Dr. Ronald Woodson, President of the Oklahoma State Board of Health, called the 399th regular meeting of the Oklahoma State Board of Health to order on Tuesday, May 12, 2015 at 11:04 a.m. The final agenda was posted at 10:00 a.m. on the OSDH website on May 9, 2015, and at 11:00 a.m. at the building entrance on May 11, 2015.

ROLL CALL
Members in Attendance: Ronald Woodson, M.D., President; Martha Burger, M.B.A., Vice-President; Cris Hart-Wolfe, Secretary-Treasurer; Jenny Alexopoulos, D.O.; Charles W. Grim, D.D.S.; R. Murali Krishna, M.D.; Timothy E. Starkey, M.B.A.; Robert S. Stewart, M.D.
Absent: Terry Gerard, D.O.

Central Staff Present: Terry Cline, Commissioner; Julie Cox-Kain, Senior Deputy Commissioner; Henry F. Hartsell, Jr., Deputy Commissioner, Protective Health Services; Toni Frioux, Deputy Commissioner, Prevention and Preparedness Services; Stephen W. Ronck, Deputy Commissioner, Community & Family Health Services; Mark Newman, Director of Office of State and Federal Policy; Don Maisch, Office of General Counsel; Jay Holland, Director of Internal Audit and Office of Accountability Systems; Tony Sells, Director of Office of Communications; VaLauna Grissom, Secretary to the State Board of Health; Janice Hiner, Sr. Advisor to the Commissioner of Health; Felesha Scanlan, Diane Hanley, Maria Souther, Commissioner’s Office.

Visitors in attendance: (see sign in sheet)

Call to Order and Opening Remarks
Dr. Woodson called the meeting to order. He welcomed special guests in attendance.

REVIEW OF MINUTES
Dr. Woodson directed attention to review of the minutes of the Regular Board meeting.

Ms. Burger moved Board approval of the minutes of the April 14, 2015, regular Board meeting, as presented. Second Dr. Krishna. Motion carried.

AYE: Alexopoulos, Burger, Krishna, Stewart, Wolfe, Woodson
ABSTAIN: Grim, Starkey
ABSENT: Gerard

STRATEGIC MAP UPDATE PRESENTATION
Julie Cox-Kain, M.P.A., Senior Deputy Commissioner
Leverage Resources for Health Outcome Improvement

- By 12/31/2017 decrease by 10% the rate of uninsured
- By 6/30/2017 award 90% of FGHC new start funding
- By 12/31/2018 reduce preventable hospitalization by 10%
- By 6/30/2015 influence one carrier and one health system to adopt preventive services
- By 6/30/2015 develop health plans to address specific populations
- By 6/30/2015 develop a waiver to pilot shared savings/performance based reimbursement models
- By 6/30/2014 pilot team based care initiative

Decrease Uninsured No Health Insurance; Oklahoma BRFSS, 2001-2013, 2014*

Facilitate Access to Primary Care

Facilitate Access to Primary Care TSET/Physician Manpower Training Commission Loan Repayment

NGA Health Workforce Policy Academy

Primary Goals
- Coordination of Workforce Efforts
  - Connect to economic development
- Workforce Data Collection and Analysis
  - Multi-sourced longitudinal data collection
- Workforce Redesign
  - Plan for future of healthcare
- Pipeline, Recruitment and Retention
  - Address provider health distribution & HPSSs
Preventable Hospitalizations Among Medicare Population

United Health Foundation, America’s Health Rankings, Edition*  
*Data for the 2014 edition are based on 2013 data from The Dartmouth Atlas of Health Care

- Preventive Services
  - Medicaid Quality Improvement
    - OSDH/OHCA joint Quality Improvement groups aimed at studying and implementing interventions on five health issues affecting the state:
      - Tobacco
      - Obesity
      - Hypertension/Diabetes (separate groups last year)
      - Immunization
      - Prescription Drug Abuse (Includes DMHSAS)
      - SFY 2016 – Include Employee Group Insurance Division (EGID)

- Preventive Services
  - Medicaid Tobacco Policy Progress
    - OSDH/OHCA joint aim: improve access to tobacco cessation services by identifying barriers to treatment and removing them.
    - Barriers identified: copayments on counseling and medications and prior authorization on cessation medication.
    - Copayments eliminated and prior authorization removed effective Sept. 1, 2014

- Preventive Services
  - E-Referrals to Helpline
    - Through utilization of health system EMRs – automatic referrals increase access to evidence based tobacco cessation services
    - OSDH is currently partnering with several organizations to provide technical assistance and training on referrals to the OTH (electronic, e-fax and paper fax)
    - OSDH is also offering subcontracts to encourage this opportunity to disparately impacted populations:
      - Oklahoma Primary Care Authority (in development)
      - Indian Health Service (Lawton Pilot Location)
      - County Health Departments
      - Oklahoma Department of Mental Health And Substance Abuse Services
      - Oklahoma Dental Association (in development)
      - American Indian Health Clinic (non-INS, out for bid soon)

- Pilot – Insure Oklahoma Sponsor’s Choice Performance Based Pay & Specific Populations
  - New category of Insure Oklahoma organizational sponsorship for the purchase of private insurance
  - Health outcome measures correspond with SIM:
    - National Quality Forum 28 – Tobacco
    - National Quality Forum 421 & 24 - Obesity
    - National Quality Forum 729 - Diabetes
    - National Quality Forum 18 - Hypertension
  - Data will be provided through the commercial insurers and their health information exchange partners
  - Targeted to disparate populations

- Pilot Team Based Care - Heartland OK
  - Goal: Reduce the number of CVD events
  - Target: 5 counties (113, 237 population)
  - Method: Care coordination team
  - Evidence Based Strategy
    - Nurse and Pharmacist Assessments protocol driven
    - Care Coordinator at County Health Department (facilitated adherence, enhanced communication)
  - Design
    - Clinician ordered treatment
    - Monitor medication adherence and blood pressure between scheduled visits
    - Integrate into practice workflow with minimal interruptions
In regard to physician workforce, Dr. Krishna referenced recent Oklahoma and national literature that has focused on the explosion of stress and burnout in physicians over the last 24-36 months. Forty percent of family doctors want to retire prematurely. That is very concerning. Nationally, in general, 46.5% (almost 1 in 2) of doctors are getting burned out. They are facing unprecedented levels of pressure to perform more in less time with more accuracy and less cost. Dr. Krishna has developed a seminar to help train physicians on how to adapt to the high demands of the job. There is still a long way to go in addressing this problem in our state. Dr. Krishna commented on the shortage of primary care physicians statewide and recommended the
Dr. Woodson mentioned that there is a disproportionate amount of physicians over the age of 50. As a society, we are not training enough physicians to replace those that are within 10-15 years from retirement. This is going to be a critical problem in the future, 10 years from now.

Julie indicated an area of focus for this collaboration is predicting what areas to invest in most in order to address both current and future health professional shortage areas in the state. Dr. Krishna recommended that physician burnout be addressed at the state level through this process. Every physician saved from premature retirement due to burnout is a physician created. This is an important area of focus as we see shortages in almost all branches of medical practice.

In looking at the OSDH strategic map, Dr. Cline pointed out the progress we have made over the last 5 years in the area of leveraging resources for health outcome improvement. Prior to this time, the work in this area was almost non-existent or in silos. OSDH is now leading and taking a more active role in this area and expect to see exponential health improvement as a result.

The presentation concluded.

**CONSIDERATION OF STANDING COMMITTEES’ REPORTS AND ACTION**

**Executive Committee**

Dr. Woodson encouraged Board members to attend the Annual Employee of the Year Recognition Ceremony at 12:30 pm in Room 806 of the Health Department.

Dr. Woodson reminded Board members that the June Board meeting will take place at the Muskogee County Health Department and asked members to contact VaLauna Grissom if they have not received instructions for completion of the calendar year 2014 Ethics Commission statements. The deadline is May 15th.

Dr. Woodson provided a brief update to the Board regarding retreat planning efforts. The retreat planning committee has conducted one call and one in person meeting with the retreat facilitator, Tim Fallon. The committee has begun the process of outlining the retreat objectives and agenda. The development of a new 5 year strategic map will be a major focus of the retreat as the current map expires in 2015. The strategic planning process will include input from key public health partners, employees of the Department and Board members. Board members should expect to receive a survey seeking their input during the month of May and June. The goal is to have a new strategic map ready to present to the Department following the annual retreat.

**Finance Committee**

Ms. Burger directed attention to the Financial Brief provided to each Board member and presented the following SFY 2015 Finance Report and Board Brief as of April 24, 2015:

- **Budget and Expenditure Forecast**
  - Approximately $424 million budgeted for state fiscal year 2015
  - Forecasted expenditure rate of 97.75% through June 30, 2015
  - “Green light” overall for the department and for each division within the department except for Public Health Infrastructure and Health Improvement Services
  - Public Health Infrastructure and Health Improvement Services are in a “yellow light” status, with expenditures forecasted to spend between 90 and 95 percent

The Financial Brief focused on the Preventive Health and Health Services Block Grant

- Most grants received by OSDH are categorical grants, with programmatic restrictions on spending. As a block grant, the grant can be spent on programs chosen by the OSDH
- For the current year, FY 2015, OSDH received $1,420,453
- OSDH has developed a competitive process for allocating the funds. Public health programs are encouraged to submit proposals, which are scored using weighted criteria that has been established based on OHIP and the Agency strategic plan
49% of this year’s grant is used to fund the Oklahoma Health Improvement Plan
26% of this year’s grant is used to fund the Oklahoma Wellness program
The remaining 25% of this year’s grant is funding:
- Unintentional Poisoning Deaths
- Infant Motor Vehicle Safety and Education
- Sexual Assault and Rape Crisis (which is a mandate for Prevent Block Grant recipients)
- Health Communications
- Older Adult Fall Prevention & Education

Accountability, Ethics, & Audit Committee
The Accountability, Ethics, & Audit Committee met with Jay Holland. Dr. Alexopulos indicated there were no known significant audit issues to report at this time. The Office of Accountability referenced case number 2014-032 for discussion during executive session.

Public Health Policy Committee
The Policy Committee met on Tuesday, May 12, 2015. Mr. Starkey indicated the Committee discussed legislative issues related to budget appropriations as well as the end of the legislative session. Of note, were important pieces of legislation progressing through the legislative process including: HB1685 is the 24/7 Tobacco Free School Acts and was signed by the Governor the previous week in a special bill signing ceremony; SB 126 authorizes the Department to contract for Advance Directive Registry services; HB 1408 exempts persons selling only whole, uncut fruits, vegetables and melons and/or un-cracked and unprocessed nuts from food establishment licenses; HB 1965 prohibits texting while driving; and HB 1948 pertains to the Prescription Monitoring Program.

House Joint Resolution 1029, the Omnibus Administrative Rules legislation, is proceeding as expected and authorizes all rules passed by the Board of Health for the current session. Bills requested by the agency during the current session were signed by the Governor. Members will continue to receive the legislative update reports each Monday until June 15th. For policy related questions, Board members should contact Mark Newman.

The next meeting of the Policy Committee will be prior to the June Board Meeting.

PRESIDENT’S REPORT
Dr. Woodson invited all to join Gov. Mary Fallin at the annual Walk for Wellness at the State Capitol Complex, May 13th, 11:30 AM, in support of Oklahoma Health and Fitness month. He informed attendees that notifications will be made later in the day if the event is rescheduled due to weather conditions.

Dr. Woodson recognized the State Department of Health for their focus on worksite wellness and resources offered to employees for the purpose of facilitating a healthier work environment:
- Onsite Employee Wellness/Fitness Center
- Wellness Committees
- Wellness Activities and Challenge
- Fitness Center Group Activities
- Wellness Policy
- Lunch N’ Learn events for employees
- Tobacco Cessation Resources
- Online Wellness Resource Center
- Health Needs Assessment available to employees
- Employee Assistance Program

He commended the Department for focusing on education and engaging employees on topics like nutrition, stress management, physical fitness, and smoking. Worksite wellness programs make a considerable impact on employee health and we know that a healthier workforce can lead to higher productivity, decreased health care costs, better retention rates and higher morale among employees. Lastly, Dr. Woodson commented on the importance and impact that increased physical activity alone can have in lowering the risk for heart
The report concluded.

**COMMISSIONER’S REPORT**

Dr. Cline attended the Oklahoma City National Memorial & Museum Reception & Tour in remembrance of the 20th anniversary of the bombing. Dr. Krishna presented at the reception and did a fantastic job of sharing his insights. He encouraged members to visit the museum to observe new improvements like the interactive displays and exhibits.

Dr. Cline briefly discussed the recent OSDH Senate Budget Hearing. This was an opportunity to educate legislators about the importance of public health and the many programs that impact the lives of every citizen. In the last 5 years, the OSDH has received a 19% decrease to our state appropriations. We have worked to increase efficiencies, management operations, and cost savings. There is a lot of discussion concerning our public health lab funding which will be necessary to pass ASTHO accreditation in the future. At this time, we are still waiting to hear where we stand as far as the state budget.

Dr. Cline participated in the OU College of Public Health re-accreditation site visit. This was a great opportunity to discuss the variety of partnerships that are in place. A strong partnership exists between the College of Public Health and OSDH which has developed over the years. Dean Raskob appreciated our participation in the site visit. It was noted that Dr. Krishna was the convocation speaker at the College of Public Health in Norman. We appreciate the way he ties in the importance of public health with the graduates impacting people across the globe.

Dr. Cline was invited to participate in the CDC/ASTHO Preventive Health & Health Services Block Grant Think Tank. Nationally, there is a lot of discussion and exploration occurring in regard to the effectiveness of this program across the country. Oklahoma is one of the few states that uses these dollars around priority areas and has a methodology in place to evaluate and make decisions based on objective criteria. These federal dollars are critical to the function of the health department. This was an important opportunity to provide input on keeping these dollars in the federal treasury which in turn helps the state coffers.

The report concluded.

**NEW BUSINESS**

Ms. Wolfe recommended doing Laughter Yoga at the Board retreat this year. Dr. Woodson referred this request to the retreat committee for consideration.

Dr. Krishna mentioned what a gold mine the Oklahoma City National Memorial and Museum is to Oklahoma City. It is a beautiful symbolic expression of love, compassion, and regrowth. Oklahoma City is one of the most caring cities in the world. Immediately after the bombing, people flocked to the bombing site risking their own lives to help others in need. Every new employee of the Oklahoma City Thunder is required to tour the museum before they start their job to set the tone of culture for this community.

**PROPOSED EXECUTIVE SESSION**

Dr. Grim moved Board approval to go into Executive Session at 12:00 PM pursuant to 25 O.S. Section 307(B)(4) for confidential communications to discuss pending department litigation, investigation, claim, or action; pursuant to 25 O.S. Section 307(B)(1) to discuss the employment, hiring, appointment, promotion, demotion, disciplining or resignation of any individual salaried public officer or employee and pursuant to 25 O.S. Section 307 (B)(7) for discussing any matter where disclosure of information would violate confidentiality requirements of state or federal law.

- OAS Investigation, Number 2014-032

Second Ms. Burger. Motion carried.

AYE: Alexopoulos, Burger, Grim, Krishna, Starkey, Stewart, Wolfe, Woodson
ABSENT: Gerard

Ms. Wolfe moved Board approval to move out of Executive Session. Second Dr. Krishna. Motion carried.

AYE: Alexopoulos, Burger, Grim, Krishna, Stewart, Wolfe, Woodson
ABSENT: Gerard, Starkey

ADJOURNMENT

Dr. Krishna moved Board approval to adjourn. Second Ms. Burger. Motion carried.

AYE: Alexopoulos, Burger, Grim, Krishna, Stewart, Wolfe, Woodson
ABSENT: Gerard, Starkey

The meeting adjourned at 3:22pm.

Approved

Ronald W. Woodson, M.D.
President, Oklahoma State Board of Health
June 9, 2015