

### Council Members

- Christie Rudder  
Consumer Representative,  
Chair
- Aimé Maxwell  
Consumer Representative,  
Vice-Chair
- Lucia Orozco  
Consumer Representative
- Brad Porterfield  
Consumer Representative
- Jason Williams  
Consumer Representative
- Shelby Fisher  
Crook County Public Health
- Jessica Jacks  
Deschutes County Health  
Services
- Theresa Nguyen  
Jefferson County Public Health
- Linda Johnson  
Community Representative



## COMMUNITY ADVISORY COUNCIL

March 19, 2026

ZOOM MEETING

Conference Line: 1.669.900.6833

Meeting ID: 885 4464 4531#

Passcode: 284252#

- 12:00-12:20** Welcome – **Christie Rudder**
- Introductions
  - Land Acknowledgment Statement
  - Meeting Practices
  - Public Comment / Patient Story
  - Announcements & Updates
  - Approval of Meeting Notes for February 19, 2026
- 12:20 – 12:30** Small Group Breakout Session
- 12:30 – 12:45** CAC Outreach & Recruitment – **Camille Smith & Kelley Adams**
- 12:45 – 1:30** Tribal Engagement – Foundational Learning – **Lupe Sims,**  
**Tribal Liaison, PacificSource**

*“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.

## Land Acknowledgement Statement

We respectfully acknowledge the Tribal sovereignty and the original homelands of the Confederated Tribes of Warm Springs, Klamath Tribes, and Cow Creek Band of Umpqua Tribes of Indians.

In this recognition we also acknowledge the remaining Federally and non-Federally Recognized Tribes and all Tribal citizens across Oregon whose contributions and sacrifices have abundantly and continually shaped the places where we live, work, play, and gather in community. We honor their enduring relationship with these lands and waters, their traditional ecological knowledge, ways of knowing, and cultural practices since time immemorial that continue to enrich our shared existence.

We commit to further honor and uphold Tribal sovereignty recognizing the unending impacts of colonization and forced assimilation upon all Tribal peoples. We affirm that our relationships and professional work beside Tribal nations and citizens will be guided by reciprocity and cultural responsiveness, which uplifts the self-determination of all Indigenous peoples and affirms the values of equitable wellness.



## **Community Advisory Council (CAC) Meeting Changes: What to Expect**

We want the CAC to be a warm and welcoming place for all. We want to ensure all CAC members feel comfortable to fully participate and contribute. To do this we are making some adjustments to how our CAC meetings are run. These changes are:

- Making the meetings less institutional and formal to create a warmer and more welcoming atmosphere. Examples are using more plain language, having more conversations and less presentations, and simpler voting instead of motioning.
- Renaming each attendee in Zoom with their role; either a CAC Member, Support Staff, or Guest. This will help easily identify who's who in the virtual space especially for guests and those members who are new.
- Asking all supporting staff from COHC, PacificSource, and the OHA to share why they are attending and what their role is in supporting the Community Advisory Council.
- Inviting all CAC members in attendance to share input during discussions and before decisions are made. We want to prioritizing Consumer Representatives and make sure all voices are heard. Guests in attendance are invited to contribute to the conversation when requested by the CAC Chair or Vice Chair.
- Building relationships between CAC members. We will be setting aside time at each meeting for CAC members to go into a virtual break out room, answer icebreaker questions or chat about anything they'd like.



**COHC Community Advisory Council  
Held In-Person and Virtually via Zoom  
February 19, 2026**

**CAC Members Present:**

Christie Rudder, Chair, Consumer Representative  
Aimé Maxwell, Vice-Chair – Consumer Representative  
Lucia Orozco, Consumer Representative  
Brad Porterfield, Consumer Representative  
Jessica Jacks – Deschutes County Health Services  
Shelby Fisher, Crook County Health Department  
Linda Johnson, Community Representative

**CAC Members Absent:**

Theresa Nguyen – Jefferson County Public Health

**COHC Staff Present:**

Kelley Adams, Central Oregon Health Council  
Camille Smith, Central Oregon Health Council

**Support & Guests Present:**

Kristen Tobias, PacificSource  
Lupe Sims, PacificSource, Tribal Liaison  
Mariah Miller, Oregon Health Authority

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**Introductions**

- Kelley Adams welcomed all attendees.

**Land Acknowledgement**

- Jessica Jacks read the Land Acknowledgement Statement (see the meeting packet for statement).
- Approval of the updated Land Acknowledgement is still pending from COHC leadership.

**Meeting Practices**

- Christie Rudder reviewed the Meeting Practices and how the CAC meetings are meant to be welcoming for all (see the meeting packet).

### **Public Comment/Patient Story**

- Christie welcomed public comment.
- CAC members shared ongoing concerns and frustrations regarding access to accurate and timely diagnoses within the local healthcare system. Several key challenges were identified:
  - Local providers are often unable to make definitive diagnoses, resulting in referrals to specialists. Then, even after specialist referrals, patients frequently continue to lack clear answers or effective treatment plans.
  - Many patients are required to seek care outside the region to obtain accurate diagnoses, creating additional burdens, like increased expenses, including travel costs and lost wages due to time off work.
  - Concerns were raised about providers ordering unnecessary or more invasive tests when less invasive diagnostic options may have been available.
- Christie raised concerns about possible recent changes to Oregon Health Plan (OHP) benefits specifically that physical therapy and counseling visits may now be limited to 10 visits per year. It was shared that reimbursement rates may have decreased for certain services, including chiropractic care, potentially impacting provider participation. Additional concerns were noted regarding specialists declining to provide services due to billing limitations, particularly related to Medicare.
  - Kristen Tobias with PacificSource stated she has not heard of any formal changes to these specific benefits but will follow up and inquire further.
  - Mariah Miller, OHA Innovator Agent, shared that she will elevate the concern to OHA leadership. She noted that visit limits can be situation-dependent and encouraged follow-up on individual cases. She also reported that the legislature is currently working on Medicaid-related cost containment and sustainability efforts, as well as broader healthcare system reforms aimed at improving accessibility and long-term sustainability. Mariah committed to sharing any updates from legislative discussions as they become available.

### **Announcements & Updates**

- Kelley Adams announced that the CAC application from Jason Williams was approved by the CAC members and Board of Directors' members. Congratulations to Jason as our new CAC member!

### **Approval of Last Month's Meeting Notes**

- Christie Rudder asked the CAC members in attendance to vote on approving the notes from January 2026.
- There were no objections to the meeting notes, so they are approved.

### **Oregon Health Authority Innovator Agent Updates**

- Mariah Miller, OHA Innovator Agent, provided updates to share with the CAC.
  - February recognized as Heart Month. Reminder to prioritize cardiovascular health through exercise and preventive care.

- OHA has declared a measles outbreak, defined as three or more related cases. Currently five confirmed cases in Oregon. Vaccination emphasized as the most effective prevention method.
  - Jefferson and Crook Counties: No data reported.
  - Deschutes County: Non-detectable levels.
  - Klamath County: No data.
- Reminder about radon exposure risk (radon has been linked to lung cancer), particularly during winter months. There are free or low-cost home testing kits available in some areas. For more information visit [www.healthoregon.org/radon](http://www.healthoregon.org/radon)
- OHA is conducting a federally required survey on Medicaid members' healthcare experiences. The survey is administered by the Center for the Study of Services (not directly by OHA). Approximately 50,000 OHP members statewide will be randomly selected. Survey period runs February 3 through early May. CAC members encouraged to reassure community members that the survey is legitimate. PacificSource and OHA customer service have been provided talking points to confirm validity.
- OHA and Oregon Department of Human Services are continuing the "Forward Together" webinar series in 2026. Webinars provide updates on federal changes affecting healthcare and social services. This is available in Spanish and ASL; additional languages available upon request. Slides will be distributed after the sessions. To register, click [HERE](#).
- Rural Health Transformation Program - Established under federal H.R. 1 (House Reconciliation 1), enacted on July 4. It is a five-year program supporting rural healthcare systems. Oregon was awarded \$197.3 million for 2026. Most of Central Oregon qualifies as except for Bend. This is an opportunity for local community organizations to apply or serve as conveners. Program details and newsletter sign-up available on OHA website. Grant applications will open in the Spring. Then application decisions will be communicated in the Summer. For more information, visit <https://www.oregon.gov/oha/hpa/hp/pages/rural-health-transformation.aspx>
- OHP Coverage and Renewal Guidance - Due to federal Medicaid changes and evolving requirements, maintaining coverage is a priority. OHA recommends that OHP members respond promptly to renewal letters and to keep contact information updated with OHA.

### **CAC Outreach & Recruitment**

- Kelley Adams and Camille Smith presented a revised, more condensed version of the CAC recruitment flyer. The previous version was considered overly wordy and less engaging. Feedback from CAC members included:
  - Flyer should be more visually engaging and attention-grabbing.
  - Reduce text and focus on concise, impactful messaging.
  - Emphasize outcomes (e.g., making change, being heard, improving healthcare), rather than process details.
  - Use stronger headlines such as calls to action (e.g., "Make a Difference in Your Community" or similar).

- Consider adding visuals (photos, icons, speech bubbles, megaphone imagery, etc.) to represent community voice and feedback.
- Include a clear action step (e.g., QR code, website link, or contact information).
- Keep required language minimal while meeting necessary guidelines.
- Aim for language that feels community-centered and welcoming, rather than formal or “government-heavy.”
- The plan to distribute or post the flyer would be at:
  - Tables at community events and meetings.
  - Senior centers, health centers, and other community locations.
  - Social media and website postings.
  - Hard copies available upon request.
- Lupe Sims (Tribal Liaison, Community Health – PacificSource) provided guidance regarding inclusive and accurate language for Tribal participation.
  - Include both federally recognized and non-federally recognized Tribal individuals residing in Central Oregon.
  - Ensure language is inclusive of individuals from Tribes outside the region who now reside locally.
  - Capitalize “Tribe,” “Tribal,” “Indigenous,” and “Federally Recognized Tribes.”
  - Avoid language that unintentionally excludes individuals not enrolled in specific local Tribes.
- Staff agreed to revise language to reflect inclusivity and proper terminology.
- Members discussed the importance of:
  - Leading with community impact and voice.
  - Making materials relatable to individuals unfamiliar with the CAC.
  - Incorporating testimonials or personal stories to build credibility.
  - Engaging younger OHP members to broaden representation and perspective.
- Staff proposed interviewing interested CAC members (via Zoom) to create short testimonial videos or written quotes for social media use. Participation would be voluntary.
- Social Media & Facebook Discussion - Discussion included expanding outreach through social media platforms (Facebook, Instagram, LinkedIn).
  - A CAC member could create a separate Facebook page outside of the Health Council structure. It would be a community-style online space where members could share concerns, updates, and experiences related to OHP benefits and healthcare access. See Brad Porterfield if you are interested in working with him to create the page (outside of CAC meetings).
  - Camille will post on COHC social media platforms on how to become a CAC member to promote recruitment.

### **CAC Representative at Board of Directors**

- Kelley Adams asked the CAC members to consider being a backup at the Board of Directors meetings if Christie (Chair) or Aimé (Vice-Chair) would not be able to attend. These meetings occur the 2<sup>nd</sup> Thursday of each month. A good way to prepare to be the CAC representative is to attend the Board of Directors meeting as a guest. This can be

done in-person or online via Zoom. Kelley will include the meeting link in the CAC packet email each month.

### **Follow Up**

- Kelley shared that a Tribal Engagement Plan was being drafted by herself, Camille Smith, Kristen Tobias, and Lupe Sims. A plan has been submitted to OHA for approval. Once approved, Kelley will share with the CAC.
- This provides an opportunity for the CAC to discuss their role in Tribal Engagement. Lupe Sims would be happy to present to the CAC at a separate meeting.

### **Next Steps & Action Items**

- Kristen Tobias will follow up on if there have been benefit changes in how many therapy or counseling visits an OHP member can receive each year.
- Kelley will forward the links that Mariah Miller shared in her OHA updates presentation.
- Kelley and Camille will take the CAC suggestions and update the recruitment flyer including the suggestions from Lupe Sims on the inclusive and accurate language for Tribal participation.

**KELLEY ADAMS, COHC CAC COORDINATOR**

[Kelley.adams@cohealthcouncil.org](mailto:Kelley.adams@cohealthcouncil.org)

Call or Text: 615-584-2368

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**VIEW THE RECORDING OF THE FEBRUARY 19, 2026 CAC MEETING**

<https://youtu.be/qJxsEdrOaU4?si=tKEkzzZrdnNclOr9>

Ever wish you could  
do something  
to make healthcare  
better in Oregon?



*I'd like to tell  
them a thing  
or two!*

*The system  
is broken!*



*They don't get  
what it's like  
for people  
like me ...*



**Join the Central Oregon Community Advisory Council and find out how!**

### What is the Community Advisory Council?

The Community Advisory Council (CAC) is a group of Oregon Health Plan (OHP) members and local public health workers who share their experience and recommend ways to improve healthcare services and programs in the region.

### CAC members:

- Use lived experience to suggest community-based solutions to local issues.
- Recommend ways to improve healthcare quality and access for OHP services
- Guide how community funds are spent to make sure people get the care they need

### How it works:

- Monthly meetings (mostly online)
- Stipends for attending meetings and WiFi support
- Travel and childcare costs reimbursed for in-person meetings, lunch included
- Translation and other accommodations available

### Who can join?

- OHP members (or guardians/caregivers) who live in Deschutes, Jefferson, Crook, or northern Klamath Counties
- Native Americans who are OHP members and part of the Confederated Tribes of Warm Springs, the Cow Creek Band of Umpqua Tribe of Indians, or the Klamath Tribes or who live in the above counties, or on any regional indigenous reservation lands.

[www.cohealthcouncil.org/committees  
/community-advisory-council](http://www.cohealthcouncil.org/committees/community-advisory-council)  
Email: [info@cohealthcouncil.org](mailto:info@cohealthcouncil.org)



You can get this document in other languages, large print, or other formats and can request an interpreter. This help is free. Call PacificSource Community Solutions at 503-584-1303 or TTY: 711. All relay calls accepted.

COHC – CAC Tribal engagement – Foundational Learning  
Proposed Discussion Points - March 19, 2026

<https://youtu.be/siMal6QVblE>

“A Conversation with Native Americans on Race”

6.23 minutes long – free viewing

Please advise CAC viewing prior to March 19, 2026 meeting

***Discussion questions:***

- 1) What is your current understanding of Tribal people, Tribal Nations, or Tribal cultures?
- 2) What, if anything, did you learn in school about Tribal Nations or Tribal history?
- 3) Viewing Discussion: “A conversation with Native Americans on Race” – Please describe:
  - a. How has this documentary impacted your present understanding of Tribal people and culture
  - b. If so, how – describe the impact of learning

## **PURPOSE**

This plan outlines a culturally responsive, inclusive, and respectful approach to engaging Tribal communities in recruiting members for the Central Oregon Community Advisory Council (CAC). These efforts are grounded in cultural humility, relationship-building, and established best practices for Tribal engagement. Meaningful and equitable Tribal participation is essential for upholding Tribal sovereignty, understanding Tribal historical and contemporary context, and ensuring that community priorities are heard, honored, and reflected in the work of the CAC.

## **STRENGTHENING CULTURALLY RESPONSIVE RELATIONSHIP BESIDE TRIBAL NATIONS**

### **Tribal Engagement with PacificSource (PCS) Tribal Liaison**

- Engage in ongoing consultation with the PCS Tribal Liaison to support continuous, culturally responsive relationship-building beside Tribal communities and to assist in the development and implementation of the CAC Tribal Engagement Plan.
- Review all materials with the PCS Tribal liaison prior to submitting to the Oregon Health Authority for approval no later than March 30, 2026.

### **Tribal /Cultural Foundational Learning Resources and Development**

- Land acknowledgement statement adoption and implementation.
- Identify the regional Tribes of Central Oregon and the Nine federally recognized Tribes in Oregon, including their geographic locations and established or emerging partnerships with the Central Oregon Health Council, to inform and cultivate culturally responsive engagement.
- Engage in Tribal and culturally relevant self-directed and in-person learning to strengthen cultural humility, deepen understanding of Tribal history and Tribal sovereignty, and inform best practices for Tribal engagement and Tribal health priorities.
- Share foundational Tribal engagement learning resources and facilitate discussion of key learnings to support culturally responsive practices.
- Consult with the PCS Tribal Liaison for one-on-one or group Tribal-lens professional development support related to foundational Tribal engagement learning resources, and for guidance in developing and applying culturally responsive communications and cultural considerations when working with Tribal communities and Tribal individuals.
- Integrate Tribal engagement foundational learning into CAC member onboarding and ongoing Central Oregon Health Council staff professional development curricula.

### **CAC Coordination and Tribal Engagement Planning**

- Participate in monthly coordination meetings with the CAC Coordinator, PCS Senior Community Partnerships Strategist, and PCS Tribal Liaison.
- Land acknowledgment statement read at the beginning of each meeting to honor and uphold the Tribal sovereignty of the regional Tribes as well as all Tribal individuals.
- Identify actual and potential barriers to Tribal representation and engagement within the CAC and in collaboration beside regional Tribes, Tribal individuals, and families.
- Develop and implement collaborative strategies to reduce barriers and prevent potential culturally relevant harm, incorporating ongoing review to ensure practices remain responsive and respectful.

## **Tribal Partner Engagement and Outreach Development**

- Conduct ongoing group review of foundational Tribal engagement learning, professional development activities, and action items related to harm-reduction and barrier-removal strategies.
- Advance strategizing planning efforts to engage in regional Tribal community activities and ensure regional Tribes are informed about CAC and Central Oregon Health Council events and outreach activities, in partnership with the PCS Tribal Liaison.
- ***Develop a culturally responsive regional Tribal partner CAC outreach plan with the PCS Tribal Liaison:***
  - Identify CAC/COHC regional Tribes.
  - Develop and review culturally responsive, present, and relevant communication goals and proposed timelines regarding regional Tribe and/or Tribal individual participation.
  - Review current and past inclusion of regional Tribal representation in the CAC — provide a snapshot of the process and identify areas for improvement.
  - Identify potential barriers to Tribal inclusion and representation, and outline steps of support needed to address them.
- ***Develop CAC invitation materials for email and flier distribution to regional Tribal partners that:***
  - Reflects the value and importance of Tribal perspectives.
  - Clearly communicates the intention and purpose of the CAC.
  - Demonstrates how the CAC intends to collaborate with regional Tribes, Tribal partners, families, and individuals.
  - Outlines timelines of commitment and expectations.
  - Clarifies CAC roles and responsibilities.
  - Describes the benefits of CAC participation.
  - Explain the support available to CAC members with membership.
- ***PCS Tribal Liaison will review and approve CAC regional Tribe invitation materials and plan next steps, including:***
  - Develop plan for Tribal representative acceptance regarding invitation.
  - Group and Tribal Liaison collaboration efforts to distribute invitation materials.
  - Invitation materials distributed via email via PCS Tribal Liaison.
  - Continued follow-up Tribal engagement direct between Tribal representatives and PCS Tribal Liaison.
  - Group debrief in monthly meetings of Tribal engagement plan process.