

Community Advisory Council (CAC)

MINUTES

Date: Monday, May 11, 2015

Location: Oregon Coast Community College

Council Representatives and others at the table:

CAC Chair: Lawrence Eby;

Benton: Joe Zaerr, Lauren Zimbelman, Michael Volpe, Richard “Stretch” McCain, Sr.;

Lincoln: Ellen Franklin (Vice-chair & Liaison), Patricia Neal, Richard Sherlock;

Linn: Catherine Skiens, Frank Moore, Miao Zhao (Liaison), Paul Virtue;

Local Chairs: Dick Knowles (Linn), Ellen Franklin (Lincoln), Sam Sappington (Benton)

Presenters: **Kelley Kaiser**, IHN-CCO CEO; **Rebekah Fowler**, CAC Coordinator; **Bill Bouska**, OHA Innovator Agent

Absent: Betsy Williams, Hilary Harrison, Melissa Marshall

CALL TO ORDER

Larry Eby, CAC Chair, called the meeting to order at 2:02. Larry had sent out “Seven ways to be a better meeting participant hand out” and read the major headings.

INTRODUCTIONS, ANNOUNCEMENTS, & APPROVAL OF AGENDA & MINUTES

- Coordinator announcements
 - June 3-4 CAC Summit in Sunriver
 - Dick Knowles, Linn Local Advisory Committee to the CAC Chair said that last July, Jessica Hiddleston began working on Community Conversations to engage OHP members. She developed five questions to ask them. The Linn committee had three work group meetings. No one from the community showed up in Sweet Home. In Albany only 1 OHP member showed up. They put out fliers in a great variety of locations and worked hard to get the word out that this meeting was taking place. They also used the Linn Benton Housing and Heath Equity alliance mailing lists.
 - Representative Virtue really likes Mr. Bouska’s suggestion of setting up at the Geary Street clinic to ask 5 questions. Paul is willing to give a couple hours toward this.
 - Representative Franklin how would we bring this forward and get this going.
 - Representative Moore said that if one county wants to implement and then share that with the other two counties, this could be a good strategy. .
 - Ms. Kaiser said that, if it’s coordinated with the CCC, then it can come to the RPC to have a coordinated approach to the provider side of it.
 - Representative Moore, that type of buy in will give it more credibility.
 - Representative Zaerr said we want to ask them what their concerns are. It could be something such as the local movie theater is closing down.
 - Dr. Sappington has had success with recruitment and said that it takes a surprising amount of effort it takes to recruit. Dr. Eby will put this on the CCC agenda and go from there.
 - **ACTIONS:** Council by consensus approved the present *agenda*
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- The council, by consensus, approved the March CAC *meeting minutes*
 - Sam Sappington said that Melissa Marshall said that she was stepping down from the BLAC and from the CAC. Dr. Eby asked Dr. Sappington to forward that resignation. Representative Harrison is stepping down as BLAC co-chair but is hoping to continue as a member of that committee, said Dr. Sappington.
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PUBLIC COMMENT

5 members of the public were in attendance. No public comment.

IHN-CCO UPDATE

Kelley Kaiser, IHN-CCO CEO, provided a CCO and a Board of Directors update (handout)

Operations Report April 2015

IHN-CCO Total Enrollment

59,609 as of April 2015, this is a 5% increase over February

Highlights

IHNCCO continues to work with OHA to be early adopters in managing Mental Health Residential and Autism services.

- New/revised Transformation Plans were required with our 20155 OHA Contract:

1.	CCOs submit draft 2015-2017 Transformation Plans	March 16, 2015
2.	OHA reviews draft plans and compiles feedback	March 17 to May 15, 2015
3.	OHA submits draft plan feedback to CCOs	May 15, 2015
4.	CCOs complete final 2015-2017 Transformation Plans	May 15 to June 10, 2015
5.	CCOs submit final 2015-2017 Transformation Plans to OHA	June 10, 2015
6.	OHA submits written approval of CCOs' final 2015-2017 Transformation Plans	July 1, 2015

- OHA has engaged a firm called Optumas to reassess OHA's 2015 capitation rates and certify the 2016 capitation rates in coordination with OHA's actuarial team. OHA had begun internal work sessions with Optumas to discuss initial strategies and timelines.
 - The OHA Transformation Center is hosting a forum of Oregon health care transformation champions for peer-to-peer learning and networking. This discussion-based format will be a place for CCOs and other innovative health care leaders in Oregon to present their projects and discuss their learnings.
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Project Topics

A large portion of the agenda will consist of multiple concurrent small-group table discussions on projects (see ‘presentation format’ below). They are requesting submissions of projects that address the four topic areas below which include, but are not limited to, the examples provided.

1. Traditional Health Workers (e.g. role in primary care clinics, communities, and schools)
2. Complex Care (e.g. strategies to manage chronic pain, multiple complex chronic diseases, or for supporting members with Severe and Persistent Mental Illness)
3. Behavioral Health Integration (e.g. behavioral health services into primary care and primary care into behavioral health services, including addictions)
4. Health Information Technology and Telehealth (e.g. electronic health records, health information exchange efforts, population and care management tools, and telehealth)

The next public meeting sponsored by IHN-CCO will be held on April 20, 2015, in Corvallis. From 5:30 to 7 p.m. at Corvallis-Benton County Public Library, 645 NW Monroe Ave., Corvallis

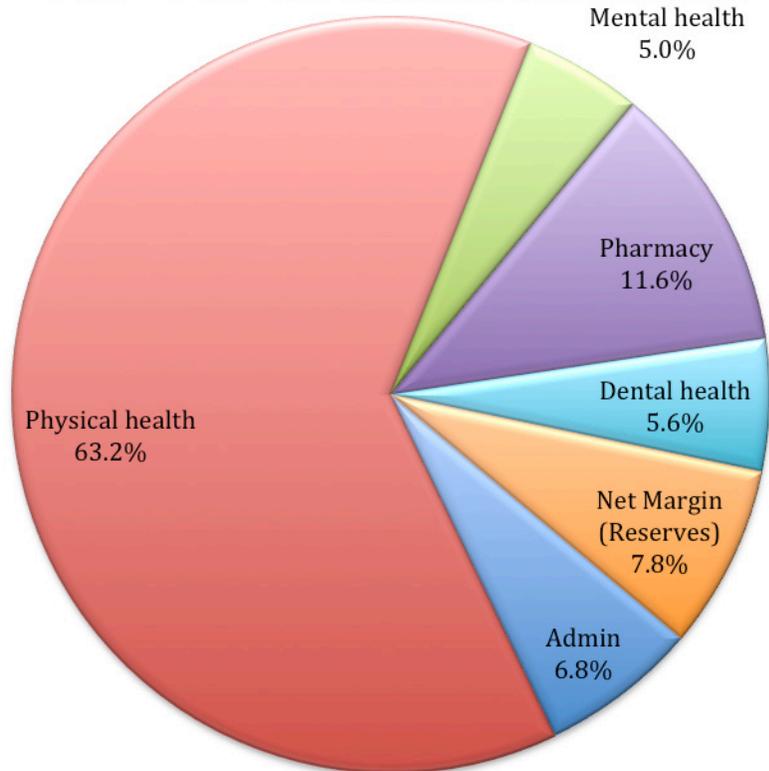
IHNCCO will be conducting an IHN-CCO Orientation and discussion for both the Regional and Local CAC Committees. This will be held May 11th at the Oregon Coast Community College.

Regional Planning Committee Update:

Transformation Plan pilot evaluation process and tie into the Elements of transformation, the HIA’s of the CHIP and the Quality metrics (Please see attached)

Utilization Update:

YTD - Feb '15 Service Utilization



The state is in the midst of deciding payment contracts. The feds put the State on an action plan for setting their rates and this triggered a need to re-determine the rates by Jan 1, 2016. The rates could pay the same or less, not likely increase. They will also decide if that's effective retroactively or as of July 1, 2016.

Mr. Bouska said that when the feds looked at how all the states were determining rates, they were seeing that they were very different for the same types of enrollees.

Representative Zhao asked how this might impact the members. Ms. Kaiser said that it might impact provider rates, but not services.

Where did the funds come from? Providers took a 10% pay cut to create a transformation fund to pay for pilots.

Claims for all the new members from Jan 2014 only began coming in in the fall.

Part of the reason the administrative expenses of IHN are so low is because they contract with Samaritan for some of their infrastructure and therefore IHN doesn't have to reinvent the wheel and supply everything on their own. But IHN and Samaritan have their own boards, their own audits, they are separate.

OREGON HEALTH AUTHORITY UPDATE (OHA)

Bill Bouska, OHA Innovator Agent, provided a state update. Mr. Bouska said that the CCO incentive metrics for 2014, the data was given to the CCOs, they have 1 month to validate the data and provide feedback, then soon after that, hopefully in mid-June, OHA will publish the public report which lets them know how they did on the metrics and how much incentive funds they will receive.

Representative Volpe said that IHN fell short on a couple metrics last year and asked if they would meet those this year. Kelley said that they are very carefully looking at that data right now and so doesn't have an answer for that. With an increase in membership, the denominator increased and so it's more challenging to meet those metrics. They have put a lot of effort into meeting the metrics they didn't meet last year and hope to meet them this year.

Annual Coordinated Care Model Summit will be November 17 in Portland. CAC will meet Nov 9. A save the date will be sent out.

OHA is restructuring. There's a new Director who wants to create a structure that focuses more support on the CCOs.

Christine House of OHA works with outreach and engagement of enrollment and held an enrollment fair in Albany. Mr. Knowles attended and brought CAC applications with him. There was some interest.

COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)

Rebekah Fowler, CAC Coordinator, will outline the CHIP Progress Report. Communication Coordination Committee members will add to the discussion, and Larry Eby will lead the discussion:

- 2015 CHIP Progress Report
 - Overview and discussion
 - ACTION: Adopt 2015 CHIP Progress Update
 - CHIP Outcomes & Indicators
 - Local Committee progress update
 - Next steps in the work plan
 - This Progress Report, as written, **fulfills OHA requirement** AND provides the CAC with a lot of information.
 - Serves as a **baseline**
 - The work of meeting the goals of the CHIP is ongoing. The **Annual progress report is a snapshot** of where we are and what we're planning to do.
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- All the work related to the CHIP is something we're learning as we go along.
 - Everyone including the local committees, the CAC, the CCO, and community partners are creating processes for doing this work and for evaluating and reporting on CHIP Progress
 - Outcomes and Indicators
 - Committees are right in the middle of this work;
 - Not rushing this work.
 - Outcomes & Indicators, once identified, will be crucial to guiding us in CHIP evaluation and reporting
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LINN COUNTY COMMUNITY CONVERSATIONS UPDATE

Dick Knowles, Linn Local Advisory Committee Chair, lead a committee update on Linn's recent Community Conversations events.

- What is a Community Conversation, and how did it come about?
- How did the Conversations go, and what were the main things learned?

Mr. Knowles said that Jessica Hiddleston, a Linn Local Advisory Committee member and Linn Benton Health Equity Alliance coordinator received a small grant to work on getting community input. She used it to plan for and hold two "Community Conversations" last month in Albany and Sweet Home. She put a lot of effort into advertising these events with the purpose of asking Oregon Health Plan members what they needed for their healthcare. Very few people attended. Linn would like in the future to work on going to where members are rather than having members come to their meetings.

CAC DISCUSSION OF AN EVENING MEETING

Larry Eby lead a discussion of the idea of an evening CAC meeting for July or September. This idea was proposed by Representative Virtue at the March CAC meeting. He thought that more OHP members might attend as public if the CAC met in the evening.

Dr. Fowler said that past experience has shown that OHP members are less likely to attend in the evening during, as demonstrated by the lack of attendance at the Community Conversations events held last month. There have been other attempts in the past in Lincoln County and Benton, as well, and what happens is that no new people attend and many of the core people who usually attend don't either.

Mr. McCain said that he doesn't drive at night. Representatives Neal and Skiens agreed that night driving isn't possible for them.

Representative Virtue wasn't able to participate in this discussion, as he had to leave the meeting early. He was the one who proposed this change. While people generally didn't want to meet in the evening, a decision was made to do an evening meeting to try it out in July and see how it goes because it seemed important to Representative Virtue.

NEXT CAC MEETING AGENDA ITEMS

Dr. Eby asked representatives for requests for the next meeting's agenda. It was suggested that there should be an update from the Regional Health Assessment Project and a discussion of community engagement.

MEETING ADJOURNMENT

Larry Eby adjourned the meeting at 5:03

- Next CAC: July 13, Corvallis-Benton County Public Library, 645 NW Monroe Ave, Main Meeting Room off front entrance
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Minutes approved by CAC September 14, 2015

Acronyms

CAC – Community Advisory Council

CCC – Communication Coordination Committee (subcommittee of the CAC)

CCO – Coordinated Care Organization (Medicaid services)

CHA – Community Health Assessment

CHIP – Community Health Improvement Plan

CMS – Center for Medicaid/Medicare Services (Federal)

DCO – Dental Care Organization

HIA – Health Impact Area (in the CHIP)

IHN-CCO – InterCommunity Health Network CCO

OHA – Oregon Health Authority (State of Oregon)

OHP – Oregon Health Plan (Medicaid)

PCPCH – Patient Centered Primary Care Home