

Community Advisory Council (CAC)

MINUTES

Date: Monday, July 11, 2022

Council representatives and others at the table:

Facilitator: Rebekah Fowler, CAC Coordinator (Consultant)

CAC Chair: Dick Knowles

Benton: Janie Tebeau, Lisa Pierson, Sara Hartstein;

Lincoln: Georgia Smith, Marci Frederic (Liaison), Marie Laper, Richard Sherlock, Chelsea Allen (On leave);

Linn: Dick Knowles, George Matland (Liaison), Judy Rinkin, Todd Noble;

Confederated Tribes of Siletz Indians: Cherity Bloom-Miller (On leave)

Local Chairs: LeAnne Trask (Benton), Dick Knowles (Linn); Vacancy (Lincoln)

Presenters: **Rebekah Fowler**, CAC Coordinator, **Charissa Young-White**, Medicaid Programs Manager, IHN-CCO; **Beck Fox**, Health Equity Liaison, IHN-CCO; **Bill Bouska**, IHN-CCO Government Affairs Director; **Kristty Zamora-Polanco**, OHA Innovator Agent; **Melissa Isavoran**, IHN-CCO Assistant VP Medicaid Operations.

ABSENT: Janie Tebeau, Marie Laper, Richard Sherlock, Judy Rinkin

INTRODUCTIONS, ANNOUNCEMENTS, & APPROVAL OF AGENDA & MINUTES

Rebekah Fowler, CAC Coordinator, lead the group through the following items:

- Housekeeping: Mute/unmute; Turn taking/hand raise, Acronyms & Glossary
 - Roll call
 - CAC Representatives, Local advisory committee chairs, & Presenters
 - Moment of silence for Mike Volpe
 - **ACTIONS:** Council to approve present agenda and past meeting minutes.
 - Last CAC Minutes Approved
 - CAC Representative announcements - none
 - CAC Coordinator announcements - none
-

PUBLIC COMMENTS

None

SHARE INITIATIVE

Charissa Young-White, IHN-CCO Medicaid Programs Manager, provided an update on the next round of SHARE Initiative funding & asked the CAC to approve request for proposals (RFP) project evaluation criteria.

ACTION: The CAC voted to approve the request for proposals (RFP) SHARE Initiative

project evaluation criteria (with the following discussed changes...)

Motion to approve SHARE Scoring Rubric and did not get approved. Due date of mid next week 7/20/22. Email with instructions on voting and rubric being sent to only CAC representatives who attended and able to vote.

HEALTH POLICY UPDATE

Bill Bouska, IHN-CCO Government Affairs Director, talked about OHA's proposed Community Investment Collaboratives and ask for input and support.

Discussion: What is the overall feel? State is getting pushback from CMS. Todd shared this effort does not align with the CCO model and will fail with how it's currently being proposed. Dick shared there is not enough of us to advise these bodies of work, we need to focus on what is working well and build off of that instead of creating more work. Implementation concerns were shared by many. Also shared, not all CCOs have a great centralized place to collaborate such as IHN-CCOs Delivery System Transformation Committee. IHN-CCO offered to draft a letter to OHA. More information from OHA would be helpful, listening sessions, opportunities for feedback from the community, etc.

Questions: Can we go back to OHA with recommendations of an opt out if we can prove we have collaborative across our region. Can we allow for implantation changes per county if it is approved?

ACTION: The CAC voted to empower its Chair to draft a letter on behalf of the CAC that outlines that the IHN-CCO CAC's Community Health Improvement Plan has successfully prioritized over \$24 million in pilot project funding, as developed and evaluated by the IHN-CCO Delivery System Transformation (DST) Committee, with over 70 currently actively involved community partner organizations directly selecting projects for funding utilizing the Collective Impact Model. The foundation and emphasis of all this work is on health equity, health system transformation, and addressing the Social Determinants of Health.

- Feedback: do not shorten CAC so we don't lose the impact of "community". Disconnect between OHA and the community. Finding advisory members is going to be a struggle.
- End of July Dick will email out draft so everyone has a week to review then submit August 1st.

IHN-CCO UPDATE

Melissa Isavoran, IHN-CCO Assistant VP Medicaid Operations, provided an update: (See IHN-CCO presentation).

OREGON HEALTH AUTHORITY (OHA) UPDATE

Kristty Zamora-Polanco, OHA Innovator Agent, provide a state update on the following **topics:** Covid counts, 1115 waiver, Redeterminations, CCO 2023 contract draft, Flexible

Services, and CCO intro course.

Discussion- Benton County has higher COVID counts than Linn County. News on Healthier Oregon and how many people have signed up in addition to the CWM members.

Request- Update on Measure 101 and how the money was allocated. What can we as member do to put input into where the money gets allocated in the future?

LIAISON UPDATES

The CAC Liaisons report on Local Advisory Committee activities since the previous CAC meeting. Agenda item skipped due to time constraints; all Local committees have been doing the same work.

CAC REPRESENTATIVE RECOGNITION

Rebekah lead a recognition for the contributions of CAC Rep, Mike Volpe, who passed away this month.

FUTURE CAC MEETING AGENDA ITEMS

Rebekah requested agenda items for future CAC meetings

- 2022 Regional Health Assessment
 - SHARE Initiative
 - Provider Directory
 - Behavioral Health Network adequacy
-

MEETING ADJOURNMENT

NEXT CAC MEETING

- Monday, Sept 12, 2022; 1:00-4:00
-

Acronyms and Definitions

Acronyms

APM – Alternative Payment Methodology, also known as a Value Based Payment

AVP – Assistant Vice President

BIPOC – Black, Indigenous, & People of Color (The nine separate Confederated Tribes of Oregon have expressed a preference for the term *Communities of Color and Tribes*)

BLAC – Benton Local Advisory Committee

CAC – Community Advisory Council

CCC – Communication Coordination Committee (subcommittee of the CAC)

CCO – Coordinated Care Organization (Medicaid services)

CCO 2.0 – The application process to earn a CCO contract for 2020-2024; also the new requirements on CCOs

CEO – Chief Executive Officer

CSO – Chief Strategy Officer

CHA – Community Health Assessment

CHAC – Lincoln Coordinated Healthcare Advisory Committee

CHIP – Community Health Improvement Plan

CMS – Center for Medicaid/Medicare Services (federal)

DCO – Dental Care Organization

DST – Delivery System Transformation Committee, IHN-CCO; tasked with overseeing the IHN-CCO systems transformation plan & pilot projects

FQHC – Federally Qualified Health Center

HIA – Health Impact Area (in the CHIP)

IHN-CCO – InterCommunity Health Network CCO

LLAC – Linn Local Advisory Committee

MAC – Medicaid Advisory Committee

OHA – Oregon Health Authority (State of Oregon, oversees Medicaid)

OHP – Oregon Health Plan (Medicaid)

PCPCH – Patient Centered Primary Care Home or a Medical Home

SDoH – Social Determinants of Health

SHARE – Supporting Health for All through REinvestment

SHP – Samaritan Health Plans (Medicaid, Medicare, Employee and Commercial insurance)

SHS – Samaritan Health Services (Hospitals and providers)

Definitions

- **Alternative Payment Models (APM)** are a form of payment based, at least in part, on achieving good outcomes rather than just being paid for providing a service (fee-for-service).
- **CCO 2.0** is the second CCO contract with OHA beginning 2020-2024.
- **Equity:** The guarantee of fair treatment, access, opportunity, and advancement for all while striving to identify and eliminate barriers that have prevented the full participation of some groups. The principle of equity acknowledges that there are historically under-served and under-represented populations and that fairness regarding these unbalanced conditions is needed to assist equality in the provision of effective opportunities to all groups.
- **Health disparities:** Differences in access to, or availability of, services.
- **Inclusion:** Authentically bringing traditionally excluded individuals and/or groups into processes, activities, and decision/policy making in a way that shares power and ensures equal access to opportunities and resources.
- **Indicators:** measurements or data that provide evidence that a certain condition exists, or certain results have or have not been achieved. They are used to track progress.
- **Liaison:** a person who helps groups to work together and provide information to each other. CAC liaisons share information between the CAC and a local advisory committee.
- **Oregon Health Authority:** The state agency tasked with reforming healthcare. It holds contracts with the Coordinated Care Organizations and with Public Health Agencies.
- **Outcomes:** results or changes, including changes in knowledge, awareness, skills opinions, motivation, behavior, decision-making, condition, or status.
- **SHARE Initiative:** Supporting Health for All Through Reinvestment Initiative comes from a legislative requirement for CCOs to invest some of their profits back into their communities on services to address health inequities and the social determinants of health and equity.
- **Social Determinants of Health (SDoH)** are the conditions in which people are born, grow, live, work, & age. They include availability of resources to meet daily needs. The CAC's CHIP has specifically identified the SDoH of **Housing, Transportation, and Food Access** as priorities for IHN-CCO and its community partners to focus improvement efforts.