Parks Rx Task Force Meeting #5: Meeting Notes Monday, April 4, 2022, 1:00 p.m. - 3:00 p.m. Webinar via Microsoft Teams

<u>Attendees</u>

Task Force members: Terri Drexler, Cindy Green, Carrie Hoiness, Beth Mizushima, Steve Montague, Bob Perkes, Shawn Rundell, Rob Stevens, Pooja Tandon

Guests: Jennifer Greene, Theresa Sanders, Chris Zipperer, Evan Smith

Topic	Notes	Next Steps
Opening, Introductions and Announcements	Task Force (TF) members provided introductions and reviewed the agenda. Beth reviewed the decision-making process outlined in the Task Force charter. The number of Task Force members present qualified as a quorum, and any decisions that could not be made by consensus would be put up for a vote. Members not in attendance would still be allowed to provide input on discussion topics.	
Updates: Regional Advisory Committees (RAC)	discussion and comments informed the proposed updates to the draft recommendations. Several themes were consistent to all three RACs, including keeping the pilot project selection process accessible to all types of organizations, and providing support and technical assistance to organizations during the application process and pilot project implementation. Another common theme was interest in working with the managed care organizations (MCOs) that manage Apple Health. A theme with less consensus was including employee wellness programs as a program option for pilot projects. These and other themes are reflected in	DOH: Will send a survey to RAC members to collect feedback on the RAC process. Schedule an optional meeting for all RAC participants in June to provide an opportunity for comments on the final draft.

Discussion: Updated Draft

Pilot Projects: Draft recommendations removed the option for employee wellness programs for a pilot Recommendations project. Members did not want to leave these programs completely out of the report, and this option will be addressed in other parts of the report (Insurance and Immediate Actions).

DOH: Incorporate edits and suggested revisions into draft legislative report.

Discussion revolved around the desire to focus on and emphasize equity and health disparities with at least one pilot project in each region implemented through either a health care system or a community-based organization.

The evaluation of the pilot projects was discussed at length. Suggestions included aligning measures with metrics already being used by the MCOs and using indicators designed to demonstrate program success within the timeframe of the pilot project. Also mentioned was the need to provide support and assistance to pilot project sites for program evaluation.

RFA Process: Members did not oppose an application process but expressed concern that a cumbersome application would discourage organizations with limited capacity and resources from participating in the RFA process. The group discussed the need to streamline and simplify the process as much as possible to achieve the goals of equity, inclusion, and addressing health disparities. The need to provide training and technical assistance throughout the application process was also emphasized.

Equity: Members wanted even more focus on equity health disparities highlighted throughout the report and suggested ways to feature this recommendation more prominently. The King County Equity Tool was highlighted as a planning resource, and members were encouraged to provide any additional suggested tools to be included in the appendix of the report.

Leadership and Structure: The updated recommendation to start the statewide program through a state agency, with the possibility of transferring the program to an existing non-profit organization was accepted. The group discussed naming a specific agency

within the recommendation, however that choice is ultimately up to the legislature, so suggesting a lead agency was determined not to be an appropriate task for the Task Force. Funding: The recommendation to dedicate state funding to support the pilot projects and to explore additional funding for future implementation was discussed and accepted. Once an approach is piloted and deemed successful, future implementation could include expanding the reach of the program into additional communities. **Insurance:** Two options for Park Rx insurance projects were accepted. Working with existing employee wellness programs was seen to be a good way to reach a large pool of people through an existing structure. Working with the MCOs to impact participants in Apple Health through value-added programs was seen as an effective way to reach a population experiencing health disparities. **Immediate Actions:** Members were very supportive of the addition of this recommendation and suggested additional specifics about who and how the actions should be implemented. Discussion: Review The timeline for the completion of the legislative report **DOH:** Move Final Report was reviewed. After DOH completes the agency process, report through Timeline the report will be sent to the Governor's Office for final agency approval approval. Once approved, the report will be posted on process. the Office of Financial Management (OFM) website. Once on the website, all interested parties will have access to the report for planning purposes. Summary, Next Next Task Force Meeting: June 6, 2022. The agenda will **DOH:** Complete Steps, and Closing linclude discussion and comments on the draft legislative lagency review and report. A communications plan regarding Parks Rx and send draft to TF release of the legislative report will also be discussed. members and others for final comments.

	TF Members:
	Review draft
	report. Provide
	written feedback
	and prepare
	comments for
	June 6 meeting.