

Lane Community Health Council

September 25, 2019

1:00 p.m. – 3:00 p.m.

Minutes for Regular Meeting

Directors Present: Dr. Steve Allan, Options Counseling and Family Services; Ms. Meredith Nelson, McKenzie Willamette; Mr. Ken Provencher, PacificSource; Mr. John Johnston, Willamette Family Treatment Services; Dr. Karen Weiner, Oregon Medical Group (via phone); Ms. Valerie Rapp, McKenzie River Clinic; Mr. Ron Hjelm, Community Health Centers; Mr. Paul Solomon, Sponsors Inc.; Mr. Tony Scurto, Lane Education Service District; Mr. Kevin Boie, Advantage Dental; Mr. Brad Wakefield, PeaceHealth; Ms. Karen Gaffney, Lane County Health and Human Services

Absent: Dr. Pilar Bradshaw, Eugene Pediatrics

Guests: Mr. Dave DeValk, MASS/NWHP; Mr. Don Costa, Oregon Medical Group (via phone); Mr. Cliff Hendargo, PeaceHealth, Mr. Mark Shalvarjian, Capital Dental (via phone); Mr. Dustin Zimmerman, Oregon Health Authority; Ms. Donna Mills, Central Oregon Health Council; Ms. Coco Yackley, Columbia Gorge Health Council; Ms. Marian Blankenship, PacificSource; Ms. Leslie Neugebauer, PacificSource; Ms. Lindsey Hopper, PacificSource (via phone); Ms. Lisa Williams, PacificSource

1. Call to Order, Introductions and Welcome, Public Comment

Dr. Allan called the meeting to order at 1:00 p.m. Introductions were made around the room. Dr. Allan reported that Ms. Karen Gaffney and Mr. Brad Wakefield have been recommended for Council appointment.

After discussion, it was moved and seconded to approve Ms. Gaffney and Mr. Wakefield to serve on the Lane Community Health Council in the County and Hospital positions, respectively. The motion passed unanimously.

2. Approve Minutes of August 8, 2019 from Lane Community Health Council

Dr. Allan presented the minutes from the previous meeting for review/approval. **It was moved and seconded to approve the minutes as presented. The motion passed unanimously.**

3. Conversation with Health Council Staff

Mr. Allan, introduced Ms. Donna Mills, Member of the Central Oregon Health Council and Ms. Coco Yackley, Member of the Columbia Gorge Health Council. Ms. Blankenship reported that Ms. Mills and Ms. Yackley are present to share their experience as Health Council members in other regions and provide input on process and operations.

Ms. Mills reported that she has been serving on the Council since 2015. In the beginning phases of Council start-up, she suggested that having policies and procedures in place is useful to add structure and direction to the process. Helping the community become familiar with the Health Council model early on is productive for transparency and collaboration. She suggested being nimble in the process, to create a platform that can adjust to community needs. Ms. Mills also shared current projects and investments, and the Council's working relationship with PacificSource. The Health Council currently has five staff members.

Ms. Yackley reported that the Gorge Health Council start-up followed Central Oregon, and was

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able to draft off some of their existing structure and process. The Gorge Health Council initially focused on forming Guiding Principles to establish process for issues such as contracting and data use. The Executive Director of the Council began in a Consultant Role. She reported that their staff of four are co-located with PacificSource staff, and two of the staff are dedicated to the Bridges to Health program.

The Council discussed existing work in the community that could be possible areas for collaboration, such as the Community Health Assessment and Community Health Improvement Plan. The Council discussed areas to address in Guiding Principles, Ms. Mills reported that Central Oregon has Guiding Principles for Board Governance, collaboration goals, Board and Committee work, Value Based Payments and Quality Pool Measurements. *Ms. Blankenship offered to gather document templates and distribute to the Council for consideration.*

Ms. Mills and Ms. Yackley offered to be available for further questions.

4. Shared Learning: 2.0 Behavioral Health

Ms. Neugebauer gave a presentation on CCO 2.0 behavioral health requirements and primary goals. She described access to service requirements and the goal of expanding the number of members supported in the community through “population reach”. She reported on new requirements pertaining to members who are criminal justice involved and collaboration opportunities with the County.

Ms. Neugebauer discussed focus areas for integration and care coordination, including behavioral/physical health and new requirements for integration with law enforcement and social service providers. She described Electronic Health Record (EHR) support requirements including sharing inventories of educational, financial and technical support available for providers.

CCO's will have an increase in accountability for behavioral health comprehensive services and are required to contract with Community Mental Health Program (CMHP) designated by each Local Mental Health Authority to provide community-based specialized services.

Increased behavioral health screenings will be required of many provider types, including both PCPs and BH providers. New screening requirements include pregnancy/post-partum period, adequacy of family home supports, social-emotional screening for members from birth - 5 years in PCP setting, ACEs, and SUD for all members.

Ms. Neugebauer described CCO requirements for provider training and technical assistance. CCOs must report on multiple aspects of behavioral health service delivery, metrics to be determined by OHA. CCOs must also submit a Mental Health Parity Report that demonstrates compliance with parity in mental health and SUD benefits. Ms. Neugebauer discussed next steps: to commit and work together on developing, implementing and supporting these requirements. She offered to be available for follow up questions.

The Council discussed opportunities to collaborate on existing work in the community to help address some of these requirements more effectively and efficiently. Ms. Gaffney suggested a mapping exercise to brainstorm and identify pieces that already exist in community, along with gaps. Mr. Provencher reported that Trillium and PacificSource have a work-stream item to collaborate on provider training requirements.

5. Quality Pool Workgroup

Mr. Hendargo reported that the workgroup was tasked with reviewing quality dollars and incentive distribution methods. He reviewed meeting notes included in the packet and reviewed the

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options considered by the workgroup. The workgroup recommends that the Council approve Option A in the notes: Any funding earned from the Quality Withhold Pool for meeting the Quality Incentive Measures be excluded from the risk-sharing agreements with providers [Item (iv) of Section 5.5 of the Joint Management Agreement].

It was moved and seconded to approve any funding earned from the State Quality Withhold Pool for meeting the Quality Incentive Measures be distributed to providers as described in the Quality Pool Workgroup recommendation. After discussion, the motion passed unanimously.

Mr. Hendargo reported that the Workgroup has offered to continue meeting and form a recommendation on the methodology details for the distribution. After discussion, the Council decided to table this topic until the Council establishes Guiding Principles on funding allocation/contracting and more is known regarding the global budget. Additionally, the Council will review the Workgroup composition and may add additional representation. *Ms. Blankenship offered to allocate time regularly on the agenda to discuss forming Guiding Principles.*

6. Updates

a. OHA Rate Timeline and Final Contracts

Ms. Hopper reported that PacificSource's in-house Actuarial Team is negotiating rates with the State and final adjustments are being made. The Quality Pool has been changed from 4.25% to 4.19%.

Ms. Hopper reported that PacificSource's Contracting Team has been working closely with OHA since July, and the final contract will be ready for review/approval on September 30, 2019. Additionally, OHA will share CCO member enrollment limits.

b. Readiness Review Part II

Ms. Hopper reported that in Phase I PacificSource passed operations in all four CCO regions. All materials for Phase II have been submitted. Ms. Hopper reported on OHA's schedule for member notification on enrollment options, via mailings and website links. Mr. Zimmerman reported that members in Lane County will be auto-enrolled with a CCO and then have an option to opt out and choose a different carrier.

c. Member Transition & Trillium/PS Collaboration

Ms. Hopper reported that PacificSource is extending Customer Service call center hours during the transition period and be initiating new member calls to provide plan benefit information. Mr. Provencher reported that there are eleven active work streams with Trillium and PacificSource to form plans for collaboration. He gave a summary of the workplan subjects including transition of care, data sharing, system of care, CHA/CHIP, provider credentialing and training, prioritized list, social determinates, traditional healthcare workers, mental health crisis services, non-emergency medical transportation, and Committees (CAC, CAP, RAC). Mr. Zimmerman offered to be a liaison with the State on any parameters for collaboration areas.

d. Public Presentations

Mr. Provencher reported that PacificSource convened two CCO public meetings in Lane County last week. The meetings went favorability and had good representation from providers and the behavioral health community. There was good discussion on how to minimize member and provider confusion with two CCOs in the area. PacificSource is considering scheduling a rural public meeting(s), possibly in Florence and/or Oakridge. *Ms.*

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Hopper reported that OHA is facilitating a transition of care workgroup, and offered to bring information from that meeting to the Council.

7. Committees and Workgroups

○ Recruitment Committee

Ms. Blankenship listed the members as follows: Mr. Solomon, Dr. Weiner, Ms. Rapp, Mr. Johnston, and Mr. DeValk. The Committee is currently discussing recruitment for the Clinical Advisory Panel. More information will be known once collaboration with Trillium is further explored.

○ Finance Committee Recommendations – Endorse

Ms. Blankenship presented the recommended Finance Committee members as follows: Mr. Boie, Ms. Nelson, Mr. Solomon, Mr. Warda, Mr. DeValk, Mr. Costa, Ms. Patterson, Mr. Hjelm, and the Lane CCO Director (TBD). She asked the Council to consider formal appointment of these members.

After discussion, it was moved and seconded to approve the list of members to serve on the Finance Committee as presented by Ms. Blankenship. The motion passed unanimously.

○ Clinical Advisory Panel (CAP) Recommendation - Discuss

Ms. Blankenship presented the recommended members for the CAP as follows: Dr. Scholten, Dr. Chance or Dr. Lahkani, Dr. Bradshaw or Dr. Braun, Dr. Versage, Mr. Johnston, Dr. Virgin, Dr. Little, Dr. Clemens, Dr. Tavakolian, and Ms. Martin. This structure will be finalized following the outcome of Trillium collaboration discussions and direction from OHA.

Dr. Allan reported that a third party has requested Dr. Dickerson be added. Ms. Gaffney suggested Dr. Kincade be added for Primary Care representation.

○ Staffing & Start-up Workgroup

Ms. Blankenship suggested that a workgroup be formed to address Health Council start-up issues such as, website, logo, initial staffing. She suggested a bi-weekly meeting through the end of the year. Dr. Allan offered to participate, and Ms. Blankenship offered to send an email to solicit further interest.

Mr. Provencher reported that PacificSource is hiring for a large number of positions and has started training processes. Staff will be transitioning to a larger building, 555 International Way, early next year.

8. Adjournment

The meeting was adjourned at 3:02 p.m.

Respectfully Submitted, Lisa Williams


Steve Allan, Secretary