

CCOs Community Advisory Council Meeting

Remote Meeting via Zoom

September 27, 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), Dr. Robin Virgin (PacificSource CAP), Carla Tazumal (Lane County DDS), Caity Hatteras (Trillium OHP representative), Michele Haga (PacificSource OHP representative), Mary Ann Wren (Advantage Dental, Oral Health Representative), Todd Hamilton (Springfield Public Schools, Education Representative)

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), Lucy Zammarelli (LaneCare), Rebecca Donell (Oregon Health Authority), Cindy Fisher (Capitol Dental Care), Shelly Hawkins (Lane Community Health Council), Courtney Johnston (Trillium Community Health Plan), Rhonda Busek (Lane Community Health Council), Debi Farr (Trillium Community Health Plan), Kelli DeVore (PacificSource Community Solutions), 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), Michelle Hampton (Lane County Public Health), Dr. Pat Luedtke (Lane County Public Health)

I. Welcome and Introductions

Char Reavis (CAC Co-Chair) opened the meeting. CAC members shared their names, pronouns, and affiliation with the group. Guest and staff shared their names, pronouns, and affiliations in the chat. Char introduced the new CAC members: Michele Haga, pronounced Hay-Gah (PacificSource Community Solutions OHP representative); Todd Hamilton (CAC Education representative and Superintendent for Springfield Public Schools); and, Mary Ann Wren (CAC Oral Health representative with Advantage Dental).

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 July minutes. Caity Hatteras seconded the motion. The July minutes were unanimously approved.

- b. Approval of Prevention Workgroup Charter:** Michelle Thurston made a motion that the updated Px Workgroup Charter be approved. Chris Hanson, DMD, seconded the motion. The Px Workgroup Charter was unanimously approved.

IV. Updates

- a. Oregon Health Authority – Rebecca Donell:** The updates from OHA were sent to everyone via email. Rebecca pointed out the opportunity for attending Collaborative Meetings. She also suggested people check out the new matrix of community health priorities at the Community Transformation Center. Rebecca provided an overview of her role at OHA as an Innovator Agent in a document titled “IA At A Glance”, which was sent to everyone in the OHA/CAC Update Sept/Oct 2021 email from Kayla Watford.
- b. Summary: CAC Summer Survey – Teresa Coppola:** Teresa informed the group that 16 people participated in the CAC Summer Survey. Most people chose a hybrid meeting approach as we move forward. There were also many great suggestions for trainings. We will be going over the survey in more depth in October and November.
- c. CAC Membership – Kayla Watford:**
- i. The Selection Committee interviewed people on September 23rd for two PacificSource Community Solutions OHP Member positions. The candidate recommendations will be presented at the October Lane Community Health Council (LCHC) Board meeting for approval.
 - ii. Caity Hatteras has decided to step away from her long-standing role as CAC Co-Chair. She will continue to serve as a CAC member and Trillium Board member. A huge thanks to Caity for her many years of leadership. Caity shared the acrylic award she received acknowledging her service that went “Above and Beyond”!
 - iii. Kayla spoke with each of the other Trillium OHP representatives about this vacancy, and Tara DaVee expressed interest in serving as the new CAC Co-Chair, working alongside Char Reavis. Tara has served as a Co-Chair in the past and has years of leadership experience in our community. Michelle Thurston made a motion to approve Tara DaVee as the new CAC Co-Chair. Caity seconded the motion. Tara was unanimously approved to be the new CAC Co-Chair.

V. Committee Reports & CCO Updates:

- a. CAC Committee/Workgroup Reports** (The complete summaries of the Px Workgroup and Committees were shared on the Zoom screen (which were sent via email to be read in full). Brief summaries were provided in this meeting.
- i. **Prevention Workgroup (Px Workgroup):** Tara DaVee highlighted the fact that **the three-year Prevention Plan is under development, which will be presented to the CAC and approved in October.** The STI presentation today will help to inform potential strategies to be included in this plan. In addition, a sub-group from the Px Workgroup met to discuss changing the language of ‘childhood obesity prevention’. They made the decision to use “Empowering Kids to Be Healthy”, which will reflect an emphasis on a more uplifting approach to promoting healthy bodies and healthy minds.

- ii. **Rural Advisory Committee (RAC):** Michelle Thurston and Char Reavis shared an overview of the very successful South Lane Mobile Crisis Response Community Conversation, which was held September 22nd. There were 66 participants, all very enthusiastic in participating in this important discussion, which explored what the community wants and needs in order to improve the response to behavioral health crisis situations in South Lane County. A summary of the meeting is available and next steps will be discussed soon.
 - iii. **Member Engagement Committee (MEC):** Michelle Thurston and Char Reavis provided a brief overview of the continuing work of improving the process of ordering prescriptions by mail and improving the communication channels between OHP members and their CCOs. The MEC has also been addressing miscommunications related to smoking cessation guidelines and elective surgical procedures, as well as helping to improve the CCOs Grievances and Appeals (G&A) process. A major goal is to empower members to use the G&A process. Char did submit a grievance recently and expressed her appreciation of the response and help she received, encouraging others to do the same.
 - iv. **Health Equity Committee (HEC):** Tannya Devorak reported that the HEC planning group has met twice to draft a charter and to make an outreach list for potential membership. **Additional details will be shared with the CAC once the process for new membership is determined.**
- b. **CCO Clinical Advisory Panel (CAP) Reports:** Dr. Hanson and Dr. Virgin agreed to submit monthly written reports to the CAC moving forward. They were available for questions and the discussion quickly turned to COVID testing. A list of resources are available in the Appendix.
- c. **CCO Updates**
 - i. **Ridesource response** – Char Reavis acknowledged that both CCOs quickly responded to the news that Ridesource riders were being temporarily limited to people with urgent or life-sustaining needs. Using processes outlined in the CCOs contracts regarding unanticipated service changes, both CCO organizations responded and worked to communicate with OHP members about the change. Char thanked the CCOs for the quick response.
 - ii. **Brief Board Reports:**
 - a. **Lane Community Health Council** – Char Reavis reported that PacificSource Community Solutions presented their Health Equity Plan. There was a review of the Q2 Grievance & Appeals Report noting access to care, transportation issues, and denied authorizations.
 - b. **Trillium Governing Board** – Caity Hatteras reported that Centene, the corporation that manages Trillium, has decided that all employees must be vaccinated against COVID. There was also a discussion about the Community Benefit Initiatives (CBIs), which will be presented by both CCOs today.

VI. CCO Community Benefit Initiatives – Rhonda Busek & Debi Farr

As part of OHA's CCO 2.0, Health Related Services was created to provide flexible funds for OHP member health needs that are not normally covered by Medicaid. In addition, CBIs can fund health needs for non-OHP members in the community. The goal is to improve healthcare in the community. A power point was presented, which will be attached to these minutes in the Appendix.. **CAC members were asked to share any feedback related to the CBI proposal (requested by October 8). Debi and Rhonda will present a final proposal at the October CAC meeting.**

VII. STI Presentation – Dr. Pat Luedtke & Michelle Hampton

A power point was presented on the 'big four' STIs: chlamydia; gonorrhea; syphilis; and, HIV. Dr. Luedtke shared his concerns about the increase in cases of all of them except for HIV. There has been an increase in congenital syphilis, which is especially worrying, and which shows how multiple failures of diagnosing and treating syphilis happened (e.g., pregnant women passing syphilis to their babies). The increase in female cases of gonorrhea is also especially worrying. There may be an opportunity to include prevention of STIs in the 3-year prevention plan. Future questions can be emailed to Michelle.Hampton@lanecountyor.gov or by calling Michelle at 541-682-8797.

Meeting Schedule

- **Next CAC Meeting is October 25, Noon to 2pm**

ACTION ITEMS:

- **Jacqueline Moreno will be finalizing the three-year CCO Prevention Plan and presenting it at the October meeting.**
- **The HEC planning committee will share details about the membership process for joining the HEC in the next few months.**
- **CAC members will share any feedback related to the CBI proposal by emailing Kayla (requested by October 8).**
- **Debi and Rhonda will present a final CBI proposal at the October CAC meeting.**
- **CAC members will contact Michelle Hampton with any further questions about STIs and related work in Lane County (Michelle.Hampton@lanecountyor.gov; 541-682-8797)**

Appendix A.

Covid Testing Resources

Bethel school district has weekly testing free to students. Here's a link to their COVID-19 information page, which also links to the COVID data dashboards in both Spanish and English.

<https://www.bethel.k12.or.us/covid-health-and-safety/>

UO has testing locations out in the community; also a testing site on campus (saliva test)

<https://coronavirus.uoregon.edu/map-testing>

Here's the link to Lane County Public Health testing information:

https://lanecounty.org/government/county_departments/health_and_human_services/public_health/2019_novel_coronavirus_covid19/community_testing

Here is the link to the PacificSource Medicaid COVID FAQ page:

<https://blog.pacificsource.com/home/covid-19-updates/medicaid-faq-for-members/>

The state is also looking into home testing options, which may become available at pharmacies soon.

Appendix B.

CAC Written Updates – September 2021 Committees and Workgroup

- a. **Member Engagement Committee (MEC) – Lead: Michelle Thurston**
 - i. Committee working to address the challenges related to getting prescriptions by mail and the complexity of using the online system.
 - ii. Both CCOs are exploring options for sending refrigerator magnets with the Nurse Hotline phone number to OHP members. Exploring additional communication campaigns to keep members informed about their healthcare options.
 - iii. Smoking cessation and elective surgical procedures:
 - Char Reavis and Michelle Thurston attended a joint CCO Clinical Advisory Panel (CAP) meeting in July to discuss the requirement of smoking cessation for OHP members prior to elective surgeries. Discussion revealed that there are miscommunications happening between members and providers regarding the guidelines. Both CCOs agreed that OHP members should be: empowered to share their concerns; given clear information about guidelines; encouraged to

engage in grievance and appeal processes; and, given information and support for quitting tobacco.

- Both CCOs provided information to the MEC about their respective Grievance and Appeal processes and agreed to continue to work on making them more accessible to members.
- The MEC shared an overwhelming interest in learning more about how Traditional Health Workers (THWs) can be involved in efforts like these.

b. Prevention Workgroup (Px Workgroup) – Lead: Tara DaVee

- A sub- group of the Px Workgroup met in August to discuss rebranding the Prevention priority/category, currently called “Childhood Obesity Prevention”, to something that is less stigmatizing and shaming, and better aligned with our objectives of promoting physical activity and nutrition. This is not a label of a specific program, but rather how we talk about our programs, with the goal of supporting kids and families in *having* healthy choices. Ideas and feedback about specific language and replacements for “*Childhood Obesity*” were solicited previously from the CAC Prevention Workgroup.
- The group landed on “*Empowering Kids to Be Healthy*”, which felt aspirational but not deficit-based, is weight-neutral, inclusive, environmental, and representative of the work.
- The three-year Prevention plan is under development. There is work being done with evaluations of data and checking in with contractors.
- The 2020 repurposing funds still need to be spent on youth mental health. The Prevention team is working to engage youth in a discussion about youth mental health, but several factors have slowed this project down. RAC members suggested that the marketing language be framed more positively, such as discussion around wellness, resilience, or stress reduction.

d. Health Equity Committee (HEC) – Leads: Silver Mogart & Tannya Devorak

- The planning group met twice to draft a charter and outreach list for potential membership. The group will be reaching out to partners in the community to seek new membership; CAC members have also shown interest in the group.
- DRAFT HEC roles and responsibilities include:**
 - Recommending strategies for authentic engagement with communities experiencing health inequities

- Providing direction to the CAC, Lane County's CCOs, and the Clinical Advisory Panels (CAPs) on addressing health inequities in alignment with:
 - Lane County's shared Community Health Improvement Plan;
 - The CCO's Health Equity Plans and the Transformation & Quality Strategy
 - Providing feedback on how to collect, analyze, and share community health data in accessible and culturally appropriate formats
 - Reporting back to the CAC
- e. **Rural Advisory Committee (RAC) – Lead: Char Reavis**
 - i. Approved a history document to preserve the successes and challenges of being a 'Rural Advisory Council' (prior to 2021). Document is meant to be a supplement to the RAC's updated committee charter.
 - ii. Request was made for a RAC lead representing Trillium Community Health Plan CCO. Discussed the need to expand overall membership.
 - iii. Hosted a South Lane Mobile Crisis Response Community Conversation on September 22 in partnership with Be Your Best, Lane Community Health Council, Lane County, PacificSource Community Solutions CCO, and Trillium Community Health Plan CCO. The goal was to explore what the community wants and needs in order to improve response to behavioral health crisis situations in South Lane County. This initial discussion will help local and county-wide partners better understand the current needs to inform a community-based crisis response plan.
 - **# of attendees: 66**
 - **Next steps:**
 - A summary of the community conversation will be shared with attendees and planning partners to inform next steps.
 - A follow-up survey will be sent to attendees and members of the South Lane community who wish to provide additional input on this project.
 - Planning committee members will be invited to debrief the community conversation with the RAC at their October meeting (October 13).
 - A follow-up conversation with the South Lane Latinx and Guatemalan communities is under development in partnership with the South Lane School District Family Resource Center (details to come).

CCO Clinical Advisory Panel (CAP) Meetings

Trillium Community Health Plan CAP – September 9, 2021

- **Vice Chair:** Dr. Bill Walter of Community Health Centers of Lane County was unanimously approved for the position of Vice Chair.
- **CAP Member Organization Presentation:** Dr. Bill Walter gave a PowerPoint presentation on Community Health Centers of Lane County that included photos and information on how many clinics there are, where they are located, who their providers are, how many Trillium patients they serve, and constructive feedback for Trillium on how the removal of prior authorizations for ECHOs would make it be easier for their providers. Dr. Savage replied that this process is currently being reviewed by our UM Committee and will have an update to provide at the next meeting.
- **Meeting Ground Rules:** Dr. Jeanne Savage proposed meeting ground rules for review and discussion in both English and Spanish. The ground rules encourages commitment to engaged and respectful participation in meetings. It was unanimously approved by the committee to adopt the ground rules.
- **Chief Medical Officer Update:** Dr. Jeanne Savage, Trillium's CMO provided an update that included information and a discussion on the evidence based practices topic of Monoclonal Antibodies.
- **Joint Subcommittee Update:** Dr. Jeanne Savage provided a Joint CAP subcommittee update that both Jeanne and Dr. Chris Hanson serve on together. CCOs Trillium and Pacific Source are working together with their marketing teams to develop unified and cohesive outreach messaging related to COVID-19 vaccinations.
- **Pediatric Advisory Team (PAT) Meeting Update:** Dr. Jeanne Savage provided the Lane County Early Childhood Mental Health (ECMH) Provider Map and a presentation titled "18 Months in the Life of the Pandemic: Results from the RAPID-EC Surveys" both of which were presented at August's PAT meeting. Visit www.lanecounty.org/early for more resources and information. The PDF of the ECMH service map can be downloaded here: https://p1cdn4static.civicle.com/UserFiles/Servers/Server_3585797/File/BHASC/ECMH/1.%20ECMH%20Provider%20Map_6.21.2021.pdf
- **Lane County Public Health Update:** Dr. Patrick Luedtke provided a public health update that included the latest data on COVID-19 cases in Lane County, the fall surge that is expected and how providers and clinics can prepare. Dr. Luedtke reported that it is not expected that local hospitals will be able to provide mass vaccination events for kids like they did for adults and encouraged providers to make plans on how they can assist in providing COVID-19 vaccinations to their pediatric patients.

- **Trillium CCO Metrics Update:** Miriam Herrmann, Trillium's Manager of Strategic Provider Partnerships provided a CCO metrics update and information on the new COVID-19 vaccination metric that was introduced a few months ago.
- **CCO Update:** Courtney Johnston, Trillium's Senior Director of Government Relations reported that Trillium currently has 35,680 Trillium members in Lane County.
- **Legislative Update:** Courtney Johnston, Trillium's Senior Director of Government Relations provided a legislative update that included an overview on legislation that is being implemented, Behavioral Health investments and how money is being allocated, upcoming RACs, and an update on 1115 Medicaid Waiver and metrics.

PacificSource Community Solutions CAP – September 15, 2021

1. Discussed the effect of Covid surge on quality performance and aggregated testimony, which included a review of factors affecting the current state of Health Care in Lane County, for submission to OHA.
 - a. Hospitals, emergency departments and urgent cares overwhelmed with Covid positive and suspect patients.
 - b. Vaccine mandate for HCW strongly supported and has resulted in loss of unvaccinated staff. This is uniformly straining all services and is consequently affecting patient access at all points of service.
 - c. Postponement of emergent and elective cases that could not be moved to non-hospital surgical centers adversely affecting patient care.
 - d. Patients presenting to hospital with non-Covid conditions much later in their course, due to fear, also adversely affecting patient care.
2. On October 5th, PacificSource is hosting a discussion for Primary Care and Specialty Behavioral Health providers to discuss improving Psychiatry Access in Lane County.
3. Tool shared with the group on access numbers for Lane County providers to access Early Childhood Mental Health Providers.

Appendix C.

(CBI Power Point Presentation – see next page)

Community Benefit Initiative Discussion

September 27, 2021

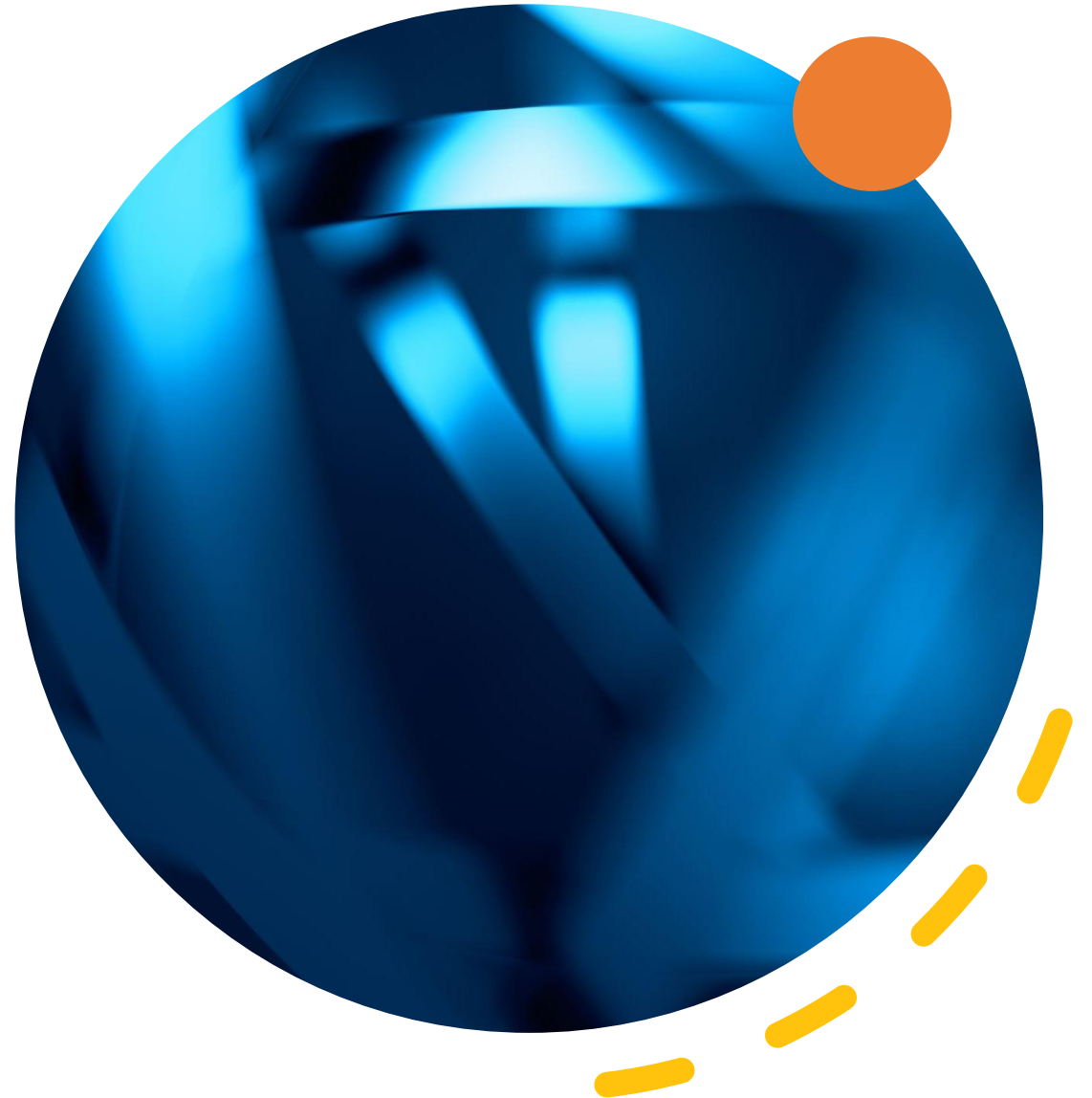
Lane County Community Advisory Council

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
 - Current Ideas (What do you think?)
 - HIV Alliance – Harm Reduction/Needle Exchange Program
 - White Bird – Bethel/Serbu Dental Outreach program with expansion into Springfield.
 - Housing Collaborative – Continued support for Housing Collaborative meetings.
 - 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.
 - Holiday Gift Cards – Create plan to distribute in food boxes through schools. Ensure Rural Areas are reached.
 - Food for Lane County – Non-perishable food items for crisis services.



**Lane Community
Health Council**

Next Steps

- September 27th - Present Ideas to Community Advisory Council (CAC) for feedback.
- October 22nd - Bring CAC feedback to the Community Impact Committee. Finalize proposal.
- October 25th – Bring Final Proposal from Community Impact Committee to CAC.
- November 9th – Bring to Lane Community Health Council Board for final approval.



**Lane Community
Health Council**