

Council

- Larry Kogovsek, Vice
Chair, Community
Representative
- Jolene Greene
Consumer Representative
- Linda Johnson
Community
Representative
- Elaine Knobbs-Seasholtz
Mosaic Medical
- Brad Porterfield
Consumer Representative
Latino Community
Association
- Elizabeth Schmitt
Consumer Representative
- Ken Wilhelm
United Way
- Cris Woodard
Community
Representative

Ex-officio Members

- Michael Baker
Jefferson County Health
Department
- Tom Kuhn
Deschutes County
- Vicky Ryan
Crook County Health
Department



June 11, 2020

VIRTUAL

<https://bit.ly/2MdpjwV>

Conference Line: 1.669.900.6833

Meeting ID: 852.966.546#

- | | |
|---------------|--|
| 9:30 – 9:40 | Welcome— MaCayla Arsenault <ul style="list-style-type: none">• Public Comment• Approval of Meeting Minutes |
| 9:40 – 10:00 | CCO 2.0 Membership & Updates— MaCayla Arsenault <ul style="list-style-type: none">• Membership & Recruitment Update• CAC Applicant |
| 10:00 – 10:30 | Equity and Diversity Listening Session— Miguel Herrada |
| 10:30 – 10:45 | Transformation Quality Strategy— Lindsay Atagi |
| 10:45 – 11:25 | Community Benefit Initiative— MaCayla Arsenault & Gwen Jones <ul style="list-style-type: none">• Request for Proposals |
| 11:25 – 11:30 | OHA Update— Dustin Zimmerman |

Five Finger Voting:

- 0: No go! Serious concerns
- 1: Serious reservations and prefer to resolve concerns before supporting it
- 2: Some concerns, but will go along with it
- 3: Support the idea
- 4: Strong support, but will not champion it
- 5: Absolutely, best idea ever, willing to champion it

“The overarching purpose of the CAC is to ensure the COHC remains responsive to consumer and community health needs.”—COHC CAC Charter

The Central Oregon Health Council encourages persons with disabilities to participate in all programs and activities. This event/location is accessible to people with disabilities. If you need accommodations to make participation possible please call (541) 306-3523 or email macayla.arsenault@cohealthcouncil.org



June 1, 2020

We invite you to speak up about health care. Do you live in Central Oregon (Crook, Jefferson, Deschutes, and Northern Klamath County)? We are here to listen and take action and we invite you to join us.

We are the Central Oregon Health Council (COHC) Community Advisory Council (CAC). We want to hear about health care from Oregon Health Plan (OHP)/Medicaid members. We need your advice and recommendations about health needs in our area.

We invite you to join the CAC as a member. New members **must** be an OHP member or have dependents on OHP. Membership includes a \$45 stipend per meeting. Benefits of membership include:

- Voting on group decisions
- Getting a stipend for your time
- Getting a stipend for mileage and child care during in-person meetings
- Having your voice heard by the Oregon Health Plan

We meet once per month (except March and July). You can always call into a meeting with your phone or computer.

Our next meeting is on June 11, 2020, from 9:30AM-11:30AM. Our meetings are public. We invite you us join virtually this month by clicking on [this link](#). We hope you will apply to become a member.

[Here](#) is a link to find out more on the COHC Community Advisory Council. There you will also find the application.

For Non-English Speakers:

We encourage you to apply even if you do not speak English. We will have interpreter services and documents translated into your preferred language. We also welcome undocumented members who have dependents on OHP. We plan to have the application available in Spanish soon.

Please contact us if you have any questions.

MaCayla Arsenault

(541) 891-5854

macayla.arsenault@cohealthcouncil.org

PO Box 6689

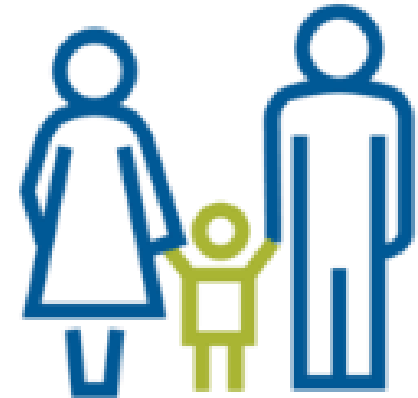
Bend, OR 97708



Transformation and Quality Strategy: 2020

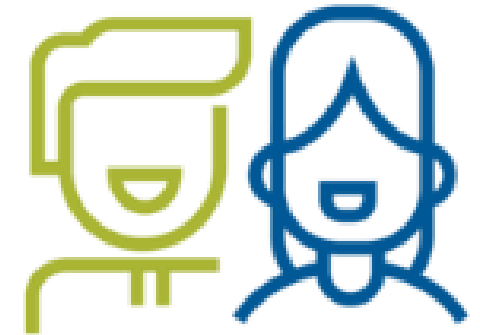
What is a Transformation and Quality Strategy (TQS)?

The TQS is a collection of projects that support safe, affordable, and high-quality care for all PacificSource CCO members.



Goal #1

The CAC and PacificSource partner to talk about what is important to YOU, and how the quality projects can help YOUR community.



Goal #2:

Create projects that meet all of the required 14 topics areas, including topics that matter most to you, like:

**Access:
Getting the
Care that
you need**



**Behavioral
Health
Integration**



**Social
Determinants
of Health**



**Health
Equity**





TQS Spotlight : Access: Getting the Care that you need

- ❑ PacificSource developed a Member Access Survey to help us understand what your experience is like getting the care you need.

How many days
did it take you to
get an
appointment?

Did the clinic's
office hours meet
your need?

Was an
interpreter
available for your
appointment?

Did your provider
spend enough
time with you?



TQS Spotlight: Behavioral Health Integration

- ❑ PacificSource is supporting Behavioral Health Clinicians (BHCs) in primary care offices, and helping with equitable access.

How will this
help me?



- ✓ In-office BHCs help you access care when you need it – often the same day and time as your medical appointment!
- ✓ BHCs can help with physical and behavioral health concerns
Examples include: anxiety, smoking cessation, and healthy eating for diabetes
- ✓ BHCs can help refer you to an outside behavioral health specialist if needed



TQS Spotlight : Social Determinants of Health

- ❑ Social determinants of health are the conditions in which people are born, grow, live, work, and age.
- ❑ PacificSource is working to screen members for social determinants of health needs, and help connect them with resources in their community.



Food



Transportation



Utilities



Housing



TQS Spotlight: Health Equity

- ❑ PacificSource is creating I Speak cards for provider offices, to help members get care in their own language.



- ✓ Members use the cards to let their providers know what language they speak
- ✓ I Speak cards help providers arrange interpreter services for their patients

Next Steps...

- ☐ Tell us how you might like to be involved in future TQS planning.
- ☐ Give us feedback on what TQS information you would like to see presented.
- ☐ Bring questions or suggestions to Kristen Tobias, PacificSource Community Health Coordinator at your CAC meetings.

Questions

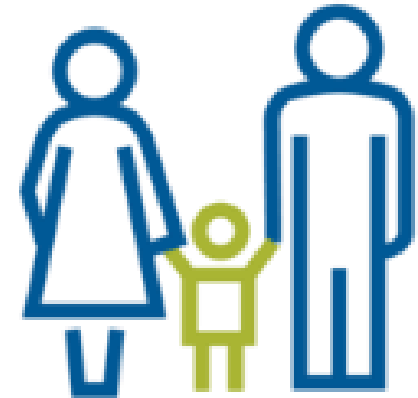




Estrategia de Transformación y Calidad: 2020

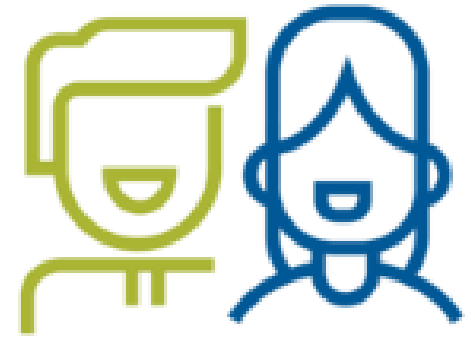
¿Qué es una Estrategia de Transformación y Calidad?

La estrategia de transformación y calidad es una serie de proyectos que nos ayudarán a proporcionar cuidados seguros, económicos y de alta calidad para todos los miembros de las Organizaciones de Atención Coordinada (CCO) de PacificSource.



Objetivo #1

El Consejo Asesor Comunitario (CAC) y PacificSource se han asociado para hablar sobre los temas que son importantes para USTED y cómo los proyectos de calidad pueden ayudar a SU comunidad.



Objetivo #2:

Crear proyectos que cumplan con las 14 áreas temáticas requeridas, incluyendo las temas que están más significativas a Usted, como:

Acceso:
Obteniendo la
cuidado que
necesita



**Integración de
la Salud del
Comporta-
miento**



**Determinantes
Sociales de la
Salud**



**Equidad
en la
Salud**





Enfoque en la Estrategia de Transformación y Calidad: Acceso: Obteniendo la cuidado que necesita

- ❑ PacificSource ha desarrollado una Encuesta de Acceso para Miembros que nos ayudará a entender cómo han sido sus experiencias al obtener los cuidados que usted necesita.

¿Cuántos días le llevó conseguir una cita?

¿Se ajustó a sus necesidades el horario de la clínica?

¿Había un intérprete disponible para su cita?

¿Dedicó el proveedor suficiente tiempo para atenderlo?



Enfoque en la Estrategia de Transformación y Calidad: Integración de la Salud del Comportamiento

- ❑ PacificSource está apoyando a los Especialistas Clínicos de la Salud del Comportamiento (BHC) disponibles en los consultorios de atención primaria y está ayudando con el acceso equitativo.

¿Cómo me ayuda esto?



- ✓ Los BHCs que trabajan en los consultorios pueden ayudarle a acceder a los cuidados cuando usted más lo necesita – ¡incluso el mismo día y en el mismo horario de su consulta médica!
- ✓ Los BHCs pueden ayudarle con cuestiones de salud física y del comportamiento.
Algunos ejemplos incluyen: ansiedad, alimentación saludable para la diabetes y cómo dejar de fumar
- ✓ Los BHCs pueden referirlo con un especialista externo de salud del comportamiento en caso de ser necesario



Enfoque en la Estrategia de Transformación y Calidad: Determinantes Sociales de la Salud

- ❑ Los determinantes sociales de la salud son las condiciones en las que cada persona nace, crece, vive, trabaja y envejece.
- ❑ PacificSource está trabajando para detectar las necesidades relacionadas con los determinantes sociales de la salud entre sus miembros y ayudarles a encontrar recursos en sus comunidades.



Alimentos



Vivienda



Transporte



Servicios
públicos



Enfoque en la Estrategia de Transformación y Calidad: Equidad en la Salud

- ❑ PacificSource está elaborando tarjetas I Speak para los consultorios de los proveedores, esto con el fin de que los miembros puedan recibir cuidados en su propio idioma.



- ✓ Los miembros utilizan las tarjetas para informar a sus proveedores cuál idioma hablan
- ✓ Las tarjetas “I Speak” ayudan a los proveedores a obtener los servicios de un intérprete para sus pacientes

Siguientes Pasos...

- ☐ Díganos cómo le gustaría participar en la planeación de la estrategia de transformación y calidad a futuro.
- ☐ Denos su opinión sobre qué información de la estrategia de transformación y calidad le gustaría que presentemos.
- ☐ Si tiene alguna duda o sugerencia, hable con Kristen Tobias, Coordinadora de Salud Comunitaria de PacificSource durante las reuniones del CAC.

¿Dudas?



Community Benefit Initiative

Request for Proposals Options



1

What is a Request for Proposal (RFP)?

- Invitation to apply
- Outlines all requirements
- Contains everything that applicants need to know
- Details expectations that go both ways
 - What applicants can expect from us
 - What we will expect from them



2

What do applicants need to know?

- Eligibility
 - Who can apply
- Purpose
 - What outcome we are looking for
- Funding
 - What funds are available
- Due Date
 - When the application is due



3

Elements of the RFP: Purpose

- What we know:
 - Focus on Social Determinants of Health – Health Equity
- Ineligible project types:
 - Housing: construction / brick and mortar, rent, utilities
 - Medicaid covered services or benefits
 - Projects benefiting an single individual
 - Health related services that can be billed



4

Elements of the RFP: Purpose

Project Types (can be combined)

- **Geographic** (rural, specific town or county, neighborhoods, etc.)
- **Population** (older adults, LGBTQ, differently-abled, etc.)
- **Topic** (Economic Stability, Neighborhood & Built Environment, Education, Health or Health Care, Social and Community Context etc.)



5

Elements of the RFP: Funding

- **Funding Award Options**
 - **Single award** (one large project)
 - **Limited awards** (set number of equal awards)
 - **Award Range** (awards of various sizes to an undetermined number of applicants)



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Single award (one large project)

- Most potential to be a multi-year project
- May increase decision difficulty if there are many applicants
- No risk diversification
- Less potential to affect multiple communities
- Due date is the same for all applicants

Award Amount

\$250,000



7

Limited identical awards

- Some potential to have multi-year projects
- Able to accept more applicants
- Diversified risk
- Due date is the same for all applicants

Number of Projects	Amount Per Award
2	\$125,000
3	\$83,000
4	\$62,500
5	\$50,000
6	\$41,666



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Award Range

- Some potential to have multi-year projects
- Flexible number of applicants
- Diversified risk
- Award request total unequal to funds

Number of Projects	Amount Per Award
?	?



9

Conversation Time

- Project Elements:
 - Topic Focus
 - Geographic Focus
 - Population Focus
 - Award Type
- Additional Considerations



10

WHAT IS Social Determinants of Health and Equity (SDHO-E)?

- SDOH- The complex circumstances in which individuals are born and live that impact their health. They include intangible factors such as political, socioeconomic, and cultural constructs, as well as place-based conditions including accessible healthcare and education systems, safe environmental conditions, well-designed neighborhoods, and availability of healthful food. ~NEJM
- Equity- Everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences. ~RWJ



11

Economic Stability

- Examples:
 - Employment
 - Food Insecurity
 - Housing Instability
 - Poverty



12

Education

- Examples:
 - Early Childhood Education and Development
 - Enrollment in Higher Education
 - High School Graduation
 - Language and Literacy



13

Social and Community Context

- Examples:
 - Civic participation
 - Discrimination
 - Incarceration
 - Social Cohesion



14

Health and Health Care

- Examples:
 - Access to Health Care
 - Access to Primary Care
 - Health Literacy



15

Neighborhood and Built Environment

- Examples:
 - Access to Foods that Support Healthy Eating Patterns
 - Crime and Violence
 - Environmental Conditional
 - Access to Green Spaces
 - Quality of Housing



16



COHC Community Advisory Council

Held virtually via Zoom

May 14, 2020

Present:

Larry Kogosvek, Vice Chair, Consumer Representative
Jolene Greene, Consumer Representative
Linda Johnson, Community Representative
Elaine Knobbs-Seasholtz, Mosaic Medical
Tom Kuhn, Deschutes County Health Services (Ex-Officio)
Brad Porterfield, Consumer Representative
Elizabeth Schmitt, Consumer Representative
Ken Wilhelm, United Way of Deschutes County
Cris Woodard, Consumer Representative

Absent:

Linda McCoy, Chair, Consumer Representative
Michael Baker, Jefferson County Health (Ex-Officio)
Vicky Ryan, Crook County Health Department (Ex-Officio)

Others Present:

MaCayla Arsenault, Central Oregon Health Council
Mindy Bentley, Advantage Dental by Dentaquest
Gwen Jones, Central Oregon Health Council
Donna Mills, Central Oregon Health Council
Tanya Nason, PacificSource
Kristen Tobias, PacificSource
Kelsey Seymour, Central Oregon Health Council
Maria Waters, Oregon Health Authority
Renee Wirth, Central Oregon Health Council
Dustin Zimmerman, Oregon Health Authority

Introductions

- Introductions were made and MaCayla Arsenault welcomed all attendees. She announced Linda McCoy would be unable to participate today, and noted she would be leading the meeting in Linda's stead.

Public Comment

- Ken Wilhelm announced that United Way has posted a notice for a TRACEs movement director.

Approval of the Minutes

- MaCayla apologized that the minutes were not sent out in advance of the meeting. She agreed to get these approved via email at a later date.
 - **ACTION**: MaCayla will send the CAC minutes for approval via email.

Action Item Follow Up

- MaCayla shared that last month's action items were completed with the exception of the ECHO project data, which has been requested but will not be available for a few months.

CCO Update: COVID-19 Impact on Members

- Kristen Tobias introduced herself as the new Community Health Coordinator at PacificSource. She noted that telehealth claims are high, especially for behavioral health. She clarified that regular phone calls without video are billable services.
- Kristen shared that OHA notified PacificSource that Northern Klamath County membership is above capacity. She explained that PacificSource has applied for an expanded membership in that region in order to allow another 250 members from that area onto the plan.
- Kristen noted that the region has observed a significant decrease in annual wellness visits, adding that those visits are especially important for children who need routine vaccines.
- Kristen shared that Logisticare is the new NEMT provider in the area and they began offering rides April 1st. She asked if CAC members had feedback about the ride program since the change in providers. Jolene Greene shared that a member had rescheduled their appointment multiple times when Logisticare was unable to confirm their membership. Kristen agreed to look into that.
 - **ACTION**: Kristen will follow up with Jolene offline regarding NEMT.
- Elaine Knobbs-Seasholtz shared that Mosaic Medical's Community Health Workers (CHWs) have filed two formal complaints in the last month, most notably that Logisticare is less accessible for same day appointments than CERC was.
- Tanya Nason asked if any members have had a telehealth appointment and what their experience was like. Cris Woodard shared she has had two telehealth appointments and one in person, and preferred telehealth. Elizabeth Schmitt shared that she had one telehealth appointment where the doctor was having internet connection problems, but besides that she liked how it worked.
- Brad Porterfield asked if Spanish-speakers are utilizing telehealth. Tanya agreed to find out.

- **ACTION:** Tanya will ask for native language data for telehealth appointments and share her findings with the Council.

Community Benefit Initiative

- MaCayla reminded the CAC that Community Benefit Initiative (CBI) dollars are available to them, but because of the delay in the Structured Problem Solving process due to the pandemic, she and Gwen Jones recommend using a Request for Proposal (RFP) process this year only. She recommended the CAC write a letter asking for proposals and set a time frame during which they plan to accept applications. The group agreed this was a wise and expedient choice under the circumstances.
- MaCayla offered to draft a few options for how the CAC will accept and fund proposals.
 - **ACTION:** MaCayla will provide 2-3 options for how the CAC could structure their RFP.
- MaCayla asked for a motion to approve pursuing an RFP process for 2020 only. Ken motioned Linda Johnson seconded. All were in favor.

CAC Call Wait Time Letter

- MaCayla read the draft of the call wait time letter. Elaine noted the call center is jointly managed by OHA and DHS. Maria Waters noted that call wait times have dropped so much that representatives are answering the phone within 30 seconds. She added that new member applications are being submitted but at an inconsistent rate. She clarified that DHS manages enrollment while OHA manages members.
- Dustin Zimmerman explained that membership affects from COVID-19 are not yet realized because many unemployed or furloughed individuals are still temporarily covered by their company insurance.
- Elaine noted that state agencies are expecting large budget cuts over the coming year due to COVID-19. Linda Johnson suggested taking a supportive tone in the letter to show OHA and DHS the CAC wants to support them in the upcoming negotiations.
- MaCayla asked what else should be modified about the letter. Elaine suggested mentioning the use of cell phone minutes and the emotional trauma of not being able to reach a representative.
- MaCayla offered to send a new draft to the Council. Ken Wilhelm suggested that MaCayla send the new draft with the CAC's edits directly to DHA and OHA. The CAC agreed.
 - **ACTION:** MaCayla will send the letter with the CAC's edits to OHA and DHS.

OHA Update

- Dustin shared resources related to COVID-19. Donna Mills asked if the infection rate by ethnicity report would be renewed. Dustin explained that the report may be renewed, however, they want to avoid creating the appearance that ethnicities are more or less prone to the disease when there is no science to reference on the subject.

OHP Coverage & COVID-19

- Maria shared that a decreased number of OHP applications are coming in, but she is prepared to see an increase after temporary health insurance coverage begins to expire for individuals who are no longer able to work. She noted that OHP is accepting self-reported address and income level, which has reduced barriers for new applicants.
- Maria explained that OHP Enrollment Assistants are encountering individuals who are eligible for OHP but refuse to apply due to the stigma associated with Medicaid. She added that bilingual assistance is available for enrollment.
- Maria shared that the One System will be launched in July and act as a single access point for many state assistance programs.
- Donna clarified that promoting enrollment through marketing may not be an acceptable use of CBI dollars, and asked Dustin to find out if it would be allowed.
 - **ACTION:** Dustin will find out if marketing for CCO enrollment is permitted with CBI dollars.

CORD Update

- Donna explained that the Central Oregon Resource Directory (CORD) is in partnership with Joint Incident Command for our region. She shared the site is available in Spanish and English with the help of a couple local translators.