, Maple Grove and Plymouth	Standard: Arrive within 10:59 minutes, for at least 80% of the calls in a given community, and for at least 90% of the calls for the cluster Actual: 89.79%	Standard: Arrive within 20:59 minutes, for at least 80% of the calls in a given community, and for at least 90% of the calls for the cluster Actual: 96.07%
D. "Developed Lake" communities of Deephaven, Excelsior, Greenwood, Minnetonka Beach, Mound, Spring Park, Tonka Bay, Wayzata, Woodland, plus the contiguous area of Shorewood	Standard: Arrive within 15:59 minutes, for at least 80% of the calls in a given community, and for at least 90% of the calls for the cluster Actual: 86.34%	Standard: Arrive within 25:59 minutes, for at least 80% of the calls in a given community, and for at least 90% of the calls for the cluster Actual: 96.36%
E. "Rural" communities of Greenfield and Independence, plus the contiguous areas of Chanhassen, Corcoran, Dayton, Hanover, Hassan Township, Long Lake, Loretto, Maple Plain, Medina, Minnetrista, Orono, Rockford, Rogers	Standard: Arrive within 17:59 minutes, for at least 80% of the calls in a given community, and for at least 90% of the calls for the cluster Actual: 90.85% Page 11 of 15	Standard: Arrive within 30:59 minutes, for at least 80% of the calls in a given community, and for at least 90% of the calls for the cluster Actual: 97.51%

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[1] **Community Clusters** are based on factors listed in **Ordinance 9** (population density and geographic accessibility, historical number of ambulance requests, resource utilization, and the maintenance and improvement of response times within a municipality, contiguous municipalities or primary services areas) with consideration of categories currently used by the Metropolitan Council (see **2030 Regional Development Framework**, https://metrocouncil.org/Planning/Planning/2030-Regional-Development-Framework.aspx, accessed 10/2/18). Its categories:

- "Developed Communities" include Bloomington, Brooklyn Center, Champlin, Crystal, Deephaven, Edina, Excelsior, Fort Snelling, Golden Valley, Greenwood, Hopkins, Long Lake, Loretto, Medicine Lake, Minneapolis, Minnetonka, Minnetonka Beach, Mound, New Hope, Osseo, Richfield, Robbinsdale, St. Anthony, St. Louis Park, Spring Park, Tonka Bay, Wayzata, Woodland
- "Developing Communities" include Brooklyn Park, Chanhassen, Corcoran, Dayton, Eden Prairie, Hassan Township, Maple Grove, Maple Plain, Medina, Minnetrista, Orono, Plymouth, Rogers, St. Bonifacius and Shorewood
- "Rural Areas: Diversified Rural Communities" include Greenfield and Independence

MINNESOTA

Board Action Request 18-0501

Item Description:

Approval of the 2019 Hennepin Healthcare System, Inc. Financial Plan as submitted by the Hennepin Healthcare System, Inc. Board of Directors

Resolution:

BE IT RESOLVED, that the Hennepin County Board of Commissioners approves the 2019 Hennepin Healthcare System Financial Plan, including operational and capital budgets, as submitted by the Hennepin Healthcare System, Inc. Board of Directors.

Background:

The Hennepin County Board of Commissioners has certain reserved powers over Hennepin Healthcare System, Inc. (HHS), one of which is the power to approve the corporation's annual budget. On November 14, 2018, the 2019 HHS Operating and Capital Budget was approved by the HHS Board of Directors and is now recommended by that Board for approval by the Hennepin County Commissioners.

Hennepin Healthcare System 2019 Budget includes Hennepin County Medical Center, Hennepin Healthcare Research Institute, and Hennepin Healthcare Foundation. This Budget represents the initial year of a revised long-range financial plan that balances short term business requirements with long-term strategies.

Achieving a return on investment from the Clinic and Specialty Center is the catalyst behind this year's growth strategies and business plans. These initiatives include adding surgical capabilities, improving access to needed care, strengthening the patient referral service channels, continued rollout of promotional campaigns, improving hospital productivity and implementation of the master campus plan.

HHS 2019 Budget anticipates providing 120,000 days of hospitalized care to roughly 22,000 patients discharged from inpatient care. An additional 840,000 patients will seek care through outpatient services. This includes 11,000 patients treated in our operating rooms.

Provisions have been made for salaries and wages increases for the entire workforce. In 2019, we will include for the first time a full year of operating costs for our new Clinic and Specialty Center. Margin improvement initiatives will include \$15M in hospital productivity improvements, \$13M from revenue cycle management enhancements, \$2M increase related to County uncompensated care payments and \$5M from physician productivity improvements.

The 2019 Budget anticipates spending \$1.09B and generating \$1.07B in revenues, resulting in a \$19M operating loss. A positive cash flow margin of \$29M will be generated.

Capital expenditures are budgeted at \$95.6M. This includes asset preservation of \$10M, routine annual capital expenditures of \$16.8M, debt repayment of \$8.8M and \$60M capital expenditures related to the master capital plan.

Finally, a part of the HHS budget is the projected revenue HHS receives from the County pursuant to the

Uncompensated Care Formula. It is projected that this formula will produce \$24.5 million in payments

during 2019.

MINNESOTA

Board Action Request 18-0502

Item Description:

Approval of slate of candidates for three year terms on the HHS Board of Directors

Resolution:

BE IT RESOLVED, that the Hennepin County Board of Commissioners approves the nominations to the Hennepin Healthcare System, Inc., Board of Directors of Melissa Irving, Dave MacCallum, Brian Ranallo, and Kathy Tunheim to fill four three year terms beginning on January 1, 2019 and ending on December 31, 2021.

Background:

One of the Hennepin County Board of Commissioners' reserved powers over Hennepin Healthcare System, Inc. (HHS), is the authority to approve or reject a slate of nominees recommended by the HHS Board to serve open terms on the HHS Board of Directors. See HHS Bylaws Section 3.4 (ii).