

# Community Advisory Council (CAC)

## MINUTES draft 1

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**Date:** Monday, November 9, 2015

**Location:** CASA of Linn County, Willamette Health Center

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### *Council Representatives and others at the table:*

**CAC Chair:** Lawrence Eby;

**Benton:** Hilary Harrison, Karen Caul, Lisa Pierson, Richard “Stretch” McCain, Sr, Mike Volpe;

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

**Linn:** Catherine Skiens, Frank Moore, George Matland, Miao Zhao (Liaison);

**Local Chairs:** Dick Knowles (Linn), Ellen Franklin (Liaison; CAC Vice-chair), Sam Sappington (Benton)

**Presenters:** **Kelley Kaiser**, IHN-CCO CEO; **Rebekah Fowler**, CAC Coordinator; **Bill Bouska**, OHA Innovator Agent; **Kenny LaPoint**, Housing Integrator Director, Oregon Housing and Community Services; **Brigetta Olson**, Deputy Director; Willamette Neighborhood Housing; **Jennifer Sanders**, Linn Benton Housing Authority, COO & Property Manager.

**Absent:** No one

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### CALL TO ORDER

Larry Eby called the meeting to order at 1:06.

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### INTRODUCTIONS, ANNOUNCEMENTS, & APPROVAL OF AGENDA & MINUTES

- Introductions & Welcome/Congratulations to:
    - Newly appointed Representatives **Karen Caul & Lisa Pierson**
    - Larry announced that Paul Virtue resigned last night.
    - Mike took 1.5 hours to get her via dial-a-bus.
    - Reappointed Reps. Frank Moore, Catherine Skiens, & Michael Volpe, Richard Sherlock
    - CAC Coordinator Announcements:
      - The CAC charter was approved by the IHN-CCO Board of Directors.
      - The Regional Health Assessment Project Coordinator, Ruby Kiker, was introduced and will be recommended to the Board as the Benton County staff person to replace Lauren Zimbelman.
  - **ACTIONS:** The council approved the *Agenda* and *Meeting Minutes* from previous meeting without changes. (Catherine motion, Pat, seconded: approved),
  - **Richard asked that hands be raised for a vote.** This was discussed and it was agreed that this is only needed when there is some disagreement or the results are unclear.
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PUBLIC COMMENT

18 members of the public were present. Amy Roy announced that a variety of community organizations have gotten together to provide updates about Legislature decisions of 2015 and the upcoming issues for 2016. A meeting will be held November 19 at the Corvallis Benton County Library. A flier with more information was distributed.

IHN-CCO UPDATE

Kelley Kaiser provided a CCO update

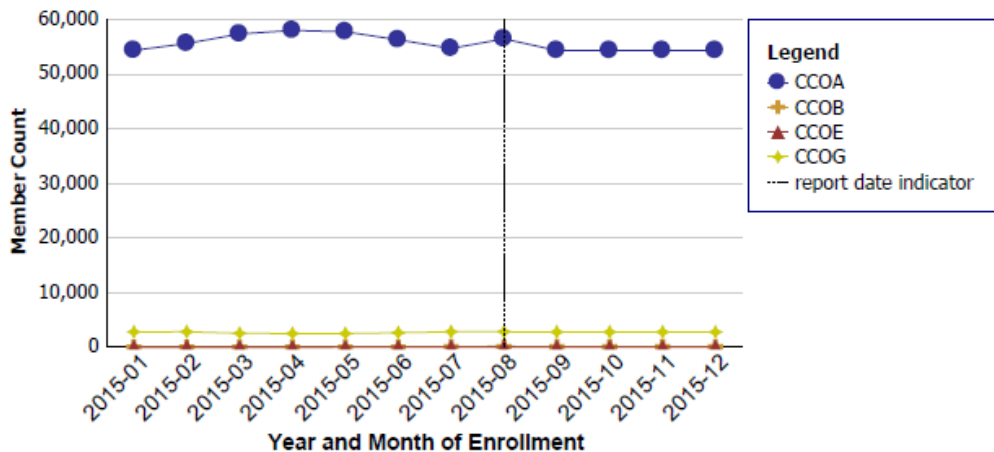
**IHN-CCO Total Enrollment**

57,384 as of September 2015

This is a 3% increase over July, but relatively steady between 57-58k.

InterCommunity Health Network CCO

**Enrollment Trend Report  
2015**



Benefit Package	2015-01	2015-02	2015-03	2015-04	2015-05	2015-06	2015-07	2015-08	2015-09	2015-10	2015-11	2015-12
CCOA	54,458	55,720	57,466	58,127	57,869	56,399	54,814	56,572	54,446	54,433	54,433	54,433
CCOB	53	37	37	34	72	72	110	146	94	94	94	94
CCOE	47	47	48	47	47	47	45	51	58	58	58	58
CCOG	2,808	2,829	2,553	2,509	2,499	2,654	2,827	2,829	2,786	2,783	2,783	2,783

**Highlights**

“A” members are enrolled in IHN-CCO, the rest (a minority) are fee-for-service and have all

benefits through the state rather than the CCO.

**2015 Rates:**

IHN-CCO 2015 rates will be retro adjusted back to January 1<sup>st</sup>. This adjustment will be made before the end of 2015. Members will not be impacted by this change. IHN was prepared for this possibility and set aside funds to cover the adjustment.

**2016 Rates:**

IHN-CCO has started the process to develop our 2016 rates. As OHA is just beginning the process IHN does not know yet what this means.

**OHA update:**

The Oregon Health Authority hired Varsha Chauhan, MD, as chief health systems officer to lead the Health Systems Division of OHA.

**Quality Metric report**

IHN has a focused approach to improving Quality Metrics for 2015. The Community as a whole has stepped up to collaborate on improving these scores, which have considerable focus on Access.

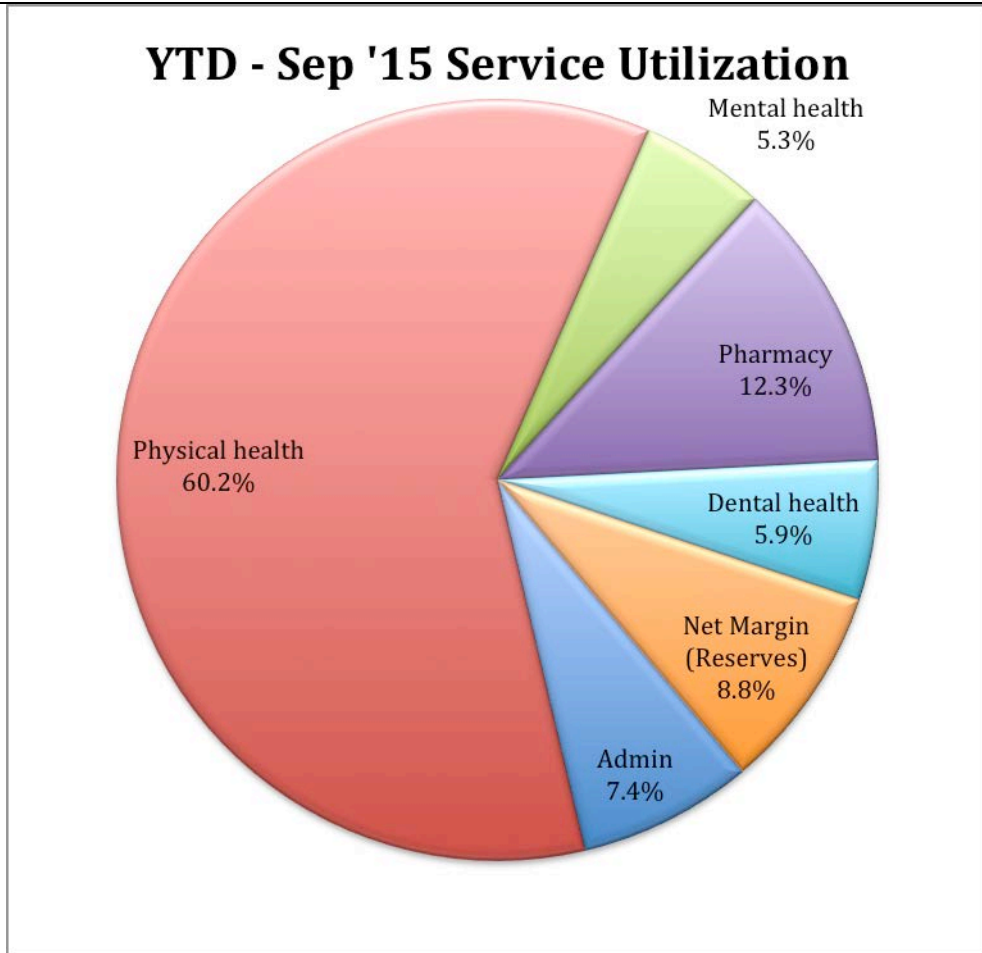
**Transformation**

The second quarter, 40+ page IHN-CCO Pilot Summary report from the IHN-CCO DST was presented and some of the great work happening was highlighted. Kelley forwarded that to the CAC last week.

**IHN-CCO Request of the CAC**

Kelley Kaiser asked the CAC for input/feedback on how to get IHN-CCO members to come in for well visits. Wellness appointments are a good preventative care strategy for catching health issues before they become urgent. 30% of members called agreed to come in, but most do not want to come in when they're well. Annual visits are a quality metric for the CCO. IHN has set up extra clinic hours.

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Hilary Harrison would like to have utilization rates for children. Kelley will look into seeing what's involved in doing that.

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## OREGON HEALTHCARE AND HOUSING INTEGRATION

Kenny LaPoint, Brigetta Olson, and Jennifer Sanders talked about the connection between stable housing and its impact on wellbeing.

**Housing Presentation** – Kenny LaPoint - Housing Integrator for Oregon Housing & Community Services– Has met with every CCO in Oregon to look at bringing housing priorities to the CHIP – *See Oregon Housing & Health Care Integration Best Practices handout.*

The state allocated 62.5 million dollars in new funds for housing: 20 million for Behavioral Health housing. 40 million is targeted to extremely low income and homeless families. His organization is the primary funder of affordable housing. They have assigned points to the application process awards 3 to those who have a regional collaborative that has identified as a priority, such as the CCO CHIP. These points can make or break the success of a grant application. 2.5 million is for

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preservation of existing housing properties.

- Stakeholder steering committee will be opening applications up summer 2016 and funding will be for 2017.
  - Grant funding is tied to having a housing outcome included in the CHIP (3 points).
  - Housing stability has an impact on health outcomes and reduces healthcare costs significantly.
  - LaPoint's agency is looking for a service tie-in between housing and the CCOs.
  - 12 CCOs have housing in their CHIP. Many have a broad goal.
  - CCOs can impact housing related issues by encouraging providers to be engaged with housing agencies.
  - HOUSING FIRST MODEL – Provide permanent housing before addressing other problematic issues the person has such as BH, employment. This model has many indicators associated with it (e.g., reduced ED utilization).
  - They also do healthy homes initiatives, going into homes to remove mold or fix furnaces. They have Home Repair programs.
  - Willamette Neighborhood Housing and the Linn-Benton Housing Authority, are non-profit developers for low-income housing. They rely on the state for funding. This 62.5 million is a rare and amazing opportunity for our region.
  - Rental assistance is provided by Brigetta and Jennifer's agencies
  - Lincoln County ,also has a housing authority who could benefit from funds.
  - Stretch McCain: Section 8 waiting list was 9 years for him. This is not under the control of the panelists who empathized and struggle with this issue, also. For example, Jennifer's agency, the Linn-Benton Housing Authority, has a limited number of vouchers. When someone on the waitlist gets a voucher, they must find housing within 90 days. If there's nothing available, they lose their voucher and return to waiting list. This is a perfect example of how our region needs more affordable housing.
  - Landlords must accept housing vouchers.
  - Stretch said that it costs money to apply for housing, and if you're turned down, you don't get that money back.
    - Agencies suggest renters should find out rental criteria before applying. This reduces the chance of them applying for something that they're not eligible for.
  - Kenny LaPoint, about 6-7 CCO CHIPS had housing as an original priority. About 12 now have or are in the process of making that a priority now. Some are broad priorities; some are specific to a vulnerable population.
  - Once people are stabilized in housing, they're healthier.
  - Larry Eby: Where is this housing? Where are the grocery stores? Do people have transportation to and from the housing? Housing is important, but it can't be in a service desert. People need to be able to get to healthcare, community access, and groceries.
  - Kenny LaPoint: The application for housing development funding requires applicants demonstrate that the proposed housing location is within range of services. Catherine Skiens said that the Linn-Benton Housing Authority considers this when looking at applications; however, there aren't readily available locations that are accessible to services. Those areas already have housing that may not be affordable to low income
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renters.

- Kelley Kaiser said that while the CCO will not be building low-income housing, they can act as a convener to assist their community partners in developing such housing. Any housing outcomes should be framed with that in mind.
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## OREGON HEALTH AUTHORITY UPDATE (OHA)

Bill Bouska, OHA Innovator Agent, said that OHP benefit renewals are on hold. Every year OHP members have to go through a process to determine if they're eligible for OHP benefits. This is the redetermination process. There were about 5000 IHN members who lost their benefits this fall. OHA anticipates that most of them will come back on the rolls and not have an interruption in benefits. The feds have approved Oregon's request to pause redeterminations. In 2016 there will be a new redetermination process. Hilary Harrison asked how members will be notified that their redetermination date has been delayed. While there are those who don't respond to redetermination notices, there are also those who are expecting theirs and will need to be notified that their deadline has changed. Bill will look into that.

Bill said that the CAC should consider how to answer Kelley Kaiser's earlier request of the CAC about getting the word out to members that they should have an annual wellness examine with their primary care provider.

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## LIAISON UPDATES

The CAC Liaisons & Sam Sappington reported on Local Advisory Committee activities since the previous CAC meeting.

Miao Zhao – Linn County hosted a guest speaker about Trauma Informed Care. COMP-NW is working to train medical students in Adverse Child Experiences and Resilience. This month Linn will hold office elections. IHN-CCO Health Disparities Workgroup is meeting monthly.

Ellen Franklin – Lincoln County met twice and has been working with Valerie Fulleton (IHN-CCO Communications Coordinator) about the next IHN-CCO public meeting. Since the CAC's Strategic Planning Meeting last month, the Lincoln committee wants to find an Issue Brief topic to focus on, so they are educating themselves right now. Phil Warnock of the Council of Governments will be coming to the next Lincoln meeting to discuss non-emergent transportation.

Sam Sappington – Benton County Local Advisory Committee, at their October meeting, approved a new charter and elected Judy Ball as the new Vice-chair. They also did some brainstorming about prioritizing their areas of focus for the next year.

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## OUTCOMES & INDICATORS WORKGROUP UPDATE

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Rebekah Fowler reported on the progress of the Outcomes & Indicators Workgroup. She said that they have met three times and will be 2-3 more times before the January CAC meeting, when they will present their recommendations report to the CAC. So far, they have agreed to a process for doing the work. Using that process, they have identified 16 Outcomes, and have a preliminary set of indicators selected for Chronic and 2/3 Maternal Health outcomes. The RHA Team will be looking at the selection to fine tune the wording and make recommendations before the Dec 3 workgroup meeting.

- Bill Bouska said that the CHIP is updated every 5 years, minimum, according to OHA. The CAC does annual progress reports.
- Richard thinks housing should be prioritized in the CHIP and several people agreed.

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## STRATEGIC PLANNING RETREAT DISCUSSION

Rebekah Fowler summarized goals of the CAC, which were identified at the retreat. The group will also discuss how to go about finalizing a set of questions to be used during community outreach.

### **A) CAC 2016 Goals**

1. Finalize Outcomes & Indicators Work and provide annual CHIP Progress Report
2. Become and stay more informed about IHN-CCO Transformation Pilot Projects
3. Explore how to increase community engagement and find creative ways to engage community members in the work.
4. Increase awareness of health disparities and advocacy of health equity

The local committees also brainstormed goals for themselves and are moving forward with those. Rebekah encourages all committees to hold their own mini-strategic planning meeting to do some team building, etc.

### **B) Brainstormed Community Engagement questions:**

Oregon Health Plan members

- What is working in your healthcare?
- What is not working in your healthcare?
- What are the barriers to your wellness?
- What people wished they had covered?
- Do you know what your healthcare benefits are, if so, do you use them?
- What is on your getting healthy or being healthy wish list?
- Jessica Hiddleston's questions: similar to above
- Note: not limit to OHP, be inclusive and be bigger to include other plans

To finalize these questions, a small workgroup will meet, possibly via phone. It's preferable to have one person per county volunteer and to let Rebekah know by the end of the week if you

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would like to be involved.

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## CAC CHAIR ELECTION

Lead by Larry Eby, the CAC voted on a new CAC Chair for the January 1, 2016—Dec 31 2018 term (Attachment).

Ellen Franklin, a charter member of the CAC and Chair of the Lincoln Local Advisory committee accepted the nomination for CAC Chair. Hilary & Pat & Miao & Frank all fought over being the first and second to motion to approve Ellen's election as chair. The motion was approved by unanimous vote. Ellen's name will go to the IHN-CCO Board of Directors the first week of December and her term will begin January 1, 2016.

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## CAC REPRESENTATIVE COMMENTS

*Purpose: CAC Representatives have the opportunity to talk about any service related issues they have encountered or are aware of, thus sharing information between counties and with the CCO.*

- Lisa Pierson – There is a possibility to get a partnership with Samaritan, OSU, and IHN-CCO to bring a local detox center here in our region. Ed Ray of OSU said there may be a possibility to get the OSU Foundation involved. The community is concerned with adding jail beds when we're not addressing addictions and mental health.
    - Richard Sherlock – Honor Farm might be a good alternative to jails.
    - Newport passed a 54 million dollar bond to build new hospital facility. They are asking for a detox facility or respite beds as part of that facility.
    - Benton Local Advisory Committee will put together an Issue Brief to bring back to the CAC. They will decide whether to bring it to the January meeting or a later meeting.
  - Karen Caul said that at a recent breast cancer screening event, 40 women had mammograms.
    1. 25% of Baby Boomers have no retirement savings, another large percentage have an inadequate retirement savings. Housing is an issue for them. It would be a good idea if our CHIP had this as a priority.
    2. Pat Neal is building a section 8 housing duplex and was required to build a garage, which makes costs high for the amount of rent she will be able to ask from low-income renters. She said that the Planning Commission should make changes to requirements for low-income housing.
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## 2016 CAC MEETING DATES & TIMES

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The CAC agreed to move their meeting from 2:00-5:00 to an hour earlier next year. So, meetings will be 1:00-4:00 for the following 2016 dates:

- Jan 11 (Benton)
- Mar 14 (Lincoln)
- May 9 (Linn)
- July 11 (Benton)
- Sept 12 (Lincoln)
- Nov 14 (Linn)

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## NEXT CAC MEETING AGENDA ITEMS

Larry Eby & Rebekah Fowler requested agenda items for the next CAC meeting.

Early Learning Hub will be presenting and possibly the BLAC will have an Issue Brief. The Outcomes & Indicators recommendations will take a significant amount of time.

With extra time at the end of the present meeting (a first) Larry asked each member of the public to introduce themselves and say why they attended today.

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## MEETING ADJOURNMENT

Larry Eby adjourned the meeting at 3:56.

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### 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

**FQHC** – Federally Qualified Health Center

**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