

Parks Rx Task Force Meeting #2: Meeting Notes

Monday, October 4, 2021, 1:00p.m - 3:00p.m.

Webinar via Microsoft Teams

Attendees

Task Force members: Chris Bandoli, Terri Drexler, Hunter George, Cindan Gizzi, Cindy Green, Carrie Hoiness, Amanda McCarthy, Beth Mizushima, Steve Montague, Shawn Rundell, Rob Stevens, Pooja Tandon

Guests: Jennifer Greene, Amy Ellings, Chris Zipperer, Doug Levy, Melissa Johnson, Jackie Berry, Erin Dzedzic, Theresa Sanders, Wendy Brown

Topic	Notes	Next Steps
Opening and Introductions	Task Force (TF) members provided introductions. Additional attendees provided information in the chat.	
Finalize "charter"	<p>Group was asked for comments organized by section. Discussion about the "Purpose" section included:</p> <ul style="list-style-type: none">- amending "outdoor parks and trails" to "through use of parks, trails, fitness and recreation programs for wellness activities"- adding language to include the need for program evaluation. <p>Other items mentioned during this discussion that will not be included in the charter but included when formulating the recommendations include:</p> <ul style="list-style-type: none">- consider the use of Medicaid transportation resources as part of the program- recommendations related to establishing the pilot program will be the same for all three regions, but will reflect the need to adjust for the unique characteristics and specific needs of each region. <p>All other sections of the draft charter "Conducting Business", "Meetings", "Member Roles", "Ad Hoc Committees", and "Communications" were all agreed to without comment.</p>	DOH: Edit charter as discussed and send final version to TF members
Information Session: Insurance Wellness Programs <ul style="list-style-type: none">• Design• Opportunities and limitations• Potential Solutions	<p>Chris Bandoli provided an overview including general information on how health insurance plans work and information on how wellness programs operate under different types of health care coverage.</p> <p><u>Health Insurance plans</u></p> <p>Two types of regulated insurance: government insurance and private insurance.</p> <p>Government insurance includes programs like Medicare and Medicaid. Private insurance is</p>	DOH: Collect additional questions related to employer wellness programs. Secure additional information to be shared for Dec meeting.

	<p>available on the commercial and individual level. Commercial insurance is in two forms:</p> <p>Self insured: Large organizations and employers that finance their own insurance, and have insurance companies manage the program. These are regulated by the federal government and not by the state. Employer has a lot of leeway regarding benefits.</p> <p>Fully Insured: Insurance company accepts the risk. Regulated by state (Office of the Insurance Commissioner) and by the federal government.</p> <p>Around 50% of WA residents covered by commercial insurance or directly by the insurance company. Around 25% of WA residents are covered by a self-insured organization. Medicaid covers around 20%. Medicare covers around 15%. 5-6% are uninsured.</p> <p>How benefits work: Insurance company puts together package and develops a provider network. The insurance company only pays for covered benefits by a network provider and procedures and services that are defined as “medically necessary”.</p> <p><u>Employee Wellness Programs</u></p> <p>Employee wellness products and programs are separate from insurance. Large employers that are self insured have many options. These types of programs are regulated on the federal level. Generally two types:</p> <p>1) <u>Reward without results</u> – for example, employees receive program “points” or rewards for participating in a certain activity or program. Often operate on the “honor system”. Lightly regulated. 2) <u>Health factor</u>: rewards tied to specific health outcomes. Much more regulated and must include protecting health information of participants, following strict guidelines, etc.</p> <p>Value of awards provided by insurance companies is limited to \$100.</p> <p>The Task Force will eventually determine what approach to include in the recommendations to the legislature.</p>	
<p>Information Session: Parks Rx in Washington, Past and Present</p> <ul style="list-style-type: none"> • WA State Parks • Local Park and Recreation programs • Health care programs 	<p><u>WA State Parks</u>: Amanda McCarthy presented information on the Park Rx Washington State Parks and Recreation Commission Starting in 2019, WA State Parks began to support use of Park Rx America website. The website provides a venue for a health care provider to locate a park to then “prescribe” to patient. WA State Parks promoted the program and the website through outreach to provider organizations, ensured all state parks were included in the database, and created a resource flyer/handout. Also connected to Parks Rx America was the Parkscriptions program (Parkscriptions - Recreation Northwest) in Whatcom County. WA State Parks and DOH also partnered on the one-time grant-funded Discover Pass project that distributed annual Discover Passes to health care providers prescribing physical activity to arthritis patients. Park Rx is in WA State Parks 2021-2023 Strategic Plan</p> <p><u>Local Park and Recreation Programs</u>: Hunter George shared information on a prescription program</p>	<p>DOH: Collect additional questions and information related to existing Park Rx programs. Investigate evaluation of Park Rx programs, including level of participation by patients/clients. Secure additional information</p>

	<p>run through Spokane Parks that “prescribed” scholarships to one week summer camp for youth participation. The program was grant funded and is no longer available.</p> <p>SilverSneakers is a program is a program used by many P&R departments, including MetroParks Tacoma.</p> <p>Other examples of programs outside of Washington State include one in Pittsburgh, PA Parks Rx Pittsburgh Parks Conservancy, and Salt Lake County About (parkrxutah.org)</p> <p><u>Health care programs</u>: Steve Montague shared information on Evergreen “Walk with Your Doc” different from national Walk with a Doc – Inspiring communities through movement and conversation attempting to be more personal. Very simple and basic, no prescriptions. Pick a date and time for walk. Wellness coach led stretches and 30-45 minute walk. 20-30 patients. Similar to San Francisco’s “First Saturday” program. Potential concerns that providers have related to these types of programs include: What is the evidence and what is the liability. Advantage to voluntary.</p> <p>Many TF members supported the idea that any type of Park Rx-type program must include all types/levels of healthcare providers and not only physicians.</p>	<p>to be shared for Dec meeting.</p>
<p>Regional Advisory Committees</p> <p>RAC Leads</p> <p>Membership</p> <p>RAC meeting expectations and schedule</p> <p>Tasks before December Task Force meeting</p>	<p>A big thanks to the RAC Leads:</p> <ul style="list-style-type: none"> -Eastern WA: Carrie Hoiness, City of Moses Lake --Puget Sound: Hunter George, Metro Parks Tacoma -Southwest WA: Amanda McCarthy, WA State Parks <p>Submitted names – 25 for Puget Sound, 10 for SW, 2 for Eastern WA. Discussion of missing sectors included Senior Centers, Youth and Community Centers, Local Foundations, Mental Health facilities/providers.</p> <p>Proposed times for RAC meetings:</p> <ul style="list-style-type: none"> 1 meeting @ November/December to introduce the concept 1 meeting @ January/February to discuss input 1 meeting @ March/April to finalize input <p>The goal is to have the RAC membership lists finalized by the end of October. TF members asked to submit suggested members for the Eastern and Southwest regions. RAC Leads will make decision on final membership list for each RAC.</p> <p>Final list of RAC members will be shared with TF members before sending invites to RAC members.</p>	<p>DOH Send RAC membership list to TF members.</p> <p>DOH schedule call with RAC Leads. Send final RAC member list to TF members.</p> <p>RAC Leads: Work with DOH to finalize RAC membership list for each region. Provide initial contact to RAC members.</p> <p>TF Members: Review list and submit additional names before October 18th. Review final list before outreach by RAC Leads.</p>

Next Meeting	<p>Insurance Wellness Programs – additional information on programs and lessons learned</p> <p>Pilot Project – additional information on programs, evaluations and lessons learned</p> <p>Public/Private Partnerships – examples and lessons learned</p> <p>Discussion: How to use our remaining meeting time together</p>	<p>DOH: Develop and plan agenda, secure information for review.</p>

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