

**Oregon Public Health Association Board Meeting
Salem Hospital Community Health Education Center**

April 20, 2012

<u>Attendees:</u>	Chris Kabel	Tom Eversole	Charles Fautin	Jan Wallinder
[In Salem]	Brian Johnson	Marie Harvey	Kerri Lopez	Tosha Zaback
	Anna Stiefvater	Dianna Pickett	Patricia Crozier	
	Robina Ingram-Rich	Josie Henderson		
[On phone]	Kate Moore	Carla Waring	Renee Hackenmiller-Paradis	
	Andrew Epstein	Tom Engle	Kathleen Carlson	

Call to Order: By Chris Kabel

Minutes of the Last Meeting: March board meeting minutes presented for approval by:

Treasurer's Report: Presented by Jan Wallinder.

Board and Committee Changes:

1. Vacancy for position # held by Lisa Schaffner – representing Washington, etc counties
2. Carla Waring is new Disability Section board representative. Danielle Bailey will be Disability Section Chair.
3. Lorin Scott-Okerblon is the new Membership Committee co-chair with Anna Stiefvater

Committee Reports:

NOMINATIONS COMMITTEE APPOINTMENTS (Chris Kabel):

- Heather Morrow-Almeida (chair), David Brown and Cheryl Connell were elected to the Nominations Committee at the Annual Meeting in October. The OPHA bylaws require two additional board members to be appointed to the committee. After discussion *Kate Moore and Kerri Lopez agreed to be board members on Nominations Committee.*
- Robina Ingram-Rich proposed a change of the Nominations Committee to a standing committee from its present ad hoc status. The OPHA by-laws direct that three members are selected by election and two board appointees.
- Josie will send letter to the members of the nomination committee. The job ends when the ballots are sent out.

POLICY COMMITTEE (Tom Eversole and Renee Hackenmiller-Paradis):

Coordinating Care Organizations

Tom Eversole provided the Background/Framework for the discussion.

- Coordinating Care Organizations are part of the Oregon health services transformation. Each county board of health provides the public health assurance to care for the un-insured. The local health authority should be present at the CCOs.
- There are Community Advisory Committees – but they are solely advisory to the CCO board of directors but are not members of the CCO board.

- The CCOs are not entities covered by the Oregon public meeting laws [sunshine laws]
- Transparency of CCO activities is desired and can possibly be achieved via Oregon Administrative Rules soon to be developed. The rules governing the CCOs being requested are: Meetings are publicly announced, meetings are open to the public for observation, and a period of time available for public comment. Executive Sessions would still exist
- Venues for Advocacy include letters to County Commissioners, legislators and the local papers.

Renee continued the presentation.

- The roll out of the CCOs will begin with Medicaid/Medicare patients first. The plan is for the state employees in the health benefit pools to be included in the CCOs in the future
- There are two strategies about CCOs. State rules covering the entities and the local CCO's own rules.
- There is a concern that for-profit organizations are trying to be Oregon CCOs. But the decision on who should be a CCO may be based on abilities [necessity for transparency]
- Public health departments might consider becoming CCOs

Questions/Answers and Discussion followed.

- Andrew: Has the Oregon Health Authority been approached about inclusion of local public health via rulemaking? Tom EV: Rulemaking is happening now. The legislation did not cover/include the public meeting law
- Kate: Two national companies have responded with letters of intent to be the "local" CCO. A: CCOs are not limited by boundaries of county, city or region
- The RFP can be reviewed for criteria of evaluation. It is an open bidding process.

MOTION [Tom Eversole]: The Oregon Public Health Association shall proceed with advocacy regarding Coordinated Care Organizations on two issues.

1. The Boards of Directors of CCOs shall be required by or in rule to provide representation of the local board of health or public health authority or designee on the board of the CCO; and
2. The Rules of CCOs will include public notification of meetings, meetings will be open to the public to observe and there will be a public comment period.

Motion was seconded by Jan Wallinder. The motion passed unanimously.

Further discussion:

- Next steps. Tom Eversole will provide a concise piece to Josie
- Jan Wallinder: Members need a product to help them understand the progress from legislation to law to rules to enacting the law and rules.
- Kerri Lopez: There are concerns among safety net and tribal clinics and rural health about the effect of CCOs upon health disparities
- Charles Fautin: The complexities are never ending.
 - There is an enormous threat to local mental health authority and local public health is in limbo.
 - Another issue is home rule vs. unfunded mandates
- CCO boards are not 51% consumer but 51% of the advisory boards should be consumers.

DEVELOPMENT COMMITTEE

1. The APHA accreditation grant of \$4,000 with \$800 from the state was a collaboration of the state, CHLO, Benton County, OSU and APHA. There are 40 attendees registered for the May 1 training. There will be two webinars over the summer and a round-table session Day 2 of the October OPHA conference.
2. The Northwest Health Foundation RFP for health performance advocacy. Tosha, CHLO, Kerri and Josie worked on this application. CHLO is the lead applicant and OPHA is a partner. \$35,000 was requested to support an employee and \$15,000 for messaging via local health departments. The decision is due June 21.
3. Sponsorship of the Conference/Annual Meeting. Forty requests are out. There are three firm commitments and four tentative commitments. Kerri, Vicki and Kate have "asks" outstanding. To date, there are more "asks" out and fewer commitments made compared to last year.
4. Kerri Lopez discussed approaching the tribes either through the Executive Directors or the tribal councils.

PROGRAM COMMITTEE [Marie Harvey]

Update on the 2012 OPHA Conference/Annual Meeting

- The call for abstracts will be from May 14 – June 25th
 - Should there be a special statement about CCOs in the call for abstracts?
 - Encourage many to submit
- The Abstract review is scheduled for July 11 from 11:00 am – 2:00 pm
- Registration is to open August 13 or 20 through September 21
- OEHA will be co-meeting with OPHA again. Their members are also on the planning committee
- Sponsorships so far: Kaiser Permanente and Samaritan Health Services
- Cost of the conference is between \$40,000 -90,000.

EXECUTIVE COMMITTEE REPORT ON INDIRECT COSTS (Jan Wallinder)

Determining what OPHA indirect costs would be and how to apply them is not a top priority at this time. The cost structure is not in place for this organization (yet)

NEW BUSINESS

1. This meeting site works.
2. Next month's meeting is May 18, 2012 from 11:30 -3:30. The first three hours are for training. It will be at the Portland State Office Building in NE Portland.