

CCOs Community Advisory Council Meeting

Remote Meeting via Zoom

October 25, 2021

Noon-2pm

PRESENT

CAC Members: Tara DaVee (Trillium OHP representative), Drake Ewbank (PacificSource OHP representative), Val Haynes (Head Start), Chris Hanson, DMD (Trillium CAP), Silver Mogart (Trillium OHP representative), Michelle Thurston (Trillium OHP representative), Michelle Hanks (ShelterCare), Roxie Mayfield (PacificSource OHP representative), Char Reavis (PacificSource OHP representative), Tannya Devorak (PacificSource OHP representative), Caity Hatteras (Trillium OHP representative), Michele Haga (PacificSource OHP representative), Todd Hamilton (Springfield Public Schools, Education Representative), Josephine Williams (PacificSource OHP representative), Everett Bork (PacificSource OHP representative), Jessica Hibler (Confederated Tribes of Siletz Indians)

Attendees: Kayla Watford (Lane County CCOs, Prevention), Teresa Coppola (Lane County CCOs, Prevention), Jeanne Savage (Trillium Community Health Plan), Jacqueline Moreno (Lane County CCOs, Prevention), Rebecca Donell (Oregon Health Authority), Cindy Fisher (Capitol Dental Care), Adria Godon-Bynum (Lane Community Health Council), Courtney Johnston (Trillium Community Health Plan), Rhonda Busek (Lane Community Health Council), Debi Farr (Trillium Community Health Plan), Robert Phillips (Trillium Community Health Plan, Tribal Liaison), Marissa Lovell (Lane County CCOs, Prevention), Carrie Copeland (FOOD For Lane County), Charlotte Carver (South Coast Regional Early Learning), Katharine Ryan (PacificSource Community Solutions), Jennifer Webster (Lane County CCOs, Prevention), Leilani Brewer (PacificSource Community Solutions), Mark Buchholz (PacificSource Community Solutions), Lisa Hernandez (PacificSource Community Solutions)

I. Welcome and Introductions

Tara DaVee (CAC Co-Chair) opened the meeting. CAC members shared their names, pronouns, and affiliations with the group. Guest and staff shared their names, pronouns, and affiliations in the chat.

- a. Tara introduced two new CAC members: Josephine Williams (PacificSource OHP representative) and Everett Bork (PacificSource OHP representative).
- b. Kayla Watford let everyone know that she and Teresa Coppola have updated the CAC Handbook, with support from Rhonda Busek and Debi Farr, and it will be available to CAC members soon. In addition, CAC members are welcome to sit in on the 'new member orientations' if they'd like a refresher.

II. Public Comment: There was no public comment.

III. Process: Routine Minutes and other Approvals

- a. **Approval of Minutes:** Michelle Thurston made a motion that the CAC approve the September minutes. Caitly Hatteras seconded the motion. The September minutes were unanimously approved.
- b. **MEC Charter:** Kayla Watford informed the group that due to continuing discussions around CAC sub-committees' membership, she'd like to postpone the vote on approving the MEC Charter and take some time to more clearly articulate our decision-making process, including who are voting members versus guests and staff.

IV. Updates

a. Meeting packet materials:

- i. **OHA update:** Rebecca Donell provided an update on vaccination boosters, which raised a lot of questions from the group. Rebecca put the following in the Chat:
From the OHA FAQ: *Q. Does my booster dose need to be the same vaccine as I originally received? No. All three COVID-19 vaccines are available as a booster dose for all fully vaccinated people who are eligible. This means people can get a booster dose at any location that provides COVID-19 vaccines, depending on advice from their health care provider, individual preference, availability or convenience. Also in the Chat: Q: Should someone who is eligible for a third dose and a booster get both? No. Someone who is eligible for both a third dose and a booster should only get one additional shot. A third dose of Pfizer or Moderna is recommended for people who are immunocompromised and did not experience a strong immune response to their primary vaccine series. Third doses are to be given 28 days or more after the second dose. Consult with your health care provider about your medical condition and whether getting an additional dose or a booster dose is appropriate.* Jennifer Webster provided a link to the State website: <https://govstatus.egov.com/or-oha-booster-covid-19-vaccine>
Additionally, Rebecca will provide vaccination booster information flyers to the group after the meeting.
- ii. **CAC and Prevention Workgroup Quarterly Summaries:** Kayla Watford reminded people that these reports are included in the agenda packets and asked if there were any questions or concerns about this process. There were none.
- iii. **Trillium CAP report:** Chris Hanson, DMD, reported that Lucy Zammarelli gave an update on the BHASC/CASC (Behavioral Health Advisory Systems Committee / Clinical Advisory Systems Committee) meetings, with the news that LaneCare is now available to offer training to PCP clinics on Cognitive Assessment & Care plan services. Carlyn Weirda, LMFT, QMHP, Outpatient Services Director/Mental Health Therapist at Looking Glass Community Services gave a PowerPoint presentation that provided an overview of Looking Glass services. Overall, Trillium is doing well on their COVID Vaccine metric for the SW service area but groups Youth 12-15, American Indian/Alaskan Native and Black/African American are lagging behind. Chris reported that the biggest struggle this year for CCOs has been getting children in for immunizations and well care visits.

- i. **PacificSource Community Solutions CAP report:** Rhonda Busek gave the report in Dr. Robin Virgin's absence. Rhonda reported that the PSCS CAP focused on metrics and priorities for 2022. PSCS is on track with metrics for this year. Priorities in 2022 will include workforce development, especially in Behavioral Health. The CAP is interested in improving interoperability and communication channels across the continuum of care and will be considering some component within the scope of the Health Information Exchange (HIE) for a priority area. LCHC staff will put together a plan and bring back to the CAP for input and approval. Rhonda also mentioned there will be an expansion of the CAP membership to include a Behavioral Health Councilor. They will be filling the position of independent primary care provider as Dr. Liz Stover has resigned due to assuming additional duties.
- b. **HEC Update:** Kayla Watford informed the group that the Health Equity Planning Committee met in October. The process for becoming a member will be different for this sub-committee, in order to ensure diverse representation from communities experiencing health inequities and members working to advance equity in Lane County. The planning group decided on setting up a Meet & Greet session on Zoom and anyone interested in this work can attend. If someone decides they'd like to apply for membership, they'll be asked to fill out a revamped CAC Application. Kayla posed this change in process to the group for an informal approval and attendees agreed this change made sense for the Health Equity Committee. **Kayla will send the Meet & Greet Zoom invite to CAC members when a date for the event is finalized.**

V. 2022-2024 CCO Prevention Plan (Jacqueline Moreno/Jennifer Webster)

Jacqueline Moreno explained that the Plan has been changed to a 3-year plan in order to align with the CCO 2.0 contract, as well as to make the Plan a bit more flexible due to ongoing COVID interruptions in programs. There are carry over funds primarily due to in-person school closures in 2020. The new Plan is very similar to the 2021 Plan, with some changes in the funding for parenting programs and a few additions. Since the State is now funding parenting education to a greater extent, the CCO Prevention Plan funding for the Community-based Parenting Education can be reduced. Jacqueline reviewed any changes in each of the current strategies. For example, the Triple P online program is now going to be offered to all parents, instead of offering this service to OHP members only. Strategies to address an increase in Sexually Transmitted Infections (STIs) and to research the readiness of the community to address Sugar-sweetened Beverage Consumption (SSBC) were added to this Plan. Jennifer Webster spoke briefly about the evaluation metrics of the Plan and asked that the 2022-2024 CCO Prevention Plan be approved. Michelle Thurston made a motion to approve the Plan. Caity Hatteras seconded the motion. The 2022-2024 CCO Prevention Plan was approved. **Jacqueline Moreno will be presenting the Plan to the CCO governances for final approval in November.**

VI. CCO Community Benefit Initiatives

a. Trillium Community Health Plan: Debi Farr

Debi Farr gave a brief overview of the Trillium Community Health Plan's Community Based Initiatives (CBIs) proposal, which includes: changing from TREN to Connect Oregon for a better online resource platform (\$24,000); supporting the National Alliance for Mental Illness (NAMI) (\$70,500); and, continuing to support the Prevention work with schools and parenting programs (\$382,243 – based on \$1.33 pm/pm as of September 2021). In addition, Trillium will use an Innovation Fund for Grants (\$5,000-\$125,000) to support Behavioral Health integration, oral health integration, SDoH, cost containment, and CCO quality metrics. The proposal will be brought to the CAC in November for approval.

b. Pacific Source/Lane Community Health Council: Rhonda Busek

Rhonda presented an overview of the Lane Community Health Council's Community Based Initiatives (CBIs) proposal, which includes: providing HIV Alliance with \$50,000 to continue their Harm Reduction/Needle Exchange program; providing Lane School with \$50,000 to continue their support for students with social, emotional and/or behavioral issues; providing \$100,000 to Whitebird so they can extend their outreach program; providing \$25,000 to South Lane Family Resource Center outreach program; and, providing \$100,000 toward food boxes distributed through schools, which will contain Holiday gift cards. Rhonda asked the CAC for approval of these proposals. Michelle Thurston made a motion to approve LCHC's CBI proposal. Char Reavis seconded the motion. LCHC's CBI proposal was approved by the CAC. **LCHC's CBI proposal will be presented to the LCHC Board on November 9th for final approval.**

Meeting Schedule

- **Next CAC Meeting is November 22, Noon to 2pm**

ACTION ITEMS:

- **Rebecca will share vaccination booster info flyers.**
- **Teresa will send the Meet & Greet Zoom invite to CAC members when a date for the event is finalized.**
- **Jacqueline will present the Prevention Plan to the CCO governances for final approval in November.**
- **LCHC's CBI proposal will be presented to the LCHC Board on November 9th for final approval.**

Appendix A.

Community Benefit Initiative Discussion

October 25, 2021

Lane County Community Advisory Council

What are Community Benefit Initiatives (CBI)?

As a part of CCO 2.0, Health Related Services were created to provide flexibility to CCOs to offer services that are non-covered services but improve the health of OHP members and address social determinants of health.

Health Related Services = Flexible Services + Community Benefit Initiatives.

- Flexible Services: Cost-effective services delivered to an individual OHP member to supplement covered benefits.
- Community Benefit Initiatives (CBI): Community level services that include but are not limited to OHP members and are focused on improving population health and health care quality.



Examples of CBI:

24 hour nurse advice line

Trauma informed training for schools

Debt consolidation education and renters' financial counseling

Evidence-based parenting education for parents engaged with DHS and the foster care system

Social skills group and parenting training

Support for food bank programs/classes that teach about growing food, cooking or nutrition

Needle Exchange programs



Community Based Initiatives

Community Information Exchange (CIE) \$24,000 (annual)

- T-REx (Aunt Bertha)
- Connecting health care and social services sector to address social determinants of health needs

NAMI \$5,875/month \$47,000 YTD

- Family support for adult mental health

Prevention #1.33 pm/pm \$382,243 YTD

- School based initiatives
- Parenting support



Community Based Initiatives

Innovation Fund \$125,000

- Grants (\$5,000-\$125,000)
- BH Integration
- Oral Health Integration
- Social Determinants of Health
- Cost Containment
- CCO Quality Metrics



Community Benefit Initiatives (CBI)

- CBI Funding \$325,000.00

Proposal by Community Impact Committee

- HIV Alliance – Harm Reduction/Needle Exchange Program - \$50,000.
- White Bird – Bethel/Serbu Dental Outreach program with expansion into Springfield - \$100,000.
- Lane School - Lane School is designed to provide intensive interventions and supports to students with social, emotional, and/or behavioral needs that have impacted that ability to find success in their home school. Utilize evidence-based practices and a school-wide systems approach to effectively support student needs. Those strategies include Positive Behavior Intervention and Supports systems, Trauma-Informed Care, and Collaborative Problem Solving - \$50,000.
- Holiday Gift Cards – Create plan to distribute in food boxes through schools - \$100,000.
- Outreach to South Lane Family Resource Center to meet basic needs including food - \$25,000.



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Next Steps

- October 25th – Bring Final Proposal from Community Impact Committee to CAC.
- November 9th – Bring to Lane Community Health Council Board for final approval.



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