

Columbia Pacific Coordinated Care Organization (CPCCO)
Board of Directors Meeting
July 15, 2024 Meeting Minutes



The meeting was held in-person in Tillamook and via Microsoft Teams. Eleven of the fourteen Board members attended: Nancy Avery, Jon Betlinski, Pam Cooper, Sherrie Ford, Steven Manesis, Monica Martinez, Marlene Putman, Erin Skaar, Eric Swanson, Lena Walker and Nicole Williams.

The meeting was called to order at 9:32 a.m. with an established quorum. By a vote of the Directors present, the Board approved the June 17, 2024 Board of Directors meeting minutes.

1. County Trauma informed Networks Update

Angel Escobedo, CPCCO's Senior Program Development Manager, provided a recap and a look forward of the work to build multi-sector networks in Columbia and Clatsop Counties to improve trauma-informed care (TIC) practices and resilience-building strategies. This work started in 2014 and has continued to expand; Tillamook is now also building a network and strategic plan similar to the other two counties. Angel highlighted several of the many achievements of the networks, including: the Handle With Care initiative between schools and law enforcement for children who have been exposed to trauma; TIC trainings, assessments and supports for network organizations; leveraging \$140,000 of external funding; building a train-the-trainer program for 60 Resiliency Master Trainers; and family Hui groups with DHS which is an intervention for parents whose children are at risk of entering the child welfare system. Angel also shared information on the recipients of grants that were funded by the CPCCO Board, and noted work over the next two years, including formal launching of a network in Tillamook in 2026. The Board was interested in receiving data and metrics achievement for the networks.

Mid-Year CPCCO Work Priorities Check-In

Safina Koreishi, Rachel Paczkowski and Nancy Knopf presented updates on the CCO's 2024 work focused on network development, network supports, housing and social and community health. The term network is inclusive of physical/pharmacy, behavioral, oral and social health organizations. Highlights included the fragility of rural health, access to specialists, expansion of pharmacist services, the investments in capacity building for social safety net organizations to deliver new housing and nutrition benefits, initiatives to support and recognize workforce, and the new community and member priorities in our 2025-29 regional health improvement plan. Safina also shared an update on our 2023 Quality Pool metrics performance and the areas of improvement for 2024.

2. Committee Reports/Board Packet Review

Finance Committee. Highlights of the May 2024 YTD financial report included: membership composition is starting to shift from all OHP to 94% OHP, 4% HOP and 2% Bridge/BHP; 4% positive variance on capitation revenue as membership still exceeds forecast; estimated \$0 gainshare dollars due to medical expense increases; 7.2% Year Over Year increase in medical expense trends, with cost increase in all categories except referral services and dental; and 92% YTD MBR for CareOregon. Discussion focused on the difference between CareOregon Dental and the Dental Care Organization (DCO) financial performance.

The Board Packet also contained a \$500,000 funding request for a Manzanita Housing Development proposal that would create 60 new units of affordable housing. Discussion focused on the overall positive factors with this proposal, including prior work with the developer, and the longer-term plan of this project fitting into a comprehensive project for affordable, workforce and market rate housing.

3. Action Items

- a) By a vote of the Directors present, the Board accepted the May 2024 YTD Financial Report as reported.
- b) By a vote of the Directors present, the Board approved the staff recommendation to approve the Manzanita Housing Development funding proposal in full.

4. General Updates

Tillamook: Marlene noted the health department is moving forward with a new pharmacy in partnership with Genoa, expecting to be open at the end of the 2024; the health department is also completing all their strategic plans in August. Eric noted several items from Adventist: contribution to a new Healthcare Education building on the TBCC campus, opening in fall 2025; \$500,000 gift to the North Coast Recreational District for a treatment pool; five new behavioral health staff; groundbreaking for a new OR suite on the hospital campus; and strong interest from a non-profit dialysis provider to open services in Tillamook.

Clatsop: Pam noted excitement about the Hawk's Eye Apartments and the new Manzanita project; Providence is still recruiting new physicians. Steven noted that the North Coast Respite Center was able to retain their director and noted the excitement about the new CMH hospital ground-breaking later in 2024.

There being no further business to discuss, the meeting of the Board adjourned at 11:30 a.m.

Appendix

Mission: To inspire local connections that foster member health and community resilience

How does this new mission statement align with the work in our community?

- As a relationally focused organization, all of the work fosters connections!
- Funding for novel solutions, like Community Health Workers, pharmacists in primary care, community paramedic
- CAC work, community needs assessments
- Grant programs, and sponsorships that allow congregation and collaboration
- Integration with medical, behavioral, oral health, bi-direction referrals
- Preventive services in schools, dental van, transportation solutions, direct contracts with vision providers
- Risk share, data sharing agreements, rural health network/coalition
- Tillamook County Wellness
- Professionally and organizationally diverse BOD

Vision: Building equitable and sustainable access to quality healthcare and community services

What might we do over the next 3-5 years to make progress towards this new vision?

- Provider wellness, provider supports, recruitment support, partner with training to build local talent/providers, address burnout
- Cost-based reimbursement to retain local services (e.g., renal), local specialty services
- Widen population served, improve transportation services, improve referral systems, CIE
- Recruit diverse Board members
- More telehealth, Broadband/laptops, shared regional services (e.g., remote epidemiologist)
- New benefits (e.g., HRSN), climate, housing
- Language access, data segmentation to address equity/disparities, outcomes data to better focus resources
- New partnerships, e.g., educational, CBOs, dental solutions