

## Council

- Brad Porterfield, Chair,  
Consumer Representative  
Latino Community  
Association
- Larry Kogovsek, Vice  
Chair, Community  
Representative
- Mayra Benitez  
Consumer Representative
- Natalie Chavez  
Jefferson County Health  
Department
- Jolene Greene  
Consumer Representative
- Linda Johnson  
Community  
Representative
- Elaine Knobbs-Seasholtz  
Mosaic Medical
- Lauren Kustudick  
Consumer Representative
- Tom Kuhn  
Deschutes County
- Jennifer Little  
Klamath County
- Tre Madden  
Consumer Representative
- Theresa Olander  
Consumer Representative
- Elizabeth Schmitt  
Consumer Representative
- Ken Wilhelm  
United Way
- Cris Woodard  
Community  
Representative
- Regina Sanchez  
Crook County Health  
Department



January 21, 2020

**VIRTUAL**

*Video Conference Link In Calendar Invite*

**Conference Line: 1.669.900.6833**

**Meeting ID: 861.0355.0703#**

**Passcode: 492445#**

- 12:00 – 12:20    **Welcome—Brad Porterfield**
- Public Comment
  - Approval of Meeting Minutes
  - Announcements
- 12:20 – 12:35    **Health Equity Plan Follow Up—Miguel Herrada**
- 12:35 – 12:55    **CAC Chairperson Roles and Responsibilities—Gwen Jones & MaCayla Arsenault**
- 12:55 – 1:15    **CAC Demographics Follow Up—Gwen Jones**
- 1:15 – 1:30    **Mail Order Prescription—Kristen Tobias**

### **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](mailto:macayla.arsenault@cohealthcouncil.org)

**Draft 1. \*\*Note - Please review for content only.**

Central Oregon Health Council  
Community Advisory Council  
Chairperson Roles and Responsibilities

**Description:**

With the support of COHC staff, the Chairs of the Community Advisory Council will:

- Facilitate the identification, discussion, and ranking of issues of concern to members.
- Serve on the Board of Directors as full members.
- Inform the Board of Directors on Council recommendations related to....?
- Coordinate the meetings of the CAC to meet the minimum requirements of the most current CCO contract.
- Facilitate and chair any electronic communications and discussions.

**Term: (needs to be aligned with CCO requirements)**

... # of years

Nominated and elected by ....

?Prior to serving as chair this person must have served on the CAC for at least 1 year

Two seats

Must be a member of PSCS OHP or a guardian of dependent on PSCP OHP

**Desired Personal and Professional Characteristics:**

- Ability to listen, analyze, think strategically and creatively, and work well with people individually and in a group.
- Ability to consider multiple viewpoints about controversial issues and to communicate the Community Advisory Council's perspective effectively with members and stakeholders.
- Ability to prepare for, attend, and participate in board and committee meetings (including conference calls), ask questions, take responsibility, follow through on given assignments, and evaluate oneself.
- Willingness to develop certain skills if one does not possess them.
- Honesty; sensitivity to and tolerance of differing views; a friendly, responsive, and patient approach; community-building skills' personal integrity; a developed sense of values; and concern for the Association's development.
- Ability to facilitate discussions face-to-face and through electronic means among diverse partners.

**Primary Responsibilities:**

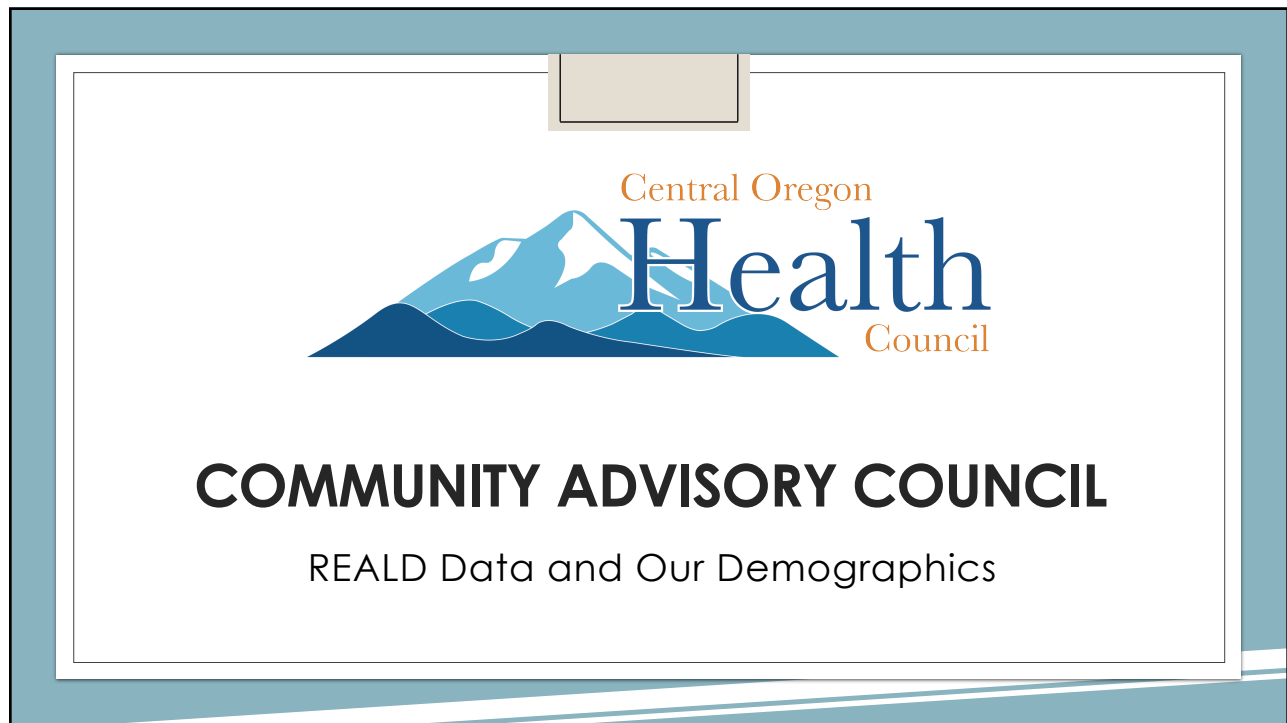
- Attend and participate in all meetings of the Board of Directors.
- Attend and participate in all meetings of the Community Advisory Council.
- Be informed about the CCO and COHC's mission, vision, policies....?
- Assist the Board of Directors in carrying out its fiduciary responsibilities.
- Review agenda and supporting materials prior to CAC meetings.
- Prepare and present information at meetings on behalf of the CAC as needed.
- Serve as the Board of Directors liaison to the Community Advisory Council and prepare and present information at meetings of the Community Advisory Council on behalf of the Board of Directors.
- Serve as the Community Advisory Council liaison to the Board of Directors and prepare and present information at meetings of the Board of Directors on behalf of the Community Advisory Council.
- Support the coordination of the yearly joint meeting between CAC and the Board of Directors.
- Initiate and facilitate communications among the members of the Community Advisory Council throughout the term of office.
- Work with CAC and staff to identify new members of the CAC.

**Time Commitment:**

?

**Resources and Support:**

- Stipend and internet or mileage reimbursement is offered for meetings.
- COHC staff support for work related to CAC
- Opportunity to participate in yearly Oregon CCO conference
- CCO/CAC Chair website...here



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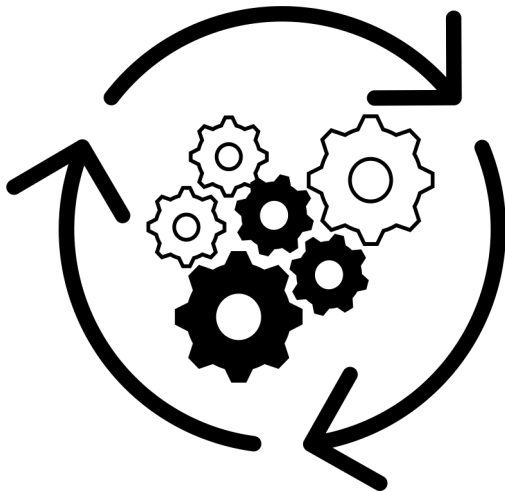
Purpose

- Definitions
- What is REALD data?
- Why is it important?
- How did REALD come into being?
- What are our CCO 2.0 Reporting Commitments?
- Who are we?
- How we compare to the Region?
- What does this mean for us?

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# Definitions

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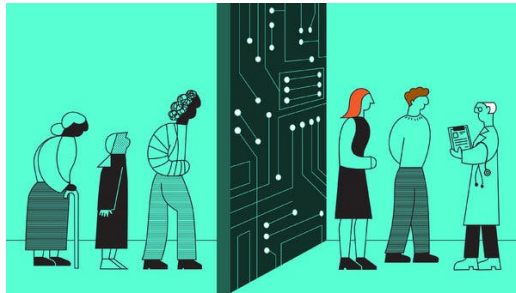
## System

An organized collection of parts that work together to reach a goal

- institutions, structures, norms, culture, government, education, health care

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## Health Inequity

Systematic differences in the health status of different population groups.

These inequities have significant social and economic costs both to individuals and societies.

(World Health Organization)

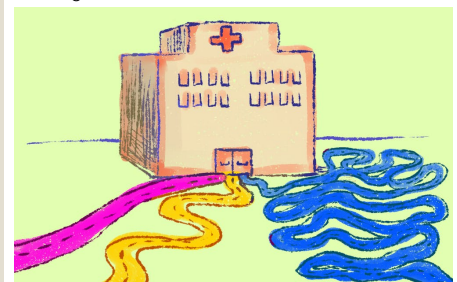
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## Health Disparity

A particular type of difference in health that is caused by social, economic, and/or environmental obstacles.

Obstacles are linked to systematic discrimination.

race and ethnicity  
religion  
socioeconomic status  
cognitive, sensory, or physical disability  
age



mental health  
gender  
sexual orientation or gender identity  
geographic location

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# What is REALD?

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A set of standardized data and questions.

**Race  
Ethnicity  
Language  
and  
Disability**

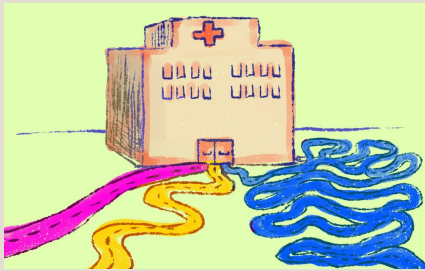
Must be collected by Oregon Health Authority, the Department of Human Services and organizations that work with them.



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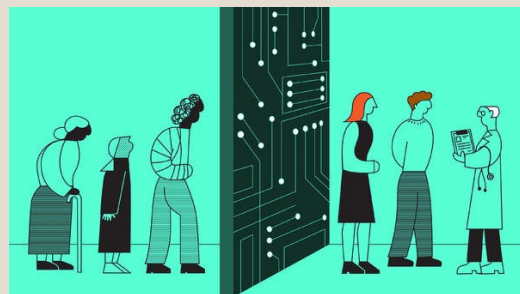
# Why is REALD Important?

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Our historic and current systems cause avoidable health inequities in the lives of certain groups of people.

Our systems cause harm to people by discrimination against people's race, ethnicity, language, ability, gender identity, sexual orientation.



These facts are clearly documented: <https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le7721a.pdf>

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## How does REALD help reverse health and social inequities?

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Identify and change structural social and health barriers imposed on people.



Better understand ALL the people we work with and serve.




Guide how we create services to meet the cultural and accessibility needs of the people we serve.



Guide how we invest our funds to address health inequities.

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Central Oregon  
**Health**  
Council

The Community Advisory Council should reflect the experience of the people living in Central Oregon.

Meet federal and state reporting commitments.

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# How did REALD come to be?

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## Before 2012...

A version of REALD existed.

Information was not as detailed.

Every organization collected it differently.

Information was impossible to compare.



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## Starting in 2012...

Community organizations led the work to collect more detailed data

- Asian Pacific American Network of Oregon (APANO)
- Oregon Health Equity Alliance (OHEA)



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In 2013...

The current REALD standards  
were developed in partnerships  
with:

- Communities
- Researchers
- Based on local, state and national best practices

House Bill (HB) 2134

Oregon Administrative Rules (OARs)  
943-070-0000 through 943-070-0070



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What are the CAC's  
reporting commitments?

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Central Oregon  
**Health**  
Council


## Summer 2021


- REALD
- OHP membership
- Community partnerships
- Tribal partnerships
- Regional demographics
- Other

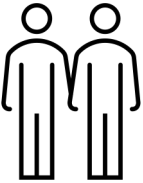
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# Who are we?

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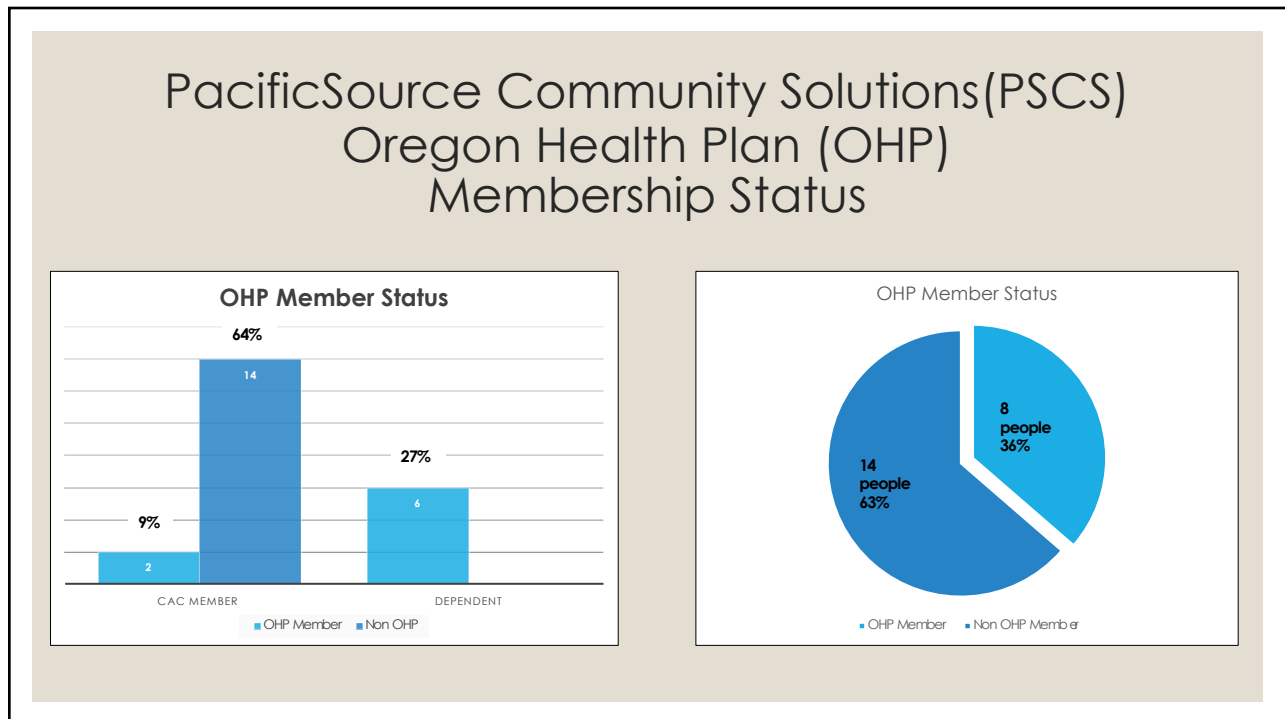






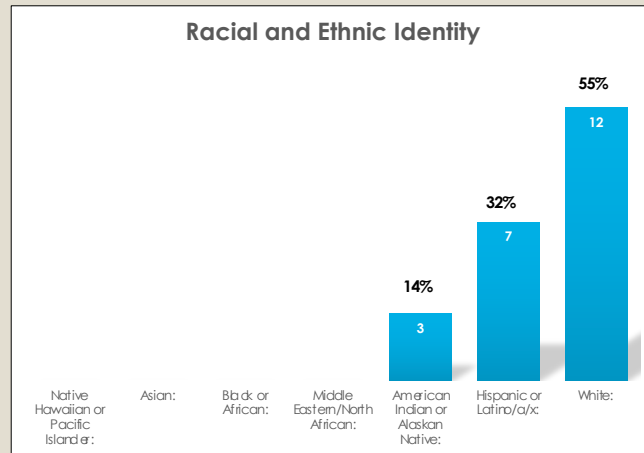
- CAC members and their eligible dependents
- Self-reported

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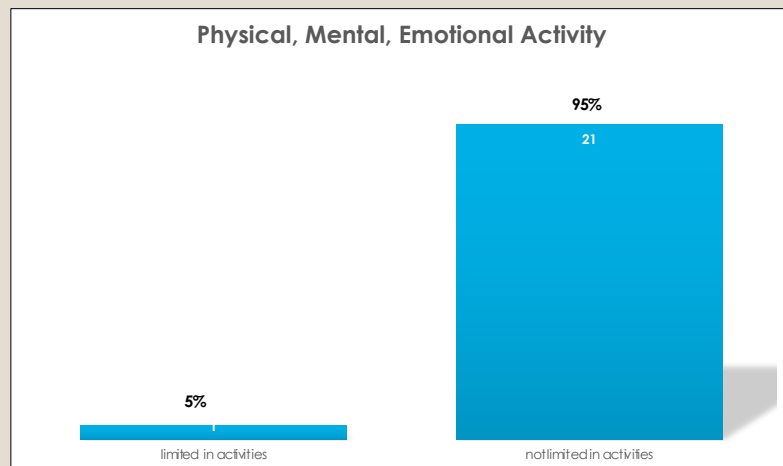
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## Racial and Ethnic Identity

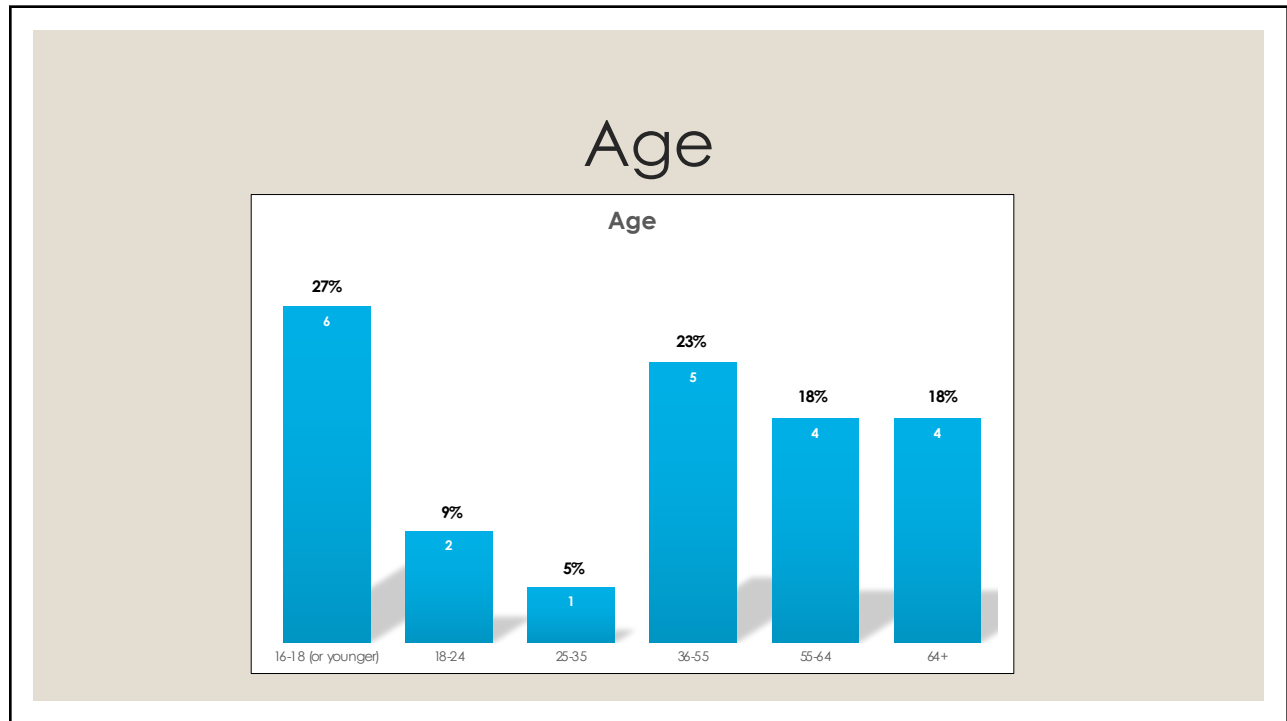


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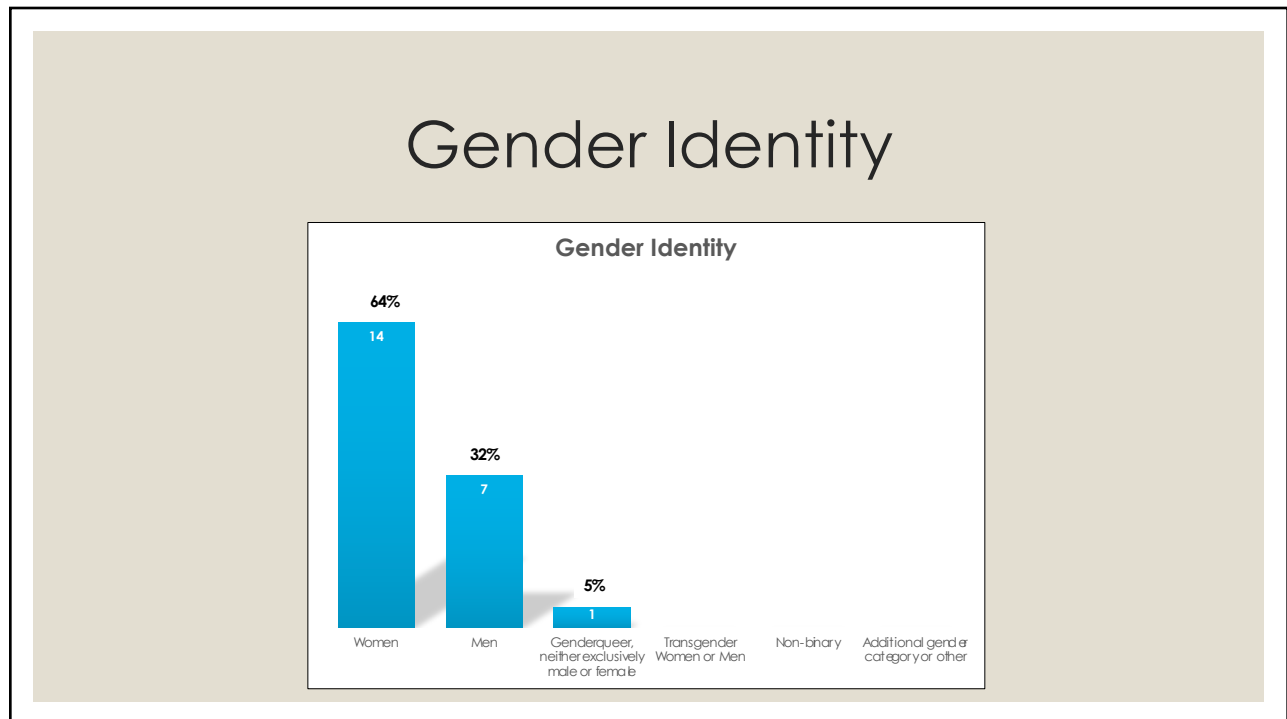
## Activity



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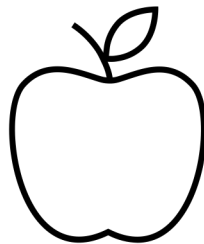
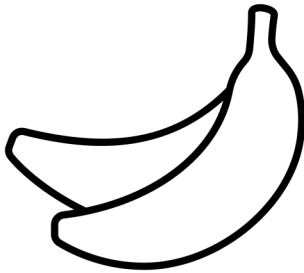


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How do we compare to  
the region?

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Central Oregon  
Health Data Website

<http://www.centraloregonhealthdata.org/>

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Race:

<http://www.centraaloregonhealthdata.org/demographicdata?id=285505&sectionId=940>

Ethnicity:

<http://www.centraaloregonhealthdata.org/demographicdata?id=285505&sectionId=941>

Disability:

<http://www.centraaloregonhealthdata.org/indicators/index/view?indicatorId=82&localeTypeId=2> (Adults)

<http://www.centraaloregonhealthdata.org/indicators/index/view?indicatorId=1052&localeTypeId=2> (Children)

Age:

<http://www.centraaloregonhealthdata.org/demographicdata?id=285505&sectionId=942>

Sex:

<http://www.centraaloregonhealthdata.org/demographicdata?id=285505&sectionId=943>

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What does this mean for us?

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## Mail Order Prescriptions: Getting Your Input

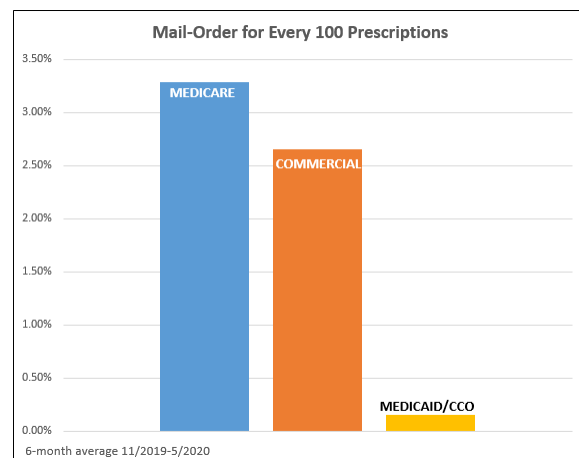


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### Goal of this conversation:

Our OHP members use Mail Order Pharmacy benefits much less than members on our other health plans.

We want to learn why so we can help our OHP members access this benefits.



2

## Summary of Mail Order Prescription (Rx)

- CVS Caremark will ship prescriptions for free to OHP member's home or P.O. box
- 60-day supplies are available for some medications
- Prescriptions can be refilled by phone, through the app or through the CVS Caremark website.



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## Where you can currently find information:

MEMBERS ▾
PROVIDERS ▾
COMMUNITY ▾
SEARCH TOOLS ▾

Home / Search / Medicaid Pharmacy Network Search

### Printable Pharmacy Lists

Print Pharmacy Directory

**QUICK LINKS** >

- Enroll Today!
- Drug Search
- Provider Directory
- Find a Pharmacy
- Find a Dentist
- List of Changes to Covered Drugs

### Mail-Order – Fast and Easy!

Did you know you could have your medications delivered to your home with free shipping? Instead of driving to the pharmacy and standing in line, consider having your prescriptions delivered right to your door at no additional cost.

The order will usually get to you in 10-14 calendar days after you submit it. If your drug does not arrive in time, please contact Caremark at the numbers below.

To have your prescriptions filled at our Preferred mail-order pharmacy, please use the [mail-order form](#), [register online](#), or call.

**CVS Caremark Mail-Order Services**  
Register online at: [www.CareMark.com](http://www.CareMark.com)  
Toll-Free: 866-865-0696  
TTY/TDD: 711

Getting Started With CVS Mail-Order

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## DISCUSSION:

- Were you aware that this is a service available?
- Is Mail Order Rx a service that interests you? If not, why?
- Are there other reasons why our members might not use this service?
- What would be the most helpful to increase use of Mail Order Rx?
- Where would be most useful to find information about these types of benefits?

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**Thank You!**

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**COHC Community Advisory Council**

**Held virtually via Zoom**

**December 17, 2020**

**Present:**

Brad Porterfield, Chair, Consumer Representative  
Larry Kogosvek, Vice Chair, Consumer Representative  
Mayra Benitez, Consumer Representative  
Natalie Chavez, Jefferson County Health  
Linda Johnson, Community Representative  
Elaine Knobbs-Seasholtz, Mosaic Medical  
Lauren Kustudick, Consumer Representative  
Theresa Olander, Consumer Representative  
Vicky Ryan, Crook County Health Department  
Elizabeth Schmitt, Consumer Representative  
Mandee Seeley, Consumer Representative  
Ken Wilhelm, United Way of Central Oregon

**Absent:**

Jolene Greene, Consumer Representative  
Tom Kuhn, Deschutes County Health Services  
Jennifer Little, Klamath County Public Health  
Cris Woodard, Consumer Representative

**Others Present:**

MaCayla Arsenault, Central Oregon Health Council  
Rebeckah Berry, Central Oregon Health Council  
Tania Curiel, Oregon Health Authority  
Miguel Herrada, PacificSource  
Gwen Jones, Central Oregon Health Council  
Donna Mills, Central Oregon Health Council  
Leslie Neugebauer, PacificSource  
Kristen Tobias, PacificSource  
Maria Waters, Oregon Health Authority  
Renee Wirth, Central Oregon Health Council

## **Introductions**

- Introductions were made and Brad Porterfield welcomed all attendees.

## **Public Comment**

- Maria Waters announced her position at OHA is changing, and Tania Curiel will be stepping into her role.
- Elizabeth Schmitt shared that she has a prospective member interested in joining the CAC.

## **Approval of the Minutes**

- Linda Johnson motioned to approve the minutes; Larry Kogosvek seconded. All were in favor, the motion passed unanimously.

## **Announcements**

- Brad Porterfield shared that Tre Madden, a member of CAC, was in a serious car accident and will be moving back in with family.
- Brad welcomed Mande Seeley back to the CAC, as her plans to move out of state have changed.
- MaCayla Arsenault announced that a set of presentation guidelines will be provided to guest speakers and noted she will be sending them out to the CAC for their review.
  - **ACTION:** MaCayla will share the CAC Presenter Guidelines with members.

## **Community Benefit Initiative Review**

- MaCayla reviewed the process the CAC used to award grants earlier this year and asked for feedback to inform next year's process.
- The group noted they liked dividing up the initial applications because it lightened the workload, and that all the decision-making was left to the members. The group noted the workload was quite large and applications took a long time to read, and that a second round of review of all proposals might be warranted next time. The group shared they appreciated the numerical objectivity of scoring, and requested applicants answer a question about sustainability next time.

## **Health Equity Plan**

- Miguel Herrada reviewed the health equity plan, noting it will be for five years, and that the CAC will receive annual updates on it. He noted the plan includes efforts to open up access-related complaints, diversity of healthcare workers, helping members best understand their benefits, and more.

## **Dental Access**

- Kristen shared that rural dental access is a challenge in every region where PacificSource supports Medicaid. Lauren Kustudick shared she is assigned to a dental care organization (DCO) that does not have an office in La Pine. Kristen explained that members can call PacificSource customer service and ask to switch to a different DCO.

She also noted that Non-Emergent Medical Transport (NEMT) is available to all members.

#### **CAC Demographic Data**

- Gwen Jones opted to move this agenda item to January's meeting.
  - **ACTION:** Gwen will include the CAC Demographics on the next month's agenda.

#### **CAC Breakout Sessions**

- Gwen and MaCayla invited members and staff of the COHC to join small groups and socialize to celebrate at the end of the year.

#### **Closing**

- Donna Mills thanked the CAC for their efforts this past year.