

# CCO Community Advisory Council Meeting

Monday, July 28, 2014

12:00 - 2:00 pm

Lane County Youth Services, Carmichael Room

## Minutes

**Attended:** Char Reavis, L.M. Reese, Tara Davee, Susanna Sammis, Marianne Malott, David Parker, Leslee Craven, Colt Gill, Rick Kincaid, Dawn Helwig, John Radich, Leah Edelman

**Guests:** Jose E. Soto (NAMI), Brian Johnson (Lane County Public Health Prevention Program)

**Absent:** Tony Biglan, Val Haynes, Roxie Mayfield, Marcela Mendoza, Andrea Muzikant, Eric Van Houten

1. **Call Meeting to Order** – Meeting opened by David Parker.
2. **Public Comment** - Jose E. Soto from the National Alliance on Mental Illness (NAMI) updated the council on NAMI.
3. **Introductions and Welcome**
  - a. Introductions – Introductions were made around the table.
  - b. “Get to Know You” activity Tara. Everyone shared what they like about fairs
4. **August Meeting**
  - a. Many Trillium committees take a break in August, do we want to take a break or meet? CAC Committee members voted to not have a meeting in August. The CAC sub committees will still meet.
5. **Liaison / Workgroup Reports**
  - a. **Governing Board** – Report by Tara. The overpayment to Trillium has been determined to be 4.8 million which they will pay back in 3 payments of 1.6 million. This money has already been set aside. It is not known if the problem has been fixed yet, so Trillium will continue to keep money in reserve in case of more problems. Many other CCOs were also affected. The confusion was over adults with families vs. adult without families and being paid at a higher rate. Redetermination is also starting which will also be a challenge. We have approximately 88,538 members and 8,875 unassigned. From the Four Point Plan funds that Trillium has been able to set aside, they have been able to assign around 16,000 patients from that in a short amount of time. Out of the 31 Quality Tool Performance Measures that CCOs had

the possibility of meeting out of 17 CCO incentive measure Trillium met 12.9 and earned 104% of funds earned which came out to almost 5 million dollars.

- b. **Trillium Report** – Report by Terry Coplin, Trillium. Focus is still on access to care. We still have about 9,000 members who don't have a physician. Working with the county on their new community health center, Brookside, which will be opening August 25<sup>th</sup> at 17th and Chambers Road in Eugene, and the Grand Opening is August 27<sup>th</sup>. Once they are fully operational, Brookside will be able to take on 6,000 patients which will substantially reduce the number of members without providers. Trillium has also issued 3 grants to clinics that have submitted proposals that would create access to up another 5,000 by the end of the year. We are evaluating a request from a clinic from Portland that would like to set up a new integrated clinic in Lane County. That is a little tricky because we have to be careful that they don't cause a competition with clinics that are already seeing our members. The reason we want to shoot for capacity for over 9,000 is because there are people who are waiting to get membership around 3,000 – 4,000 people. We are closed to adults. They have an OHP open card. Trillium is also working with the state to try and get the plan opened for pediatrics because there appears to be additional capacity for pediatrics; but when the state closes its plan, it closes to everybody. This is due to the states software capabilities which they are working on to get this problem resolved. Trillium has given over \$500,000 to a project called the Community Collaborative which is the integration of primary care into Behavioral Health offices and Behavioral Health into primary care offices. Debi Farr will give us regular updates on the project. There will be some media coverage on this project through the Register Guard. Trillium's next Community Conversation is set for Wednesday, September 17<sup>th</sup> in Florence which was set up through the Rural Advisory Committee.
- c. **RAC Report** – Report by Char Reavis. Met at Trillium Building. Decided that since we have visited so many places that it is time to focus on one rural community. The committee has chosen Oakridge to focus on their medical needs and what recommendations the committee may have to help them meet their medical needs. For now we are going to meet in Veneta instead of traveling around to different communities. The committee is also participating in the community forum in Florence on September 17<sup>th</sup>. We are hoping for a big turnout. We are going to have several speakers and do a lot of advertising about the forum.
- d. **CAP Report** – Report by Rick Kincaid. Spent a lot of time focusing on the quality performance matrix. One of the things that Transfer Med does when they come to evaluate a practice to see how well they are doing in the delivery of a primary care medical home is to do a survey of both providers and staff about how they are thinking about the primary medical home. Both staff and providers showed very low levels of satisfaction in their work. This is very worrisome. We are going to have to look at our primary care medical homes and provide more dollars for

reimbursement to help them and find more resources for them. Less than ten percent of the medical dollars are spent in primary care. Most of the dollars are spent in procedural hospital care such as surgical care.

- e. **Announcement** – This is L.M. Reese’s last meeting. The committee gave him a big round of applause in acknowledgement of all the hard work he has done for the committee. You will be missed.

**6. Where you Live Matters to Your Health** - Presented by Brian Johnson, Lane County Epidemiologist

- a. Health Ranking of Lane County Communities
- b. Mapping health factors

See PowerPoint presentation. The vast majority of what determines the health of our communities is social and environmental conditions. We need to work together partnering to create healthier and more vibrant communities. We have been looking at ways in which we can create that. In county health rankings and road maps, Lane County falls 18<sup>th</sup> out of 33 counties in Oregon. We are the fourth largest county in the state. Benton County is #1 which is interesting since they are on our northern border. Lane County is 7<sup>th</sup> in critical care, physical environment, pollutions, and housing.

**7. Adjourn**