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\*Lane Community Health Council is the governing board of PacificSource Community Solutions - Lane

**Lane County (LC) Coordinated Care Organization (CCO) Community Advisory Council (CAC)**

**Hybrid Meeting via Zoom**

**March 24, 2025 - Noon**

**CAC Members Present:**

Brian Johnson (Lane County Public Health), Caity Hatteras (Trillium OHP Representative), Chris Hanson (Trillium Clinical Advisory Panel Liaison), Darci Standefer (Trillium OHP Representative), Denise Bunnell (PacificSource OHP Representative), Jessi Preston (PacificSource OHP Representative), Josephine Williams (PacificSource OHP Representative), Kayl Bourgault (PacificSource OHP Representative), Lee Bliven II (Trillium OHP Representative), Ivy Medow (PacificSource OHP Representative), Lana Gee-Gott (Pacific Source CAP), Nissa Newton (PacificSource OHP Representative), Silver Mogart (Trillium OHP Representative), Tara DaVee (Trillium OHP Representative), Tannya Devorak (PacificSource OHP Representative), and Val Hayes (Head Start).

**CAC Members Absent:**

Antonio Huerta (RISE/TransPonder), Carla Tazumal (Developmental Disability Services), Drake Ewbank (PacificSource OHP Representative), Jessica Hibler (Tribal Representative), Michelle Thurston (Trillium OHP Representative), Nick Ridge (PacificSource OHP Representative), Shannah Putney (PacificSource OHP Representative), and Todd Hamilton (Springfield Public Schools).

**Other Attendees:**

Mindy Bentley (Advantage Dental), Amanda Lampson, Becca Powell (Trillium), Brit Taft (Trillium), Brenda Gilmore (Florence Area Community Coalition), Courtney Johnston (Trillium), Debi Farr (Trillium), Demond Hawkins (Trillium), Dominique Lopez--Stickney (Trillium), Dustin Zimmerman (Oregon Health Authority), Hannah Tacke (PacificSource), Kellie DeVore (PacificSource), Leilani Brewer (Live Healthy Lane), Lauriene Madrigal (Lane Community Health Council), Mark Cokenour (Trillium), Mariah Miller (Pacific Source), Marissa Lovell (Lane County Public Health), Megan Romero (PacificSource), Seti Page (Lane County Public Health), Sheila Wegener (Oregon Department of Human Services), Sadie Baratta (Lane County Public Health), Samantha Duncan (Be Your Best Cottage Grove, Health Hub), Genevieve Schaack (RAC Member), Kayla Watford (Lane County Public Health), Nena Hayes (Lane County Public Health), Pam Berrian (Minutes Recorder).

**I. Welcome & Introductions**

**a. Member Support**

Nena referred to the shared meeting agreements provided in the packet materials.

- CAC shared meeting process and agreements.
- Window of Affect Tolerance

Tannya opened the meeting and previewed the agenda. She thanked Innovator Agents Mark Cokenour (Trillium) and Mariah Miller (PacificSource) for attending. She encouraged attendees who felt comfortable to please identify themselves and their organization in the chat box.

Nena presented two CAC member bios for March:

1. Denise Bunnell, a PacificSource member, has been involved with the CAC to support her community and help be a voice for those who may not be able to be properly heard. Some of her tough topics include disabilities, medical disorders, addictions, homelessness, and systematic neglect. She is active in Day of Caring and Family for Every Child. She was just appointed to the Homes for Good Advisory Board and her family is part of 4H.

Denise added that she had been a grandmother since her early 40s has eight children and an “unofficial 9th child.”

2. Jessi Preston, is a new PacificSource CAC member. She's also on the Board of the Lane Community Health Council and is an artist. Her motivation for CAC participation was that she's had to learn how to navigate the healthcare system for disabled children and believes her insights could help shape the future of health care services in Lane County. Some of her tough topics are that she has a hard time not getting emotional about the suffering that is present in our community. However, she knows these are the topics that need our attention the most. A fun fact about Jessi is that she lived and worked on an organic seed farm in Southern Oregon for 8 years, and she learned about sustainable agriculture and running a small business.

Silver asked for clarification on the group Jessi is part of. Jessi serves on the Lane Community Health Council, the governing board for PacificSource. This is sometimes confused with the Council for the Community Health Centers of Lane County.

#### **c. Breathing Exercise.**

Kayl led a breathing exercise.

#### **d. Public comment**

Kayla reported there were no requests for public comment. She said time had been reserved to acknowledge and honor the passing of former CAC member, Roxie Mayfield.

Tara said Roxie joined the CAC early in the process. She said unfortunately Roxie passed at the beginning of March of this year. She said she was not aware of a planned memorial service and read an excerpt from a Facebook page which highlighted her work as an active member of the Home Care Commission and the Lane Independent Living Alliance (LILA), described her love for animals, her generosity, and enjoyment in the little things in life.

Additional memorializing comments were shared in the chat box. Kayla offered to share any information she received about a memorial service. A moment of silence was taken to honor Roxie.

## **II. Member Approvals**

### **a. February 24, 2025 Minutes**

**MOTION: SILVER MOGART MOVED, SECONDED BY DENISE BUNNELL TO APPROVE THE FEBRUARY 24, 2025 MEETING MINUTES.**

**The motion passed with one abstention. Brian Johnson abstained, and stated he was absent from the last meeting.**

### **b. Application for new membership due to staff transition – Mackenzie (Kenzie) Tingle, Advantage Dental, fulfilling Mindy Bentley’s term**

**MOTION: JESSI PRESTON MOVED, SECONDED BY CAITY HATTERAS, TO APPROVE MACKENZIE TINGLE AS A NEW CAC MEMBER REPRESENTING ADVANTAGE DENTAL**

**The motion passed unanimously. There were no abstentions.**

## **III. CCO Presentation: Quality Incentive Metrics**

Tannya introduced Hannah Tacke with PacificSource Community Solutions and Becca Powell with Trillium Community Health Plan.

Hannah introduced herself as the Quality Incentive Measure Program Manager for PacificSource.

Becca introduced herself as the Strategic Provider Partnerships Manager for Trillium.

Hannah said that she would provide information about quality incentive measures (QIMs), discuss the program structure and methodology, an outline the benchmarks set by the Oregon Health Authority (OHA). She said that the purpose of the QIMs was to improve the overall health of Oregon residents who were enrolled in the Oregon Health Plan (OHP), and that they applied to all coordinated care organizations in Oregon. She said for 2025 there were 13 QIMs.

Hannah provided a slide presentation and said at least 10 QIMs must be met out of 13 to receive a 100% payout, and that the technical specifications of each measure were published by the OHA, and available on its website. She said each CCO was eligible to earn a maximum amount of funding based on their performance, and this was usually in the \$8 million range. She explained there was another step after a CCO earned a payout for the year: the Challenge Pool, specific measures that the OHA Metrics and Scoring Committee select as areas of focus for all CCOs. She said there were four measures, and any funding that a CCO did not earn in the payout because they missed measures, may be awarded.

Hannah described the QIM payments methodology used by PacificSource and said CAC members had input in process decisions. She said 80% of the funds go to providers, 10% go to the Social Determinants of Health Quality pool at Pacific Source, and 10% go to the Lane County Prevention Program.

Becca described the QIM payment methodology used by Trillium was determined by a panel of providers and said that 100% of the funds go to the providers using a specific formula period. She provided slides illustrating each QIM metric, whereby each measure had its own pool to pay per gap closed and weighted, based on population, size, and priority.

Hannah said the CAC had likely contributed to the sum of this quality incentive measure work in the past and highlighted her interest in obtaining CAC feedback using a quick Zoom poll about the metrics they were interested in learning more about.

Debi asked if the CAC had been involved in QIM in this way in the past. Hannah replied that the QIM measure didn't exist before Kayla took over the CAC.

Kayla provided the Zoom poll. Denise identified a typo: '*us* disorder' should have been '*use* disorder'.

Hannah responded to questions from Debi and Caity regarding Kindergarten Readiness programs.

Kayla restated a question from the chat box: *What happens when a CCO did not meet a measure?* Becca replied that if a CCO missed more than 3 metrics, OHA determined the percentage of the quality pool they would earn. Hannah added that if that occurred again the next year, there would be an improvement target that took that into account.

Kayla reported she had 23 responses to the poll.

- 43% were interested in the *depression screening and follow up*.
  - 43% were interested in the *social determinants of health social needs screening and referral*.
- She added there was already an annual CAC opportunity to engage on that issue.

Kayla reported an additional question from the chat box: *How was the State supporting providers in achieving these metrics?*

Hannah replied the State supported providers in various ways, and at different levels. She said at CCO levels, Pacific Source had a Population Health Team that met with its providers monthly or quarterly to help them set goals and review strategies, and initiatives. She said at the forefront, the goals reflected how they can improve the member experience and ensure they're getting the care that they need.

Becca replied Trillium was hands-on with a Provider Performance Team that met regularly with its large provider groups around the state to work on QIMs together. She added that their case management teams, and Population Health Teams liaised between OHS, State DHS and their members.

Hannah mentioned that community concerns about a measure was raised at various State meetings, the State may set up work groups where the CCOs, providers, and community members can share their experience and perspective, and work together. She said an example was the *health, equity, meaningful language, and access* measure.

Kayla asked about next steps. Hannah replied they hoped to work with the CAC about improving performance for certain measures, such as those that illustrated interest from the Zoom poll.

There were no other comments or questions. Hannah provided information about additional resources. She and Becca invited members to contact them directly if they had any follow-up questions.

## **V. Break**

The group took a ten-minute break from 1:06 p.m. – 1:16 p.m.

## **V. Updates & Calls to Action**

### **a. Oregon Legislative Session**

Courtney Johnston, Trillium, provided an overview. She said this was a long session of the legislature and summarized the timeline for the passage of bills. She highlighted that after April 8, she would see what bills were moving through the process and which were not. She stated that a budget bill, HB 2010, for Medicaid funding was one of the larger bills being tracked, and said Oregon Medicaid funding was also dependent upon Federal match dollars. She said the formula used to calculate the Medicaid match was used in all states except Alaska and required the Federal Government's approval. She said HB 2010 moved very quickly with bipartisan support and was voted out last week. She said it was a good sign of Medicaid support within the Legislature.

Courtney referred to other bills they are tracking of CCO Interest.

- A bill to establish a task force to identify adult residential as a benefit under the CCO.
- A couple of bills adding stakeholders from Federally qualified health centers or public health or other county stakeholders to CCO Boards, which would involve them in QIMs metrics and scoring.
- Several budget bills, including one relating to reimbursement levels for certain providers, now set by the State for CCOs. There are also budget bills around behavioral health and other provider types to provide funding for those providers. She highlighted a bill specifically about community health workers, related to funding the capacity of community health workers with sustainable reimbursements along with appropriate levels of supervision.
- A bill sponsored by Senator Reynolds, a Portland pediatrician, related to coordinating different pieces of the healthcare system, the social health, and community-based system, to support

families with children in the 0 to 5 age range. She cited examples such as providing Doulas and supporting early learning hubs.

Courtney highlighted a couple of bills she thought were of interest to the CAC:

- A bill to coordinate and align regional planning or community health improvement plans, such as hospital public health plans, health worker plans, health information technology plans, and HealthEquity.
- A bill relating to CCO community investments.

Jessi asked if there were any bills that might be detrimental to the CAC if they were to pass. Courtney replied, generally no.

Courtney added that there were two bills to increase funding from a regional HealthEquity Coalition standpoint and adjusting the funding to inflation, that was not being reflected in Medicaid reimbursements. She said all funding bills were referred to a budget committee that reviewed the totality of the requests and made decisions about what the State can invest in. She said the largest parts of the State budget were health care, public safety, and education and they're all competing for a finite amount of funds. She said that June 28 was the last day of the session.

Courtney remarked that there were good conversations happening around flavored tobacco and a proposed statewide ban on flavored tobacco products., and several bills relating to pharmacy access given the large number of pharmacy closures in Oregon. She opined there could be efforts to increase reimbursements on specific pharmacy products to mitigate the closure problem.

Kayla asked Courtney to alert her if there were any major developments and she would inform the CAC.

#### **b. CCO Governing Board Updates from CAC Board Liaisons**

Tannya shared that her PacificSource Co-Chair term at CAC was coming up in April, and she asked interested members representing PacificSource to consider this leadership role. She asked that members to reach out to Kayla or herself if interested. Members will vote on nominees in April.

#### **CCO Governing Board Updates from CAC Board Liaisons**

Tara DaVee, representing Trillium Community Health Plan, provided the following update:

- Membership was renewed for Jacob Fox and Sean Murphy.
- Each meeting included a Trillium community impact story.
- A CAC update was provided.
- A process was underway to compare contract deliverables and how Trillium was doing as a Plan, involving performance discussions between the State and CCOs.
- Trillium is meeting regularly to plan for for different Federal funding outcomes as it wanted to serve members with the least amount of disruption.
- The South Clinic Advisory Panel Chair Dr. Hansen shared some board approvals and provided an overview of the quality improvement program, and they provided feedback.
- Trillium was successful in meeting all its goals for quality improvement.

- 2025 focus areas would be the Provider Engagement work group and the Community Engagement work group.
- A May 15 joint meeting with the North and the South advisory panels would be held at the Trillium Tigard office, with remote access available, and include a legislative update and a Request for Proposals.
- The regular April Trillium board meeting was scheduled, as well.

Jessi Preston, representing Lane Community Health Council, provided the following update:

- The Community Impact Committee planned to hold off on a decision until summer for the grant process.
- A call to action was initiated to seek 2 to 3 ideas to improve the quality metrics. She mentioned today's presentation was very timely and helpful. She provided an example of an idea to assist with doctor's visits for children by providing a mobile unit for community members. She said another idea could be to suggest that providers make available office hours outside of regular work hours.

Jessi remarked that she spoke with Kayla about establishing a subcommittee to brainstorm ideas or perhaps putting together a poll.

Caity asked if CAC Trillium members could also contribute to a subcommittee or poll considering that her outreach was Pacific source specific. Jessie replied yes, if the poll or subcommittee results represented the CAC.

Kayl offered a suggestion about improving PTO/personal time off to permit attending a children's appointment without parent's losing pay.

Samantha offered a suggestion about embedding healthcare professionals in schools. Denise replied there are some medical clinics in high schools.

Kayla said there was an additional comment in the chat box: Kayl suggested supporting street outreach medical providers like Black Thistle! Reaching populations nobody else does.

Kayla said because CAC was in an exploratory phase, she would like to determine the CAC's preference about the use of a subcommittee or a poll. In the chat box, several members suggested a subcommittee. Another member suggested the OHA Office Hour could be used to brainstorm more ideas.

### **c. Prevention Plan Update-Lane County Public Health**

Seti Page said he was known as Page and shared brief progress update with goal to approve the Plan in April:

- He is obtaining program data to support what to keep and what to change.
- The Plan will be inclusive, and cognizant of the uncertain Federal changes.
- The Plan will concentrate on supporting CAC members.

- He would establish open office hours on Fridays between 1 p.m. and 3 p.m. via Zoom for any CAC member who wants to visit and communicate areas of concern, as Page was new in the role.

Silver asked what role Page was filling at Lane County Public Health. Page replied and said he is the Senior Community Health Analyst, which was Jacqueline's position and started January 6. He said his CAC role was team lead for the Prevention Plan and was still new to the process. He said his support team included Kayla, Marisa, Sadie, Nena, and Brian, at Lane County Public Health.

**d. Actions or recommendations for CAC/CCO Governing Board**

Kayla stated that if any CAC member had questions, or recommendations that they thought should go to the Board in the coming months to please send them her way.

**VI. Adjournment**

Tannya asked members that those interested in the Co-Chair position to please let her or Kayla know. She adjourned the meeting at 2 p.m.