



Meeting Minutes
The Board of Directors of
Columbia Pacific Coordinated Care Organization
Monday, July 20, 2026
Virtual Meeting

Board Members in Attendance: Janelle Adams, Jon Betlinski, Angelica Godinez Garcia, Eric Hunter, Molly Johnson, Monica Martinez, Gail Nelson, Meli Rose, Eric Swanson, Nicole Williams.

Board Members Absent: Pam Cooper, Sherrie Ford, Joe Skariah

Staff in Attendance: Nora Leibowitz, Chief Medicaid Programs Officer; Sarah Foote, VP Finance and Transformation; Mae Pfeil, VP CPCCO; Richard Edwards, Director Finance Business Partners; Heather Oberst, CPCCO Director Community Health Partnerships; Kelly White, CPCCO Director Regional Operations; Karla Niehus, CPCCO Governance and Grants Administrator

Guests in Attendance (Public Comment Section only): Amelia Kercher, Executive Director, Amani Center

Call to Order

The meeting of the Board of Directors (Board) of Columbia Pacific Coordinated Care Organization (CPCCO) was called to order by Williams at 9:34 a.m. A quorum was present. There were no declarations of potential or perceived conflicts of interest.

Member moment: White relayed a poignant story of a 10-year-old CPCCO member with a genetic neurodevelopmental disorder whose quality of life significantly improved as a result of the Coordinated Care model. Now with CPCCO, this youth's reliance on emergency care has been reduced, school and clinic services are coordinated, his home is receiving beneficial modifications, medication errors have been corrected, and he now has access to a communication assistance device. While he will always experience complex needs, access to CP's coordinated healthcare coverage is providing profound, life-changing effects for this boy and his family.

A. Consent Agenda

Upon a motion duly made and seconded, the following resolution was unanimously approved.

1. **RESOLVED** that the Board does hereby approve the May 18, 2026, meeting minutes as included in the materials.

B. Changes to Board

Upon a motion duly made and seconded, the following resolution was unanimously approved.

2. **RESOLVED** that the Board does hereby approve new board members Melissa (Meli) Rose and Gail Nelson.

C. Orientation Prior to Public Comment Period and Context for Scheduled Visitor

Amelia Kercher, Executive Director of the Amani Center, requested to address the board regarding her experiences with specific contracts for services to CP members. Pfeil explained the Public Comment rules as presented in the packet. If the board wishes to take follow-up steps, Pfeil will carry them out.

D. Public Comment Period

Kercher's statement outlined her struggles to navigate changes to various contracts with CareOregon. She expressed her dissatisfaction with the response and explanations from the Contracting staff regarding the contracts.

E. Debrief of Public Comment Period and Next Steps

The Board sought clarity regarding CP's delegation agreement with CareOregon. In response to questions, Pfeil clarified that the contracts presented by Kercher fall under CP's delegation agreement and therefore are the responsibility of CO's contracting department. A board member pointed out that CO *operations* fall outside the purview of the CP Board's *governance* responsibility. The Chair agreed and proposed drafting and sending a response that included clarity on the role of CP's Board and recommendations for pursuing resolution with CareOregon. The CP Board has neither the responsibility nor the authority to resolve operations issues. As a courtesy, the Board response will include guidance on Kercher's next steps. In the interest of ensuring appropriate service to CP members, an upcoming CP Board agenda will include an invitation to CO staff to provide explanations of how CO is covering delegated services.

F. Discussion and Engagement Items

Final MAG report

Hunter explained that the statewide MAG committee tasked to develop recommendations for the state's healthcare budget deficit was presented with a quantity of information and potential scenarios with little opportunity to supply input during meetings. While the committee did submit a report adhering to strict parameters for solutions, Hunter would welcome a more meaningful conversation that encompasses a holistic view of the system (with no programs

exempt from consideration) and therefore allowing space for more creative and effective solutions.

HR1 Update

While CP is clear on our upcoming role as synthesizer of information and system navigation, Pfeil reported that CP must still wait for significant direction on the details of our role from the state. Currently, bi-weekly work groups for transitioning The Healthier Oregon program to Open Card and HR1 consist primarily of posing questions that OHA is not yet able to answer. Delays to state guidance are due, in part, to Oregon's participation in a multi-state lawsuit against the federal government, asserting that federal guidelines are too vague for states to implement. By October, OHA must notify all members *potentially* affected by the new work requirements in effect on 1/1/2027. Most OHP members are not yet aware of changes coming to them, but much discussion is occurring at the county level.

HRSN update / nutrition benefit

Oberst reported on OHP's Health-Related Social Needs nutrition programs. Medically Tailored Meals, the first nutrition benefit to be made available in 2025, has been underutilized to date. This month, the Fruit and Vegetable benefit and the Pantry Stocking benefit were introduced on July 1. Oberst was glad to report that our network of local food providers is ready to meet anticipated regional needs in all three counties. The network can serve up to 4,000 members but, in less than a month, registration and utilization have not yet approached capacity. Awareness and registration are expected to increase as SNAP and other benefits decline for some members.

Hawks Eye Apartments Evaluation

Pfeil's slide deck gave an overview of an evaluation of the Hawks Eye Apartments project conducted by Providence CORE, with particular focus on the workforce housing aspect. A former Red Lion Hotel was purchased during the pandemic (2023) to become a shared-use apartment building: 38 units for workforce housing and 17 units for permanent supportive housing. Fortuitous aspects of the property, funding, staff expertise, partnerships, and positive public perception rendered the renovated building ready for occupation promptly by Fall 2023. Various challenges caused workforce occupation to lag behind the supportive housing units, which were occupied by spring. Expanded workforce eligibility and a change in management, among other measures, have brought Hawks Eye's affordable apartments to 94% occupancy, with a sustainable balance of costs and revenue. Currently, fewer than half of the 38 workforce units are occupied by healthcare/social services professionals. The model will continue to evolve as needed to best serve the residents, community housing needs, and achieve occupancy.

G. Committee Reports/Packet Review

Finance Committee

Edwards and Foote reported on April YTD Financials from CPC and CO perspectives. CPC investment income was higher than budget in April and remains a significant component of Net Surplus. It is too early to extrapolate performance for the year, but CO had a modest net surplus on the CPC line of business; a positive change from 2025. Staff reviewed the flow of CPC funding revenue (capitation and net investment income) in relation to expenses (CPC admin, Hawks Eye, grants, and surplus). Membership remains slightly below budget, particularly in HOP and BHP; however, favorable PMPM rates continue to offset the revenue impact of lower enrollment. Draft Reserve Level is positive. MBRs of all CPC benefits, including Behavioral Health and Dental, are currently in good positions. Hawks Eye is operating with a \$20,000 net surplus.

Clinical Advisory Panel

Kelly reminded the board that CAP membership of CAP draws from all three counties. Members from partnering organizations advise on quality of care and network adequacy. The June meeting focused on CP members living with alcohol use disorder (AUD) and barriers to serving these populations. Partners are noticing a widening gap between AUD diagnosis and engagement in treatment, due, in part to associated stigma. In response, health systems are strengthening screening, referral, and care coordination processes.

Member Voice and Equity Committee

Oberst reported on MVEC discussion about HR1. Counties will be working on member lists and data, desire for better connection across partners, and concerns for assistor capacity. CP will be responsible for network support, member enrollment and communication, with staff assuming an “all hands” approach. A key challenge is how to maximize impact with very limited resources, because OHA has no funding for member enrollment activity or mass communications.

H. Action Items

Upon a motion duly made and seconded, the following resolution was unanimously approved.

2. **RESOLVED** that the Board does hereby approve the April YTD Financial Report.

I. General Updates

Clatsop:

- Williams: Currently recruiting a medical director of robotics for the new hospital and another primary care physician for Seaside. The new hospital construction proceeds on schedule.

Columbia:

- Adams: WorkSource, serving members affected by the HR1 work requirements, looks forward to involvement in HR1 discussions.

Tillamook:

- Swanson: Four new operating room suites are now open. An open house will be held when the pre- and post-anesthesia areas are completed in the fall. Recruitment of another surgeon and additional physicians is successful with about a dozen new hires to begin soon.
- Nelson: Nehalem Bay Health Center received funding to expand BH support for licensed clinical social workers throughout our school district. Staffing update: A new Nurse Practitioner will join the team in August; recruitment for an additional dentist is underway.
- Godinez Garcia: A retirement celebration for Marlene Putman will be held at the public library 7/22, 3:30-5:30.

Regional:

- Rose: Iron Tribe is ready to begin serving members as an HRSN housing provider.

The next meeting of the Board will take place on August 17, 2026 (virtual, optional study session) or September 21, 2026 (hybrid meeting, Columbia County).

Meeting was adjourned at 11:01 a.m.