

CCO Advisory Councils Report to the Governing Board November 2015

Rural Advisory Council:

The Rural Advisory Council meet on Friday, November 13th at Trillium, in Eugene.

Lucy gave the Trillium update; currently there are 92,000 members. Oregon Medical Group is not currently accepting OHP. Trillium is helping to find and connect members to new doctors. The Opiate mandate (remove patients from opiates) has been delayed. Lucy mentioned that they are still working toward reducing opiate use and there will be a chronic pain summit early next year.

Michelle Lowery reported on the Community Health Assessment. More than 2,000 have completed the online survey, including residents from every municipality. Over 50 focus groups and 50 key informant interviews have been held. There will be a public meeting in January or February to share the findings and choose priorities.

The RAC members explored three topics which arose in their focus group.

- 1. Transportation challenges in rural areas:
 - No bus service within the local areas or to and from urban areas
 - While there may be some modes of transportation such as bus or taxi, there isn't always someone to help get the member from their home into the vehicle and out of the vehicle.
 - Friends might be available but might not have the ability to continue to pay for gas for travel.
 - DHS and HACSA don't pay for transportation between appointments; multiple appointments in one day helps keep the travel to and from the rural areas down, but can be costly. It was mentioned that some of this travel would be paid for and members should check with a care coordinator for assistance.

- 2. Communication challenges, including phone/internet:
 - There is not internet access
 - There is no phone
 - Cell phones might not work
 - The cost to have phone/internet is prohibitive
- 3. Access to providers when and where needed:
 - Communication with providers can't get through
 - Can't get returned phone call
 - Unable to access PCP and have to go to walk in clinic
 - Lack of communication between walk in clinic and PCP
 - When assigned PCP can't get appointment
 - Lack of communication between other appointments and PCP's