Community Advisory Council (CAC)

Draft MINUTES

Date: Monday, November 14, 2022, ZOOM MEETING

Council representatives and others at the table: Facilitator: Rebekah Fowler (s/h), CAC Consultant

CAC Chair: Dick Knowles

Benton: Brecca Claitor; Janie Tebeau, Lisa Pierson, Sara Hartstein; **Lincoln:** Marci Frederic (Liaison), Marie Laper, Richard Sherlock;

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; Bill Bouska IHN-CCO Government Affairs Director; Melissa Isavoran, IHN-

CCO Assistant VP Medicaid Operations; Beck Fox Health Equity Liaison, IHN-CCO.

Absent: Marci Frederic

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
 - o CAC Representatives, local advisory committee chairs, & presenters
- ACTIONS: Council to approve present agenda and past meeting minutes
- CAC Coordinator announcements
 - Tribal representation, the Siletz Tribe has two representatives interested in CAC appointment.
 - o 2023 CAC calendar, The CAC will likely have three hybrid meetings in 2023, one in each county.

PUBLIC COMMENTS

There were no public comments

IHN-CCO UPDATE

Melissa Isavoran, IHN-CCO Assistant VP Medicaid Operations, provided several updates, including:

- Chief Medical Officer update: Dr. Ewanchyna has resigned and Dr. Godek is the interim replacement.
- Regional Health Assessment/Partnership for Community Health update

PROPOSED CAC COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP) PROCESS

Rebekah Fowler, CAC Coordinator, presented a proposed process for the CAC and Local Committees to identify priorities to recommend for the share 2023 CHIP (See Powerpoint)

ACTION: CAC voted to request that its local committees identify priorities to recommend and bring back to the CAC, as outlined in the presentation (Motion by Lisa, second by Judy). Motion passed unanimously.

LOCAL MEETING UPDATES

The CAC Liaisons and Chairs reported on Local Advisory Committee activities since the previous CAC meeting.

Benton: The BLAC meeting was canceled in October, and there was an excellent presentation on Family Connects in October.

Lincoln: Lincoln needs a Chair. In December they will provide input as a focus group for health and human services on the topic of equity and inclusion

Linn: The LLAC held its first Zoom meeting with Spanish interpretation. That went fairly smoothly, and the group will continue to learn Zoom. Maria Buttram was voted Vice Chair and George Matland was reelected Liaison. The committee

- expressed the need for extensions on the Public Health Emergency. People are struggling.
- likes Zoom better than Teams
- Appreciates the IHN-CCO Care Coordination Team
- A member appreciated the support her family received from Linn County during a family mental health crisis.
- One member said they were having difficulty setting up the Linn Co. Developmental Disabilities service across two counties. She had received support in this from the LLAC.

CAC PRIORITIES: SHARE INITIATIVE

Charissa Young-White, IHN-CCO Medicaid Programs Manager, provided an update on the social determinants of health Share Initiative, prioritized by the CAC. (See SHARE summaries Attachment)

HEALTH EQUITY LIAISON UPDATE

Beck Fox, IHN-CCO, provided a brief update on their Health Equity Liaison position. (See Health Equity update)

GOVERNMENT AFFAIRS UPDATES

Bill Bouska, IHN-CCO Government Affairs Director, talked about important state related Medicaid issues that impact IHN-CCO, its members, and the community. (See Government Relations update)

FUTURE CAC MEETING AGENDA ITEMS

Rebekah requested agenda items for future CAC meetings

- 2022 Regional Health Assessment
- SHARE Initiative
- Provider Directory
- Care Coordination Contract

MEETING ADJOURNMENT

NEXT CAC MEETING

Monday, January 8, 2023; 1:00-4:00

Acronyms and Definitions

Acronyms

(any/none) - Any or no pronouns

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)

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)

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

FQHC - Federally Qualified Health Center

(h/h) - he/him pronouns

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

RHA - Regional Health Assessment

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)

(s/h) - She/her pronouns

(th/th) - They/them pronouns

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.
- *Health status disparities* refer to the differences in rates of disease and disabilities between different groups of people, such as those living in poverty and those who are not.
- *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.