

Lane Community Health Council Board November 12, 2024 7:00am-9:00am Hybrid Meeting Minutes

Present: Dr. Patrick Luedtke, Lane County Health, and Human Services; Dr. Catherine York, Northwest Surgical Specialists; 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. Molly Johnson, Advantage Dental; Ms. Jamie Louie-Smith, Heritage Bank; Ms. Melanie Maples, Willamette Family Inc.; Mr. Tony Scurto, Lane Education Service District; Dr. Robin Virgin, PeaceHealth Medical Group; Mr. Chad Westphal, Looking Glass
Absent: Dr. Philip Capp, Optum; Ms. Lindsey Hopper, PacificSource
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. Megan Romero, PacificSource; Ms. Leslie Neugebauer, PacificSource; Ms. Kayla Watford, Lane County Public Health

Call to Order, Welcome & Introductions, Announcements, Public Comment
 Dr. Luedtke called the meeting to order at 7:00 am. Introductions were made.

 <u>Public Comment:</u> There was no public comment.
 <u>Office Holiday Closures:</u> LCHC will be closed on December 24 - 25 and January 1.

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 October 8, 2024, Minutes Lane Community Health Council Board: No questions or discussion.
- **<u>LCHC Financials:</u>** No questions or discussion.
- **<u>CCO Director's Report:</u>** No questions or discussion.

III. Finance Committee Update

PacificSource Financials: Ms. DeVore presented the PacificSource Lane CCO Finance Report. The report noted a year-to-date operating gain of \$1.3M, ahead of the budgeted loss of \$7.5M. The financials include \$6.4M in positive adjustments related to the prior year. Large claims included on the Claims Medical line total \$1.1M, with corresponding estimated reinsurance recoveries of \$246K. Ms. DeVore presented the July 2024 Financial Results Gross Dollar Basis, PMPM Basis, Claims Expense – Paid / Accrued & IBNR, trailing 12 Months Results, Withholds, Membership, and the Joint Management Agreement. Membership as of August 2024, was 90,573 actual members compared to a budget of 82,108. The current estimate of the 2023 JMA calculates out to be shared savings of \$10.7M, net of the 2023 SHARE Designation (\$610k). The current estimate of the 2024 JMA calculates out to be a net recapture of \$10.8M. The estimated 2024 SHARE Designation of \$403k is excluded from this recapture amount. Ms. DeVore was asked about the impact of OHA's rates for 2025. She responded that PacificSource expects rates to be flat with 2024, and they are planning for flat membership as well. 2025 budget assumptions will be brought to the finance committee this month and updates will be brought to an upcoming board meeting. Ms. DeVore was asked about estimates for the Basic Health Program (BHP). She responded that she has not seen updated projections since enrollment began. She will investigate and report back.

Ms. Louie-Smith reviewed the 990 tax forms. She reminded the board that the dollars received from PacificSource means that LCHC is different than other nonprofits. The IRS reviews on a rolling five-year basis to ensure the organization is receiving at least 33.3% of dollars from community support She noted Shared Savings is indicated on the form as "Other Income" based on profit-sharing model with PacificSource. She expects that LCHC will continue to meet nonprofit requirements.

IV. LCHC Retreat Planning

Dr. Luedtke reminded the Board that the February Board Retreat is scheduled for February 11, 2025, 7:00 am – 11:00 am. Ms. Busek shared topics that have been brought forward so far, including a board role requirements presentation from LCHC's attorney, Mr. Lance LeFever; overview of the Joint Management Agreement (JMA) between LCHC and PacificSource and how the board sees governance moving forward; discussion of annual priorities; overview of CCO 3.0; and Quality Improvement Metrics process and improvement. She then opened the discussion for board feedback on priority topics. Ms. Gray highlighted QIM performance as an important topic, particularly given 2024 performance and the need to support our population and reduce expenses for unnecessary hospitalization. Ms. Louie-Smith noted that as the Board retreat is not a public meeting, this may be a good opportunity for establishing what should be public versus non-public meeting material. Dr. Luedtke added the opportunity to review a retrospective of five years to see what has been accomplished and learning opportunities for CCO 3.0. Ms. DeVore noted that the CCO 2.0 contract was extended through 2026. Additional ideas brought forward included planning for catastrophes, involvement opportunities in universal health care planning; review of what the Health Council is authorized to do; receiving more in-depth committee reports; engagement opportunities for the organizations represented on the Board; and connecting systems. Ms. Busek also shared that the Community Advisory Council will attend the January Board meeting ahead of the Board Retreat to inform prioritization.

V. Community Impact Committee

Mr. Scurto reported that the 2024 Fall Community Grants are in progress. He reviewed the funding streams for the grant process, including \$405,000 Community Benefit Initiatives, \$1,867,751.71 for the SDOH-E portion of the Quality Pool; and \$10,738,018 Shared Savings. He noted that per approval at the October Board meeting, \$200,000 is allocated for the gift card project with United Way of Lane County. The total amount of

available funds is \$12,810.769.71. LCHC committed to at least 75% alignment with Medical Loss Ratio (MLR). Health Related Services (HRS) help meet MLR. After consideration, LCHC established a goal of at least 80% HRS alignment in this process to ensure a buffer is available. LCHC received 67 grant applications in the Fall 2024 Grants cycle. After review with PacificSource, LCHC identified 53 of 67 grant applications that are expected to align with HRS. An independent panel of reviewers is currently scoring. They will make recommendations to CIC, who will then make a recommendation to the Board in December. The CIC recommends an additional expenditure of \$100,000 funding the Quality Improvement Project Proposal from the Shared Savings pool. This project includes offering incentives and holding additional clinic days. A question was asked regarding the total amount of grant requests. Ms. Madrigal responded, \$11,439,013.59. A motion was moved and seconded to approve funding \$100,000 for the Quality Improvement Project. The motion passed unanimously.

VI. Clinical Advisory Panel

Dr. Virgin reported that the CAP continues to discuss engagement opportunities to improve QIM performance, including various incentive strategies. She noted that access and engagement continue to be an issue. The Board discussed additional incentive ideas, including offering family photos, gift cards, home visits for vaccinations, encouraging word of mouth promotion, social media promotion, mobile clinics in school-based settings, and immunizations for hospitalized patients. Ms. Gray also noted that the Community Health Centers are behind on billing, which may mean that we may be closer to meeting metrics than it appears.

VII. Community Advisory Council

Ms. Devorak reported CAC Q3 highlights, including a recap of the October "Fall Ball" data party as part of the 2024 Community Health Assessment. She also shared an invitation to the upcoming "Our Journey: An Intertribal Quarterly Cultural Collective" event on December 9. The flyer was included in the board packet.

VIII. Adjournment

There being no further business, the meeting was adjourned at 9:00 am.

Respectfully submitted,

Suzy Kropf

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