

MARION COUNTY HEALTH ADVISORY BOARD  
Meeting Minutes  
June 19, 2012  
5:30 P.M. to 7:30 P.M.

Present: John Beare, Mary Beth Thompson, Mike Mann, Tim Murphy, Judy Scott, Renee Stewart  
Absent: Hanten Day, Cherie Girod, Patrick Vance, Katherine Fleury  
Staff: Rod Calkins, Pam Heilman, Scott Richards, Sandy Stewart

Guests: Sue Blayre, Ryan Matthews, Cary Moller

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**Call to Order/Introductions/Approval of Minutes**

Meeting was called to order, all attendees introduced themselves. A motion was made to accept May 2012 meeting minutes, motion carried and minutes were approved.

**Announcements/Updates:**

John added the health care transformation forum to the agenda that HAB members attended.

Sue Blayre added that she would like to add an announcement to the agenda. Announcement will be added to the end of agenda.

**CCO Update:**

Rod reported that the CCO Willamette Valley Community Health was created as a company and has an operating agreement among eleven members including both Marion and Polk counties. Today that is the only group that has expressed interest in being a CCO to either Marion or Polk County. Today they approved the agreement between the CCO and the local Mental Health and local Public Health Authorities for Marion County which is a requirement that a CCO must have to operate in the region. June 25, 2012 is the deadline to have all paperwork turned in for an August 1, 2012 start date. There are four different months they can start in, once an application is submitted and approved, the CCO should be able to begin the following month.

A question was asked if Care Oregon had submitted an application to cover parts of Marion County. Rod reported he does not know about Care Oregon but knows that family care has applied and is interested in certain zip codes in mainly north Marion County that they currently service. Family Care has a start date of August 1<sup>st</sup>. Two National companies and ODS have also expressed interest, all of the major hospitals in Marion and Polk Counties are involved, the fully capitated health Auxiliary plan called Atrio, Salem Clinic, Capital Dental and the BCN are also members.

**Community Health Care Forum:**

The Community Health Care Forum was discussed. Rod reported that only one forum was required for the CCO. If the CCO is approved changes should begin August 1<sup>st</sup>, if not it will be deferred to the following month. There will be an announcement going out to all Medicaid eligible members in Marion County regarding CCO transformation and who they are assigned to, if there is more than one CCO, members will get to choose which CCO they would like to be a member of. There is also a consultative model that NWHS and Marion County have been working on. There are places like Care Assist and community agencies to help people choose providers.

Pam reported that one of the differences is that there is a real emphasis behind this whole thing to connect outcomes with the care that is being given and moving from sit care to preventative care which is more public health population based. The community health triennial plan that we started working on in Public Health now has to expand to include clinical outcomes. Public Health and Acute care is mandated to work together on this with the CCO.

Rod reported that the \$1.9 million that was supposed to go to health care transformation was not received because it is being used to back fill the state's budget hole.

**Oregon Health Authority (OHA) Update:**

Rod reported that for years we complained that we only received one type of service funding for services and there are different needs in each area. This year we have received flexible funding, they have taken a number of service elements of funding and blended them together in this flexible funding pool. They did not move in money for named individual care, they are not going to pool that in flexibly and allow people to spend it. Also, money for specific projects with the state was not included. There are new performance objectives required with flexible funding to measure and accomplish with no additional funding. The state has also kept performance requirements in each area.

**Healthy Start Screening:**

Pam reported healthy start is a program run with para-professional staff that are trained in basic screening and offer family support and is targeted to first babies to a family. Children and Families Commission (CFC) has been the administrator, Catholic Community Services, Easter Seals and Family Building Blocks have been involved with doing home visiting. The CFC came to the Marion County Health Department to ask if we would play a coordination role and help case find. Pam reported that the plan is to try to engage mothers before they give birth, by working with the local obstetricians and follow up after delivery to provide psycho-social supports and parenting tips. Pam reported they are working on a contract at this time.

A question was asked if the organization Healthy Start still existed. Pam reported Healthy Start is less an organization and more a funded program. Rod reported that in recent years it has been run through the state commission for the children and families who passes down funding to local commissions. State commission is going away and no one knows if Healthy Start will be funded at this time. For the time being we will be taking over the screening. There will be a nurse involved in the screening which Healthy Start has not had in the past that will add an extra level of evaluation to the process.

A question was asked how the changes in the Salem Hospital service areas like O.B are affecting the Health Department programs. Pam reported that we manage the prenatal care in Marion County which is there to serve women who are uninsured. The women come to us for screening and an initial assessment and are then connected with OHP if they are eligible, if they are not we assign them to a provider after they pick one from a panel depending on where they want to deliver. In the past the birth center was a significant partner in taking some of the high risk women. In recent weeks we have noticed that it is becoming increasingly difficult to connect these high risk women with a provider.

The prenatal project is funded in partnership with Willamette Valley Public Health Authority (WVPHA), Salem Hospital and Silverton Hospital. We are currently in discussions with the hospitals. Women can still go to the Salem Hospital to deliver if they have a provider there but Salem Hospital no longer has a birthing center.

**CCO/ Community Advisory Committee (CAC) Draft Policy:**

Cary Moller reported that the HAB agenda states "draft" but she now has a final version. The context for the discussion is around the Community Advisory Committee (CAC) which is one of the statutory

requirements out of the Coordinated Care Integration. Cary asks that HAB members in their role as advisories come up with ideas of who may be good assets to the Community Advisory Panel. The statute requires that all of the CCO's have two bodies that govern the process, one, the governance board or the stakeholders board who have risk or stake in the development of the CCO, the other required statutory body is the CAC, there is a third elective body that the local organization is electing to have which is the Clinical Advisory Panel. CAC's primary responsibilities and mission were discussed.

Applications for the committee need to be in before August 1<sup>st</sup>. There are still discussions that applications need to be in as of June 25<sup>th</sup>.

CAC is a twenty member committee, eleven members to be selected are consumers of service, and community members represent the remaining nine. The expectation is that they are residents of either Marion or Polk counties and are currently receiving OHP, if someone is seated to the committee and loses their OHP it is not a restriction for them to continue to participate. The hope is they have membership that represents the face of the community with regards to age, ethnicity, geographic diversity, and can also be dual members of OHP and Medicaid. Suggestions for recruitments are adults with children of OHP, adults with chronic medical conditions or physical disabilities and adults with mental health or substance abuse conditions. For community membership they are looking for individuals who are providers of service who represent early learning councils or other learning representatives, Latino communities, DHS, child welfare, County mental health, substance abuse programs, social service groups and other community support groups like advocacy and peer groups. The membership term is three years.

Pam questioned where Public Health would be represented. Rod noted that this is what is spelled out in the law for transformation.

Cary reported that there is going to be representation on all of those governing bodies that cross the committee. The selection will include a chair person and vice chair that serve on the governing board. The committee will meet every three months or more frequently as needed. The duties of the committee are to make recommendations to the board. The structure will be a voting structure. The selection committee will evaluate all applications. There will be a stipend available for consumer members which are noted on the application.

The CAC is modeled on the advisory bodies that OHA has. Cary reported the intention is to bring the consumer voice into the process.

The application for CAC was viewed and discussed by HAB members.

Rod reported Commissioner Carlson is the Marion County representative for the governing board.

A question was asked who the CAC report to. Rod reported that our CAC would report to Willamette Valley Community Health (WVCH) who reports directly to OHA. There will also be oversight from the Governor's office.

A question was asked if Cary knew who is on the selection committee. Cary reported they currently do not know who will be on the selection committee other than representatives from the governing board and members of the two counties are part of the governing board. Pam is on the nominating committee.

**Recommend HAB Bylaws to BOC for approval:**

John motioned to amend all changes made by the attorney and recommend HAB bylaws to BOC for approval, members voted and the motioned carried.

**MCHD Fees Presentation:**

Rod reported that counties have a responsibility to set fees at least once a year. We have set fees on a regular basis, and Ryan will describe this and the template that is used in his presentation. The BOC, local Public Health Authority and local Mental Health Authority need to approve those fees at least once a year. Rod discussed fee schedules and formulas with HAB members.

Ryan discussed fee templates, methodology and fee schedules that are included in his hand out. Ryan reported that the same template that is used for Public Health is also used for Behavioral Health and the proposed charges were presented to the BOC today.

WIC is excluded because they do not bill under the fee for service categories. All health departments use the same or similar methodology to establish a charge.

A question was asked if we ever receive full fee payments. Rod reported that we are more likely to get a full fee payment in methadone than anywhere else.

A question was asked if the cost of a provider includes pension and health costs. Ryan reported that it includes costs associated with that position including but not limited to PERS, medical benefits, administrative costs, etc. HAB members discussed fees.

**Announcement - Sue Blayre:**

Sue announced that LADPC subcommittee continues to meet regularly. Mary Beth has been invited to the next meeting and let HAB members know if they would like to attend, the meetings are open.

Sue also announced that effective July 15<sup>th</sup> she will no longer be working for the Marion County Sheriffs Office, she has resigned and will be relocating to Wyoming.

Sue spoke with her supervisor who assured her that if HAB members would like someone to come and speak on the SOAR program, they will make sure that happens.

Rod announced the District Attorney has been working with a group that Senator Winters called together about prescription drug abuse, Opioids and Heroin. This is a proposal of the new A&D problem that we should be addressing as a community. This was taken to the CFC as a new project. Sheriff Meyers spoke and said that we need to keep the focus on drug addiction and treatment and that we don't focus on what the specific drug is.

A question was asked if senior heroin users are more prevalent. Rod responded that there is an abundance of prescription drugs and when you run out it is a lot easier to get heroin then the prescription drugs.

John asked if there are any future topic suggestions, a suggestion was made to have a CCO update in September.

The chair motioned to adjourn, members voted and approved.

**HAB Meeting Adjourned.**

**Recorder:** Lisa Duerksen,  
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Marion County Health Department  
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<b>2012 Meeting Schedule:</b>	
January 17, 2012	June 19, 2012
February 21, 2012	September 18, 2012
March 20, 2012	October 16, 2012
April 17, 2012	November 20, 2012
May 15, 2012	December 18, 2012