

**West Virginia Health Care Authority  
State Health Plan Advisory Group Meeting  
April 5, 2000**

**Meeting Summary**

**Present:** Cathy Ayersman; Dallas Bailey, PhD; Neil Bucklew, PhD; Cathy Chadwell; Max Fijewski; Dave Forinash; Bill Gavin; D. Parker Haddix; Howard Hunt, DO; Sallie Hunt; Sam Kapourales; Elizabeth Lawton; Kenna Levendosky; Gloria Long; Charles McKown, MD; C. Gregory Morris; Louie Paterno; George Pickett, MD; Sally Richardson; Mike Robbins, representing Steven Summer; and Linda Sovine.

**Welcome and Introductions**

D. Parker Haddix, Chairman, West Virginia Health Care Authority, opened the meeting at 9:05 a.m. Mr. Haddix used an egg mcmuffin analogy to illustrate sustained level of commitment of the SHAG members. The egg illustrates partial commitment while the meat illustrates total commitment. Mr. Haddix stated that the meeting agenda centers on the assignment of the 52 policies and the adoption of a platform to track the policy implementation. Mr. Haddix indicated that the goal is to improve the health care system and to improve the health status of West Virginians.

**State Health Plan Activities to Date**

Sallie Hunt provided a “flashback” summary of the State Health Plan process to date. She stated that the process began in September 1998 with the development of a survey focused on identifying the key issues. Then in March of 1999, the Issue Selection Group was formed and the nine issues were selected. The plan was then developed from the nine key issues. A public comment period was held which included widespread distribution of the draft plan and a teleconference “public hearing”. A Summit was held in October 1999 where the plan was reviewed again. On December 3, 1999, the WVHCA Board approved the plan and on January 5, 2000, it was approved by the Governor.

**General Discussion of SHP Implementation Plan and SHAG Member Roles and Responsibilities**

Dr. Neil Bucklew, meeting facilitator, described the Implementation Plan process and appealed to the SHAG membership to provide leadership and to accept ownership and responsibility for the implementation process. Dr. Bucklew stressed that leadership roles must be accepted and that it will be necessary to bring other stakeholders into the process.

## **Review of SHP Implementation Plan Outline and Worksheet Materials**

Linda Sovine provided an overview of the SHP Implementation Plan Outline and Worksheet Instructions.

### **SHP Timetable of Events**

Sallie Hunt provided an overview of the timetable of events.

### **Lead Agency Assignments**

Dr. Neil Bucklew assisted the group with a walk-through of the Policy and State Level Action Step Matrix.

### **State Health Plan Advisory Group Recommendations**

1. Revise the Timetable of Events so that more time may be devoted to the process for State Health Plan implementation. The Lead Agencies' work plans will not be due to the WVHCA until September 2000. The expectation for the work plan is that the agency confirms the importance of the policy and gives us the design of its implementation. The function of the work plan is only to start us down the path.
2. Consolidate and regroup the policies to eliminate any redundancy and reassign to more appropriate Lead Agencies.
3. Revise the worksheet instructions for the Lead Agencies to include the questions given to the SHAG, including whether the policy is still pertinent and whether its ranking is still accurate.
4. Ask each of the Lead Agencies if the policy assigned to them is appropriate, and if not, to recommend another agency for assignment. The WVHCA will make the reassignment.
5. A one-on-one session is to be held with all of the newly identified Lead Agencies, who have not been involved in the process previously, with the WVHCA staff providing insight, clarification and background information of the process to date along with the expectations for that agency.
6. Provide the revised Instructional Packet to the Lead Agencies by mid-May.
7. SHAG to meet in July 2000, and more frequently throughout the implementation process.