

2021 ANNUAL REPORT



Rising to the Challenge



COMMUNITY HEALTH PLAN
of Washington™

The power of community

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Executive Leadership

Leanne Berge, Esq.
Chief Executive Officer

Alan Lederman
Chief Operating Officer

Stacy Kessel
Chief Finance and Strategy Officer

Abie Castillo*
Chief External Relations Officer

Paul Sherman, MD
Chief Medical Officer
Barbara Westlake
**Senior Executive Assistant &
Board Administrator**

**Abie ended his lengthy tenure with CHPW in early 2022. A very special thanks to him for his more than 25 years of dedicated, heartfelt, and selfless service to CHPW, our mission, and the communities we serve. Few people have contributed more to our successes over the past three decades.*

In Memoriam

John Huynh - Intake Coordinator, Utilization Management

Sergio Moraes - Senior Metadata Analyst, IS&T



Dear friends,

“Be thankful for each new challenge,” a saying of anonymous origin goes, “because it will build your strength and character.”

How true that was for us all in 2021, a whipsaw year that followed on the heels of a tumultuous, world-shifting 2020.

Our nation ushered in 2021 with the U.S. Capitol insurrection, an attack at the very heart of our nation’s democracy, followed by the peaceful inauguration of a new presidency. We ended the year with progress against the pandemic (thanks to the rapid development and deployment of vaccines), but also vast uncertainty over the future course of COVID and its increasingly infectious variants.

Along the way, our organization navigated through our own uncertainties created by the lingering pandemic and the extended Public Health Emergency. We became adept at responding to change while fulfilling our mission of delivering accessible services that improve the health of communities across the state. We dived in head-first because our aim was true and we were not alone.

Together with our Community Health Centers and providers, community-based organizations, our state agency partners, regional Accountable Communities of Health organizations, policymakers, and most importantly, our members, we found strength and unity in collaboration.

Our overarching strategy as an organization is to be a leader in the delivery of whole-person care and in advancing healthy equity. I am proud to say we delivered day in and day out on advancing that. In 2021, we developed an enterprise-wide telehealth strategy with the goal of improving access, integrating care, and closing the digital divide. We created a comprehensive “member experience” improvement plan that enables us to incorporate the consumer voice in our programs and decision-making. In each of our endeavors, we relied on the power of our communities to inform our path and move us forward.

If there is one thing the past year taught us, it is that Community Health Plan of Washington, together with Community Health Network and its member Community Health Centers, are strong, resilient, and able to adapt to unforeseeable challenges. As long as we continue to care for and learn from one another, we can be confident that we are well-positioned for whatever comes next.

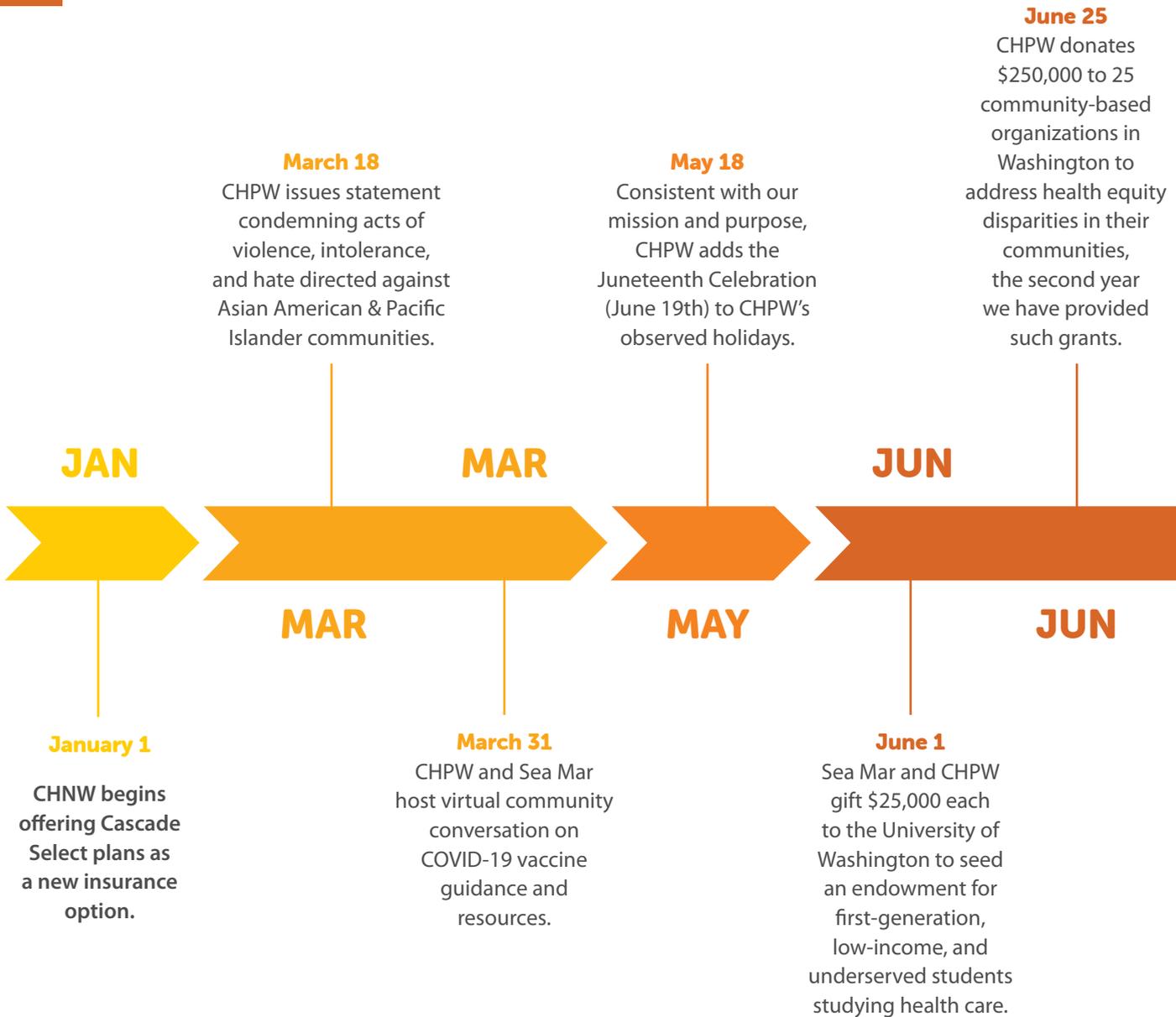
In health and happiness,

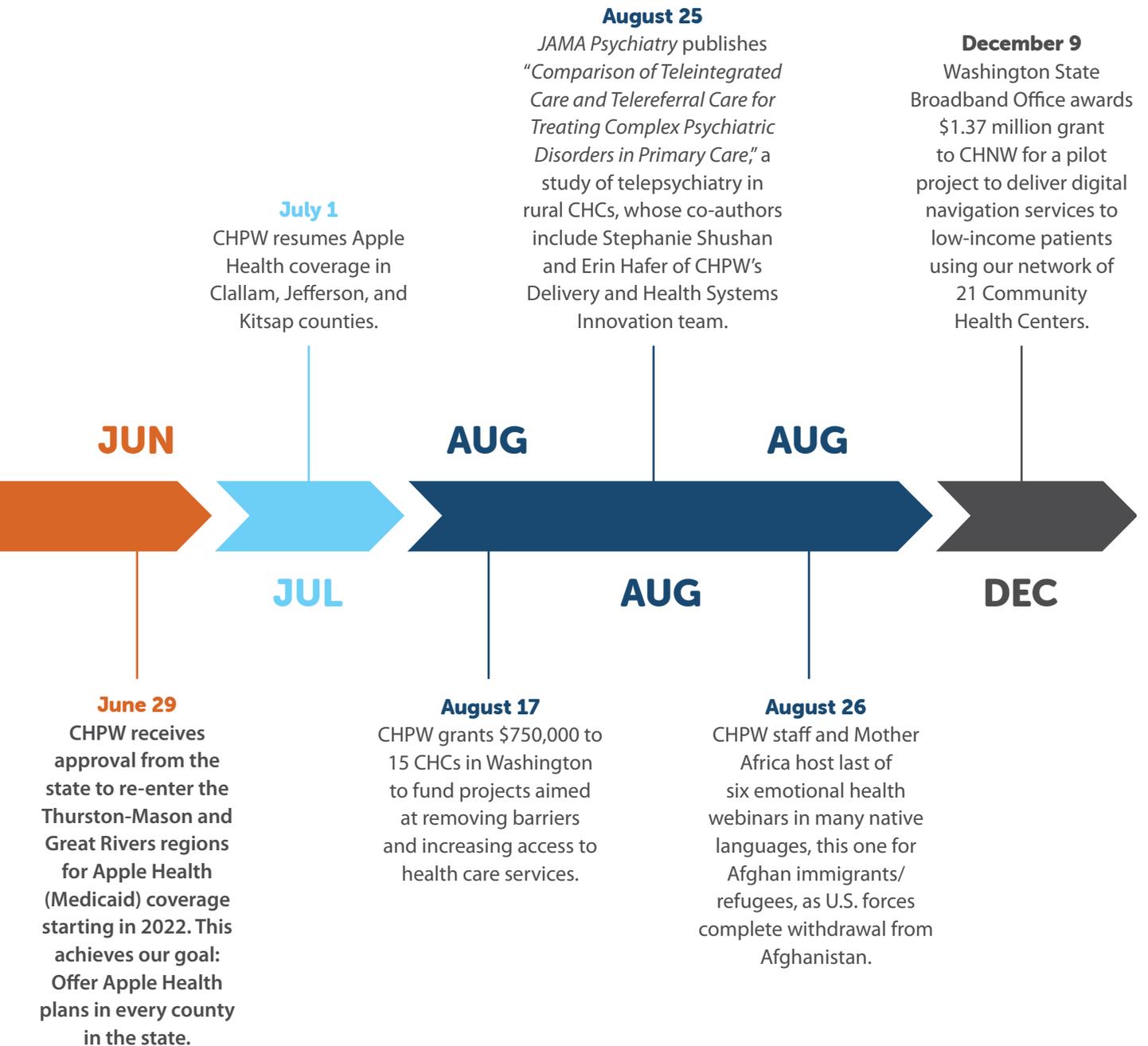


A handwritten signature in black ink that reads "L. Berge". The signature is fluid and cursive.

Leanne Berge, Esq.
Chief Executive Officer

2021 YEAR in REVIEW







ADAPTING TO THE PANDEMIC

A second year of uncertainties brought on by the pandemic meant that we had to be nimble and agile in finding ways to continue to effectively communicate with and safely serve our members, our partner Community Health Centers and providers, and our staff.

Getting out the message

The emergence of COVID-19 vaccines was perhaps the most powerful tool in fighting the spread of the pandemic. As an organization dedicated to health equity, our work was clear: to ensure that all our members – indeed, anyone who wished to be vaccinated – could receive a vaccine without barriers.

We collaborated with CHCs and community-based organizations across the state to promote COVID vaccine availability and address vaccine hesitancy. Through emails, text messages, postcards, TV and radio interviews, and social media posts, we alerted communities about local “pop-up” vaccine events as well as the efficacy and safety of vaccines.



We sent teams to assist with staffing these events, and coordinated with state and local health officials to ensure those communities most in need were receiving services.

We also improved members' access to care by streamlining our 24/7 telehealth services with the launch of CHPW Virtual Care, an easy-to-use platform that allows members to directly consult with a doctor by phone or video instead of talking to a nurse first.

The pandemic was especially taxing for those helping to deliver health care. As hospital capacity statewide surged due to COVID infections, CHPW eased some authorization processes for

“Our staff continued to be resourceful as they approached their work and completed projects that had typically been done in person in the office. I have been most impressed with their flexibility and resilience across the board.”

–Alan Lederman, CHPW Chief Operating Officer

skilled nursing facility admissions and hospital transfers to help alleviate the burden on care facilities and providers.

‘Resilience and flexibility’

On the home front, the vagaries of the pandemic delayed a firm “return to the office” date for most employees. Our staff spent another year working remotely via Teams and Zoom without missing a beat.

“While we started 2021 thinking we would be able to return to the office by mid-year, as the year progressed it became clear that the safety and security of our employees required us to move our return date several times,” CHPW Chief Operating Officer Alan Lederman said.

“Our staff also continued to be flexible in how they approached the work and completed projects that were normally more easily completed as a team in the office. I have been most impressed by this resilience and flexibility across the board.”

Building strength in trying times

We ended 2021 facing the uncertainties of a new omicron variant — but much better prepared for the unknown and committed stronger than ever to the goal of fostering health equity in challenging times.

CEO Leanne Berge summed it up this way in a note to employees:

“I am more optimistic than ever that we as an organization can in fact be a leader in advancing health equity, and together — with our providers, community-based organizations, and the people we interact with every day — will be part of a movement that makes a difference in righting injustices for our members, neighbors, and communities.”

“It’s critically important for everyone to have the facts to support them in making the best decisions for themselves and their communities.”



—Paul Sherman,
Chief Medical Officer, CHPW

Dispelling vaccine myths

Critical to reducing health inequities is access to accurate health information as well as care. To that end, CHPW Chief Medical Officer Dr. Paul Sherman made appearances on numerous media venues throughout the year to speak about the course of the pandemic and myths related to COVID vaccines.

Studies have shown that COVID-19 has unequally affected many racial and ethnic minority groups, putting them more at risk of getting sick and dying from the virus. Vaccination rates also lagged in communities of color, especially during the initial vaccine rollout period.

To stem widening health inequities, the federal Centers for Disease Control and Prevention urged health care providers to “engage with communities” in tailoring strategies to overcome mistrust and deliver evidence-based information on COVID vaccines, testing, and treatment.

“At CHPW, we are committed to supporting our members in achieving their full potential and we believe in the power of community,” Sherman said. “It’s critically important for

everyone to have the facts to support them in making the best decisions for themselves and their communities.”

Evidence-based decisions

Sherman, a board-certified pediatrician, was interviewed by local newspapers and TV and radio stations across the state. One of his main messages: The COVID-19 vaccines authorized for use in the U.S. have been rigorously tested, are generally very safe and well tolerated, and do a great job in protecting against serious illness, hospitalization, and death.

The COVID vaccines were developed and approved much more rapidly than any vaccine in the past but researchers and regulators did not take any safety shortcuts, Sherman said in one appearance on KIMA-TV in Yakima.

“Multiple steps were done at the same time that are normally done sequentially, but all of them were done appropriately and the evidence was complete,” he said.

Dismantling barriers

Sherman also joined Dr. Julian Perez, a medical provider at Sea Mar Community Health Centers, in hosting a free virtual event in March — in English and Spanish — to discuss COVID-19 vaccine myths and questions.

Perez stressed the importance of delivering accurate information to all communities in their spoken languages.

“At the start of the pandemic, we felt that this virus was indiscriminate in its selection of who to infect and who to kill. It’s just not true. Struggling communities, people under constant toxic stress, the economically poor, undocumented households all suffer disproportionately,” he said in advance of the webinar.

“It is critical we bring the opportunity to share information about the vaccines to all communities we serve, in their spoken languages to help remove barriers to health care.”



FOSTERING A CULTURE OF EQUITY

Health equity means that everyone has a fair and just opportunity to be as healthy as possible.

In 2021, we accelerated our efforts in meaningful and tangible ways to advance health equity and empower individuals, families, and communities to improve their overall health.

As an organization, we committed to being a leader in whole-person care and health equity as our overarching strategy guiding our work internally and with our partners. We adopted the Robert Wood Johnson Foundation’s definition of “health equity” as follows:

Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

Our efforts included collaboration with and support for Community Health Centers (CHCs) and Community-Based Organizations (CBOs), societal hubs that are instrumental in increasing access to care – particularly for people of color and others disproportionately affected by health care disparities.

“CHPW recognizes that advancing equity is a collaborative effort.”

— Leanne Berge, CEO of CHPW

Breaking down barriers in the community

CHPW granted a total of \$750,000 to 15 CHCs in Washington to specifically fund projects aimed at dismantling barriers and increasing access to health care services. Among the CHC projects' focus areas: enhancing patient experience and access, improving pregnancy care, managing chronic conditions, and depression management.

CHPW also distributed \$250,000 to community organizations across the state to address health disparities. Each of the 25 organizations receiving a \$10,000 check provides services to support people of color in a culturally responsive way. It was the second year CHPW provided such grants; in 2020, CHPW donated \$230,000 to 23 organizations.

“CHPW recognizes that advancing equity is a collaborative effort – it is in coming together with Washington’s CBOs to harness the power of community that we can address people’s many and distinct needs,” said Leanne Berge, CEO of CHPW and parent Community Health Network of Washington.

CHPW also partnered with Sea Mar Community Health Centers to seed an endowment at the University of Washington for first-generation, low-income, and underserved students. The endowment will fund scholarships for students studying any health-related field.

Building staff awareness

Building momentum for effective social change also required us to assess concrete actions we could take within our organization to “walk the talk.”

We created an internal “Equity Council” comprised of all members of the executive team and others from a cross-section of the organization to ensure accountability for our continued Diversity, Equity, and Inclusion (DEI) efforts.

Recognizing that implicit bias impacts all the work we do, we developed and refined an internal Equity Assessment Tool. This is a guide that teams across CHPW can use to identify and understand potential equity gaps when designing or planning policies, initiatives, and projects.

We added Juneteenth (short for June 19th) to CHPW’s list of observed holidays. The holiday commemorates the emancipation of slaves in the U.S. at the end of the Civil War. CHPW also now provides “floating holidays” for staff to use in recognition of different cultural observances.

In addition, we provided “implicit bias and structural racism” training for all employees to create a shared language and equity foundation. In concert, we also conducted the first employee DEI survey to assess current perspectives and began an organization-wide equity assessment. Results from the survey and assessment will be used to highlight internal gaps and opportunities in our ongoing equity work in the years ahead.

Collaborating with CHCs on equity

Our 20 partner Community Health Centers (CHCs) play a pivotal role in providing health care services to traditionally underserved populations. It's our belief that by continuing to invest in CHCs, we can help improve the overall health of our communities.

CHPW provides millions in funding annually to CHCs through budget surplus and other investments. In 2021, our financial support included \$750,000 in grants to 15 of them — \$50,000 to each CHC — to fund projects aimed at advancing health equity on the local level. Each CHC applied for the grants to support a project meeting the unique needs of its community that would help reduce barriers to care.

A key component of this Equity Learning Collaborative Grant Program was peer-based learning in which cohorts of CHC and CHPW staff met regularly to share learnings and best practices over the course of a year. CHPW and member CHCs worked together to pilot approaches to care that are sustainable and address health disparities.

Connecting patients with care

Yakima Neighborhood Health Services (YNHS), with locations in Yakima, Sunnyside, and Granger, was among the 15 CHC grant recipients.

The nonprofit health center earmarked the money for efforts to help patients experiencing homelessness obtain a smartphone through government programs and teach them to use it to schedule appointments, access telehealth, communicate with providers, order prescription refills, and more.

"We believe this will increase follow-up appointment rates and get the individuals the support they need to treat and prevent mental health issues from escalating," said Rhonda Hauff, CEO at YNHS.

Reducing disparities

CHPW's initiative is part of its continuing participation in the Advancing Health Equity Learning Collaborative, launched in 2019. CHPW, its parent Community Health Network of Washington (CHNW), and the Washington Health Care Authority (HCA) comprise one of seven teams nationally that were selected to work together to reduce disparities in health care through a variety of approaches, including innovative Medicaid payment and contracting models.



The 15 CHC grant recipients and their equity project focus areas are:

Advancing Pregnancy Care

- Moses Lake Community Health Center (serves Grant County)
- Neighborcare Health (serves King County)

Depression Management

- CHAS Health (serves Spokane County)
- Country Doctor Community Health Centers (serves King County)
- International Community Health Services (serves King County)
- Yakima Neighborhood Health Services (serves Yakima County)

Continued

CHC grant recipients

Chronic Conditions Management

- Community Health Care (serves Pierce County)
- Sea Mar Community Health Centers (serves Clallam, Clark, Cowlitz, Franklin, Grays Harbor, Island, King, Pierce, Skagit, Snohomish, Thurston, and Whatcom counties)
- Tri-Cities Community Health (serves Benton and Franklin counties)

Enhancing Member Experience and Access

- Family Health Centers (serves Okanogan County)
- HealthPoint (serves King, Pierce, and Snohomish counties)
- Peninsula Community Health Services (serves Kitsap County)
- Unity Care NW (serves Whatcom County)
- Valley View Health Center (serves Lewis, Thurston, and Pacific counties)
- Yakima Valley Farm Workers Clinic (serves Benton, Franklin, Spokane, Whitman, and Yakima counties)

Case study: Making a difference

Cocoon House was among the 25 Community-Based Organizations (CBOs) to be awarded a \$10,000 grant by CHPW to increase access to care and social services during the pandemic for people of color and those disproportionately affected by inequities that result in health care disparities.

The Everett-based nonprofit provides short- and long-term housing and other essential services for homeless and at-risk young people in Snohomish County. It faced new and unbudgeted expenses related to the pandemic, including personal protective equipment and increased onsite staffing needs.

'The bigger picture'

The grant helped Cocoon House to fund the cross-training of staff ordinarily assigned to non-housing programs to work directly with homeless youth.

"Staff have shared how helpful it's been in deepening their understanding of how systems work and how each of us play a role in supporting the bigger picture of ending youth homelessness," Cocoon House said in a summary report on the grant.

The nonprofit also was able to provide hazard pay stipends for its employees for the increased risk of working in 24/7 housing programs with young people during the pandemic.

"Cocoon House is grateful to the Community Health Plan of Washington for its generous investment in Snohomish County's young people," said Kit Topaz, Director of Community Engagement, Cocoon House. "Our partnership is helping to support the health and wellness of youth, young adults and their families throughout our communities so they can continue to thrive."

Cocoon House By the numbers



153 young people served through housing programs



375 young people were enrolled in case management



DELIVERING CARE TO OUR MEMBERS

The wayward course of the pandemic and the associated burden on an overly strained medical system made it imperative for us to ensure that members could continue to get health care safely, securely, and conveniently.

To broaden access to care services that meet our members where they are, we collaborated with Community Health Centers and primary care and behavioral health providers to integrate telehealth with the rest of their care services.

We also expanded our own telehealth option with the February launch of CHPW Virtual Care, a 24/7 branded telemedicine platform operated in partnership with Teladoc. This platform offered members the convenience of consulting with a doctor after hours and at other times when their own clinic and provider's telehealth services were not readily available.

CHPW members scheduled thousands of telehealth visits in 2021—both through their clinic or provider and via CHPW Virtual Care.

‘Much easier than going into the office’

CHPW Virtual Care alone logged more than 1,500 member visits – for nonemergency ailments such as flu, pink eye, stomach bugs, and sinus infections – by the end of the year, far exceeding our expectations. And members were generally very pleased with the quality of their virtual care experience. “I am grateful to have the service because it is much easier than going into the office, especially during this time,” one user wrote in a survey response.

CHPW will do more in the coming years to advance telehealth work. In 2021, we partnered with our network of CHCs in developing a multiyear strategy that includes expansion of telehealth to increase access to specialty and behavioral health care, as well as patient access to, and comfort with, technology.

At the end of the year, we seized an opportunity to advance that strategy, courtesy of a \$1.36 million grant to our parent Community

Health Network of Washington from the Washington’s Department of Commerce for a “digital navigator” program to serve CHC patients. The program will include a state hotline, one-on-one coaching, and other services to help patients use technology to support their health.

Driven by the community

To advance equity and dismantle social barriers to care, we also felt it was incumbent on us to listen more closely to those most impacted by our work. Accordingly, we developed a roadmap of activities we deemed critical for improving member engagement, experience, and satisfaction.

“We recognize that to improve the health of communities across Washington State, we must listen to the needs of those communities and work together to find solutions,” said Abha Puri, Program Manager, Member Experience in CHPW’s Quality and Population Health department. “By creating programs and policies that are driven by

community voice, we aim to improve both the health and health care experience for our members.”

One key activity outlined in our multiyear plan was the creation of a blueprint for a “Member Listening Post,” a program that gives our members an opportunity to share their experience in real time as they engage with key member-facing teams at CHPW.

Our Pharmacy department served as the pilot for this program. Medicare members who get medication refill reminder calls from the Pharmacy team are asked about their experience. If they have any unresolved issues, they are transferred to our Customer Service “Medicare Concierge” team for assistance.

We will use learnings from our Pharmacy pilot in 2022 to support improvements and identify opportunities for program expansion to other departments that directly interact with members.

Bridging the care gap

Other steps we took to improve care access and experience included:

- Partnering with Landmark Health to offer in-person provider house calls in five initial counties (Snohomish, King, Pierce, Spokane, and Clark) to our most vulnerable Medicaid and Medicare members.
- Launching the Caring Connections suicide prevention outreach program to vulnerable members. In the program’s initial six months, we provided social connectedness to 147 members via supportive text messages and letters.
- Expanding our popular ChildrenFirst benefit program for Apple Health (Medicaid) members to include gift card rewards for maternal postpartum visits, plus the introduction of coverage toward non-medically necessary circumcision.
- Expanding our partnership with Unite Us to four additional counties for a total of nine counties. Unite Us is a technology platform CHPW uses with its health and social services network to ensure members are connecting to care.



HANDS ACROSS THE ENTIRE STATE



CHPW's goal to provide access to health coverage through public programs for all eligible people in all regions of Washington State took a giant step forward in 2021.

We received the green light from Washington's Health Care Authority to return to the Salish region (Clallam, Jefferson, Kitsap counties) in July 2021, and the Great Rivers and Thurston-Mason regions (Grays Harbor, Pacific, Lewis, Wahkiakum, Cowlitz, Thurston, Mason counties) in 2022 as a provider of Apple Health (Medicaid) coverage.

With the expansion, CHPW was available as an Apple Health insurance option at the start of the new year in all 39 counties within the state. "We are thrilled to be able to serve everyone who qualifies for Medicaid coverage across the State of Washington and provide access to whole-person, high-quality care," said Leanne Berge, CEO of CHPW and its parent organization, Community Health Network of Washington (CHNW).

2021 Membership



Apple Health
262,695



Medicare Advantage
(includes SNP)
14,362



Cascade Select
546

“Whether folks are seeking medical or behavioral health services, or social services support, we are here to listen to them and help them get the care they need,” she continued.

Debut of Cascade Select

2021 also marked the debut of our Cascade Select “public option” plans, a new type of individual and family health insurance option, that CHNW offered through the Washington Health Benefit Exchange and in close partnership with CHPW. Washington State legislators approved creation of Cascade Care, including the Cascade Select plans, to increase the availability of quality, affordable health care coverage in the individual market.

CHPW was the only health plan in the state to actively support the public option legislation (SB 5377). With our Legislature’s leadership and the support of our network of Community Health Centers and statewide partners, we collaboratively were able to lower health care costs and increase value for individuals enrolled in Cascade Select.

CHNW also doubled its Cascade Select service area to 18 counties for the 2022 plan year and features some of the lowest-cost Silver plans in the overall Qualified Health Plan market in Washington.

Dual Plan expansion

On the Medicare front, we added six more counties to our Medicare Advantage Dual Plan (HMO SNP — for people dually eligible for Medicaid and Medicare) coverage area, effective in 2022. That brought our Dual Plan presence to a total of 27 counties – an unsurpassed Dual service area of any Medicare managed care organization in the state.

And our Medicare Star rating, a measure of Medicare Advantage plan performance by the Centers for Medicare & Medicaid Services (CMS), got a boost, rising to 3.5 stars from 3. The increase was due in part to internal initiatives and collaboration with CHCs to improve access and delivery of care to our members.

A growing membership

In total, we exceeded target enrollment numbers across all our health plan offerings, with some increase in our Apple Health membership attributed to state’s temporary relaxation of some eligibility and verification factors during the pandemic. Overall, we ended 2021 with more than 277,000 members, growing nearly 10 percent over the prior year.

We are grateful to all our CHCs, providers, state and community partners, and members for advancing our goal to ensure affordable quality health coverage for all Washingtonians.

Financial Strength

As of December 31, 2021

Assets

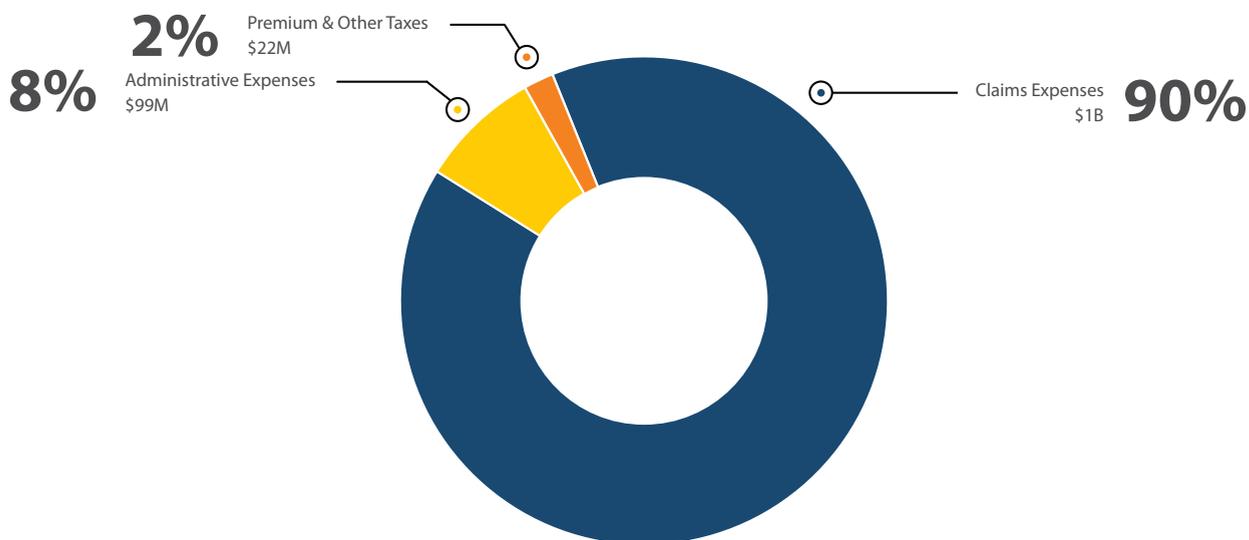
Cash & Investments	\$545.7M
Other Assets	\$80.3M
Total Assets	\$626.1M

Liabilities/Surplus

Operating Liabilities	\$373.4M
Debt	\$0.0
Surplus	\$252.7M
Total Liabilities/Surplus	\$626.1M

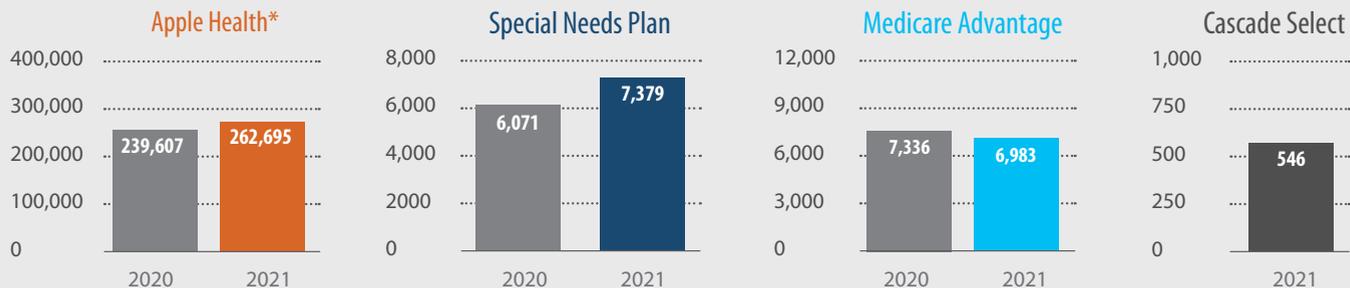
Composition of Expenses

As of December 31, 2021



Member Enrollment

As of December 31, 2021



* Includes Behavioral Health Services Only (BHSO)

Board Members

Sheila Berschauer

Board Chair

Chief Executive Officer

Moses Lake Community
Health Center

Carla M. DewBerry

Board Vice Chair

Independent Director

Aaron Wilson

Board Treasurer

Chief Executive Officer

CHAS Health

David Olson

Board Secretary

Chief Executive Officer (Retired)

Columbia Valley Community Health

Manuel Navarro**

Chief Executive Officer (Interim)

Columbia Valley Community Health

William Dowling

Independent Director

Stephen Tarnoff, MD

Independent Director

David Flentge

President/Chief Executive Officer

Community Health Care

Joe Vessey

Chief Executive Officer

Community Health Center of
Snohomish County

Angela Gonzalez

Chief Executive Officer

Community Health of
Central Washington

Raleigh Watts

Executive Director (Former)

Country Doctor Community
Health Centers

Brandy Taylor

Executive Director (Interim)

Country Doctor Community
Health Centers

Dian Cooper

Chief Executive Officer (Retired)

Cowlitz Family Health Center

Jim Coffee

Chief Executive Officer

Cowlitz Family Health Center

Jesús Hernández

Chief Executive Officer

Family Health Centers

Lisa Yohalem

Chief Executive Officer

HealthPoint

Teresita Batayola

President/Chief Executive Officer

International Community
Health Services

Meredith Vaughan

Chief Executive Officer (Former) (Interim)

Neighborcare Health

Desiree Sweeney

Chief Executive Officer

NEW Health

Regina Bonnevie Rogers, MD

Medical Director

Peninsula Community
Health Services

Jennifer Kreidler-Moss, PharmD

Chief Executive Officer

Peninsula Community
Health Services

Jeffrey Gibbs, MD

QI Medical Director

Sea Mar Community Health Centers

Jim Davis

Chief Executive Officer (Former)

Tri-Cities Community Health

Jim Merrill

Chief Executive Officer (Interim)

Tri-Cities Community Health

Jodi Joyce

Chief Executive Officer

Unity Care NW

Gaelon Spradley

Chief Executive Officer

Valley View Health Center

Rhonda Hauff

President/Chief Executive Officer

Yakima Neighborhood Health Services

Carlos Olivares*

Chief Executive Officer (Retired)

Yakima Valley Farm Workers Clinic

Christy Trotter

Chief Executive Officer (Interim)

Yakima Valley Farm Workers Clinic

*Founding member of CHNW/CHPW

**Joined early 2022



**COMMUNITY
HEALTH PLAN**
of Washington™

The power of community

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chpw.org