

The Commonwealth of Massachusetts Executive Office of Health and Human Services Department of Public Health 250 Washington Street, Boston, MA 02108-4619

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Notice of Opportunity to Participate in Community Health Initiative (CHI) Statewide Initiative Advisory Committee

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<u>Summary</u>: The Massachusetts Department of Public Health (MDPH) seeks individuals to serve on the Determination of Need's **Community Health Initiative (CHI) Statewide Initiative Advisory Committee**. MDPH wishes to establish and consult an Advisory Committee to implement the CHI Statewide Initiative.

Background: In January 2017, MDPH completed a landmark revision of the Determination of Need (DoN) regulation. The DoN program regulates the health care delivery system through the review/approval of major capital expenditures, acquisitions, certain additions, and significant changes in services by hospitals, long-term care facilities and clinics. The goal of the DoN process is to promote population health and increase public health value in terms of improved health outcomes, increased quality of life, and increased access to care at the lowest reasonable aggregate cost. A unique and critical component to this program is the requirement that some DoN Applicants include plans for addressing state-defined Health Priorities through CHIs. CHIs support the principle that access alone is insufficient to tackle health care costs, and therefore, health care systems must address MDPH's goals of identifying, understanding, and tackling the underlying and common social determinants of health (SDH). The DoN Health Priorities are six (6) common SDH's: Social Environment, Built Environment, Housing, Violence and Trauma, Employment, and Education.

In addition to supporting local initiatives, the DoN's CHI Guidelines call for the establishment of the CHI Statewide Initiative Fund. For all approved DoN projects with a CHI component with a total maximum capital expenditure (MCE) of \$500,000 or more,

25% of funding will be dedicated to the CHI Statewide Initiative Fund. For CHI projects with a MCE totaling \$500,000 or less, 10% of funding will be dedicated to the CHI Statewide Initiative Fund. The CHI Statewide Initiative Advisory Committee will provide recommendations on the use of the funds raised through this process.

For more detailed information on the DoN Health Priorities and the CHI process, interested parties are encouraged to review the *Determination of Need Community-Based Health Initiative Planning Guideline* and the *Determination of Need Health Priorities Guideline* found at:

http://www.mass.gov/eohhs/gov/departments/MDPH/programs/hcq/don/guidelines-bulletins-and-memorandums.html

Role of the CHI Statewide Initiative Advisory Committee: The primary role of the Advisory Committee will be to provide MDPH with recommendations on the strategic direction of the CHI Statewide Initiative Fund, and it will not have a direct decision-making role. Advisory committee members will provide MDPH with recommendations on the three goals of the CHI Statewide Initiative. The goals include:

- 1) CHI system-wide evaluation to include tools and resources for local evaluation of CHI programs.
- 2) Local grants supporting DoN Health Priority strategies in areas of the Commonwealth historically underserved by DoN CHI resources.
- 3) Resource support for regional and collaborative Community Health Improvement Planning processes across the Commonwealth through support of "CHIP Coordinating Organizations".

Within this Advisory Committee, MDPH seeks representation of statewide and regional stakeholders with demonstrated expertise in at least one of the six DoN Health Priorities and/or professional associations whose work directly impacts or reacts to one or more of the six DoN Health Priorities. For example, organizations representing housing (e.g. community development), education (e.g. organizations/associations that support educational attainment, literacy, etc.), employment (e.g. workforce development, workplace safety, etc.), the built environment (e.g. active transportation support organizations, land-use professionals, etc.), violence, trauma and the social environment (e.g. organizations that focus on building community cohesion, protective factors in youth, respond to and prevent early childhood trauma, etc.).

In addition, the Advisory Committee will also serve as the external advisory body for the Population Health Information Tool (PHIT), a new resource to be launched in 2017 to help guide community health needs assessments. Accordingly, representation on the

Advisory Committee should also include users of data and information; for example, organizations that routinely conduct community health needs assessments at the local and/or regional levels.

MDPH will not compensate individuals for serving on this Advisory Committee. MDPH anticipates that this Advisory Committee will meet approximately once or twice per quarter or as MDPH determines necessary beginning in or around September 2017. Committee members will initially be asked to serve a term of either 3 or 4 years in order to stagger conclusion of service.

Interested individuals should submit an up-to-date resume or Curriculum Vitae and a letter of interest (no more than two pages) highlighting their relevant experience and expertise by Wednesday, August 2, 2017 at 5:00pm to:

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MDPH will review the responses and select individuals who bring the greatest breadth and depth of relevant knowledge and expertise to serve on the Advisory Committee. Preference will be given to individuals who represent organizations with a statewide or regional focus. In selecting members, MDPH also seeks to ensure representation of diverse community types, including racial, ethnic, ability, socioeconomic and geographic diversity. MDPH anticipates capping the number of Advisory Committee members at no more than 15. The Coalition for Local Public Health, the Massachusetts Health & Hospital Association, the Massachusetts Council of Community Hospitals, and Massachusetts Public Health Association will have one seat each on the committee. MDPH reserves the right to request additional information from potential participants, solicit additional individuals for participation, and reject applicants for participation as appropriate to assure that the Advisory Committee meets the agency's needs.