



## Lane Community Health Council

### Lane Community Health Council Board

May 14, 2024

7:15am-9:00am

Virtual Meeting

Minutes

**Present:** Dr. Patrick Luedtke, Lane County Health, and Human Services; Dr. Catherine York, Northwest Surgical Specialists; Ms. Isis Barone, Community Advisory Council; Mr. David Butler, McKenzie Willamette Medical Center; Ms. Ali Canino, South Lane Mental Health; Ms. Tannya Devorak, Community Advisory Council; Dr. Lana Gee-Gott, Northwest Medical Homes; Ms. Eve Gray, Lane County Health, and Human Services; Ms. Lindsey Hopper, PacificSource; Dr. Vipul Lakhani, Oregon Medical Group; Ms. Jamie Louie-Smith, Heritage Bank; Mr. Tony Scurto, Lane Education Service District; Dr. Robin Virgin, PeaceHealth Medical Group; Mr. Chad Westphal, Looking Glass

**Absent:** Ms. Melanie Maples, Willamette Family Inc.

**Staff:** Ms. Rhonda Busek, Lane Community Health Council; Ms. Suzy Kropf, Lane Community Health Council; Ms. Lauriene Madrigal, Lane Community Health Council

**Guests:** Dr. Mark Buchholz, PacificSource; Ms. Kellie DeVore, PacificSource; Ms. Erin Fair Taylor, PacificSource; Ms. Megan Romero, PacificSource; Ms. Kayla Watford, Lane County Health & Human Services; Ms. Tricia Wilder, PacificSource; Mr. Dustin Zimmerman, Oregon Health Authority

#### I. Call to Order, Welcome & Introductions

Dr. Luedtke called the meeting to order at 7:15 am. Introductions were shared.

**Public Comment:** There was no public comment.

#### II. Consent Agenda

Dr. Luedtke presented the consent agenda including the following actions. **A motion was moved and seconded to approve the consent agenda. The motion passed unanimously.**

- **Approval of April 9, 2024, Minutes Lane Community Health Council Board:** No questions or discussion.
- **LCHC Financials:** No questions or discussion.
- **CCO Director's Report:** No questions or discussion.
- **CCO Dashboard:** No questions or discussion.
- **CCO REALD Dashboard Lane CCO:** No questions or discussion.
- **2023 Performance Metrics 4<sup>th</sup> Quarter:** No questions or discussion.

#### III. Finance Committee Update

Ms. DeVore presented the Lane CCO Finance Report reflecting February 2024 data. The financials report a year-to-date operating loss of \$5.2M, behind the budgeted loss of \$1.8M. The financials include \$1.6M of negative adjustments related to prior year. There is \$731k reserved for large cases with \$18k in estimated reinsurance recovery. She then shared the February 2024 Financial Results based on the Gross Dollar Basis, Per Member Per Month (PMPM) Basis, Claims Expense – Paid / Accrued & IBNR, Prior Year Adjustments to 2024 Financials, and the Trailing 12 Months Results. A question was raised regarding how much the projected deficit is associated with increased utilization compared to decreased reimbursement rates this year. Ms. Hopper responded that it is too early to tell, though the region will have an opportunity to make sure documentation accurately reflects the conditions that members face. Ms. Fair Taylor also shared that PacificSource’s Quality Team works with providers on an ongoing basis around accurate documentation and coding practices, and that there could be an opportunity to connect with them about opportunities. An additional question was raised regarding expectations for membership in the next 6-12 months. Ms. Fair Taylor responded that they expect membership to stay relatively the same throughout the year. She further noted that the Bridge Health Plan will go live July 2024, which is not expected to result in an immediate increase. Redetermination will continue through mid-2025 but is expected to be counterbalanced by Healthier Oregon Program (HOP) and Bridge Health Plan (BHP) increases.

#### IV. Nominating Committee

Ms. Canino reported the following Nominating Committee recommendations:

- **Lane Community Health Council Board Member, Hospital & PCP/Multispecialty, PeaceHealth Medical Group:** This position is currently held by Dr. Robin Virgin. PeaceHealth Medical Group would like to renew this position and continue to have Dr. Robin Virgin hold the position. **A motion was moved and seconded to approve the nomination. The motion passed unanimously.**
- **Lane Community Health Council Board Member, PCP/Multispecialty, Oregon Medical Group Optum:** This position is currently held by Dr. Vipul Lakhani. Oregon Medical Group Optum would like to renew this position and continue to have Fr. Lakhani hold the position at this time. Ms. Busek noted that Optum will nominate another provider, and that Dr. Lakhani will maintain the position in the interim. **A motion was moved and seconded to approve the nomination. The motion passed unanimously.**
- **Lane Community Health Council Board Member, FQHC Lane County Health and Human Services:** The position is currently held by Dr. Patrick Luedtke. Lane County Health and Human Services would like to renew this position and continue to have Dr. Patrick Luedtke hold the position. **A motion was moved and seconded to approve the nomination. The motion passed unanimously.**
- **Lane County Health Council Board Member, Treasurer, Optional Value-Add Community at Large:** This position is currently held by Ms. Jamie Louie-Smith. Ms. Jamie Louie-Smith would like to renew this position. **A motion was moved and seconded to approve the nomination. The motion passed unanimously.**

- **Oral Health Position, Lane Community Health Council Finance Committee:** Ms. Kristin Soto, Capitol Dental has applied for the vacant Oral Health Position on the Lane Community Health Council Finance Committee. Application attached. **A motion was moved and seconded to approve the nomination. The motion passed unanimously.**

#### **V. Shared Savings Update and Follow-up**

Ms. Busek updated the Board on the status of Shared Savings distribution. All Letters of Agreement (LOA) and checks were distributed by the April 30 deadline. Currently staff are working with organizations to discuss reporting and metrics. Ms. Busek noted that Dr. York was on KLCC on May 13<sup>th</sup> with food system partners to share about the food insecurity work. She further noted that Bushnell University will be interviewed as well, and reminded the Board that LCHC has been invited to Bushnell's Accelerated BSN Program reception. She thanked LCHC staff for their work and ability to meet the deadlines surrounding Shared Savings efforts. A question was raised about the frequency of updates to the Board regarding Shared Savings. Ms. Busek responded that reporting will happen on a quarterly basis and can be shared with the Board. She further noted that the metric updates will include narrative as well. A recommendation was made to include testimonials from community members utilizing the services themselves, in addition to the metrics and narrative updates. Ms. Busek responded that testimonials could be combined with the narrative updates.

#### **VI. Funding Planning and Priorities**

Ms. Busek opened discussion regarding future funding. She shared that there will potentially be 2023 Shared Savings, as well as guaranteed Community Benefit Initiatives (CBI) funds and Social Determinants of Health – Health Equity (SDOH-E) Quality Pool funds. The Board established at the February retreat an interest in maintaining the same priorities of Food Insecurity, Housing and Homelessness, Healthcare Workforce, and Youth Behavioral Health. Ms. Busek invited input from the Board for additional opportunities, as these areas have received large investments through the 2022 Shared Savings. She noted that the Community Impact Committee brainstormed opportunities. The CAC was also recently surveyed regarding their top interests based on the Community Health Improvement Plan (CHP) Priorities and action areas (both resources available in the Board Meeting Packet).

In addition, PacificSource compiled general information about CCO Member Data. Ms. DeVore oriented the Board to the CCO Member Data (sent by email), which included Primary Care Utilization and Emergency Department (ED) Utilization, including the impacts of Social Determinants of Health – Equity (SDOH-E) factors on ED utilization. Ms. DeVore noted that “friendly faces” account for 0.3% of Lane CCO membership, but drive 12% of ED use, which is a higher prevalence in Lane County than other PCS Regions. Ms. Gray noted that Lane County continues to work on the Crisis & Stabilization Center, which should help offload ED volume. Ms. Busek reminded the Board that Medical Loss Ratio (MLR) criteria will continue to apply. Ms. Canino noted that another gap may be tele-psychiatry not meeting the needs of clients that need in-person care. Ms. Gray noted that there may be legislative changes that require in-person Behavioral Health care visits, and that prescribers are an additional need.

Dr. Luedtke noted that the Board has discussed taking a closer look at the unmet Quality Incentive Metrics, to see if there might be strategies that could aim to meet those metrics. He gave the example of supporting dual-enrolled members who are aging (Medicaid/Medicare). Ms. Barone noted that in her work at HIV Alliance, the biggest issue for older adults who are unhoused is dealing with assumptions from others regarding substance use. She recognized the importance of advocacy and relationship building, as these community members may not know how to advocate for themselves. She further noted the value of Peer Support Services (PSS) and Community Health Workers (CHW) in this space. Ms. Gray shared that Lane County is planning a pilot program with Lane Council of Governments (LCOG) to provide intensive case management for older adults who are unhoused. LCOG would hire a Case Manager and would also utilize Lane County Service Navigators. She noted that she is currently waiting for the budget and that is an initiative that could use support, as this is an area of increasing need in our community. Dr. Gee-Gott shared that her practice sees many patients transitioning from Medicaid to Medicare, requiring a Medicare supplement fee, which is challenging on limited income with the rising cost of living. Dr. Luedtke asked if the current Community Health Improvement Plan (CHP) identifies age-specific demographics. Ms. Watford responded that she does not recall it being noted in the CHP, and that it would be an opportunity for the current Community Health Assessment (CHA). Ms. Busek further noted that the CAC identified the elderly in their top four priority populations when surveyed recently. Ms. Devorak shared the importance of meeting the community where they are with long-term solutions and education about self-sufficiency. Dr. York agreed and expressed interest in prevention related to substance use disorders (SUD). Dr. Virgin also shared that the Clinical Advisory Panel (CAP) has discussed the opportunity to address workplace violence. The group discussed strategies such as trauma-informed care, de-escalation training, and diversity and equity training. Training through Trauma Healing Project and projects funded through Lane County Prevention programs were mentioned. Ms. Johnson shared that Advantage Dental has sponsored training for staff with the Trauma Healing Project and that it was a positive experience.

## **VII. Community Advisory Council**

Ms. Devorak shared highlights from the CAC Quarterly Summary as shared in the Board packet. Her report included updates on recruitment strategies as well as planning for the CAC Celebration, which is scheduled for June 7, 11:00 am – 2:00 pm (hybrid). Board members are welcome and encouraged to attend as their schedules allow.

Ms. Watford shared additional CAC updates, including the upcoming Mobilizing for Action through Planning & Partnerships (MAPP) 2.0 Training that various staff and CAC members will be attending in June. She also shared summaries of the subcommittee's efforts, including the Rural Advisory Committee's community events calendar, the Member Engagement Committee's efforts related to the 1115 Waiver, the Health Equity Committee's efforts to learn more about community resources, and the Prevention Workgroup's participation in the planning process for the next Prevention Plan. A question was raised regarding if there are any efforts related to substance use, including tobacco, alcohol, and opiates. Ms. Watford responded that most planning has been about tobacco cessation programs, and some conversations have also addressed

cannabis use though strategies have been challenging to implement. Alcohol and opiate use have not been discussed yet but could be an opportunity to connect with Public Health's efforts. She shared that there is progress related to sugary drink consumption efforts.

**VIII. Clinical Advisory Panel**

Dr. Virgin reported that the CAP has been reviewing year-to-date performance on the Quality Improvement Metrics (QIM), which includes oral evaluation for diabetic patients, well-child visits, diabetes measures, kindergarten readiness, immunizations, and more. She reported that in 2023, the CCO achieve seven of the eleven measures, resulting in not receiving the full payout for 2023 funds. The top two metrics missed were adolescent immunizations, and substance use disorder treatment initiation and engagement. Ms. DeVore noted that PCS does not have final data yet for the 2023 QIM, final data should be available soon.

**IX. Adjournment**

There being no further business, the meeting was adjourned at 8:57 am.

Respectfully submitted,



Suzy Kropf (she, her)  
Community Health Program Manager  
Lane Community Health Council