

Columbia Pacific Coordinated Care Organization (CPCCO)
Board of Directors Meeting
July 17, 2023 Meeting Minutes



The meeting was held in-person and via Microsoft Teams in St. Helens. Twelve of the fifteen Board members attended: Nancy Avery, Jon Betlinski, Cathy Bond, Pam Cooper, Sherrie Ford, Eric Hunter, Steven Manesis, Viviana Matthews, Monica Martinez, Erin Skaar, Joe Skariah and Eric Swanson.

The meeting was called to order at 9:32 a.m. with an established quorum. June 20, 2023 Board Meeting minutes were approved by all Directors present.

Topics and Action Items

1. Equity Engagement: Social Determinants of Health (SDOH) and Who We Serve

Facilitated by CPCCO's EDI Manager, Kelly White, the Board reviewed the prior year's journey of the Equity Committee, including the Board Norms and Standards Assessment, Equity Committee goals and priority initiatives. Through break-out groups, the Board provided examples of what they mean by SDOH and the role of CPCCO in addressing those. The Board then heard portions of the 2023 Community Demographic Report as submitted to OHA, which included Census data on age, race/ethnicity, language, functional ability and houselessness data by county and against Oregon as a whole. In general, CPCCO's residents are older, more likely to have functional ability issues, and a larger and younger unhoused population than Oregon as a whole. The Board discussed the limitations of these data, but then reflected on how the demographics of the CPCCO communities spark different thinking about what/how CPCCO invests in to address community and individual needs as well as the barriers we face when doing so. See Small Group Breakout Notes appended to these minutes for specific details of each discussion section. The September meeting will be the joint meeting of the CAC leadership and the BOD, where the themes from the primary data collection through narrative stories will be shared. This will be the next step in centering the BOD in local data on community and member experiences and social needs.

2. Committee Reports

Finance Committee

Steve Geidl presented the April 2023 financial report noting the same themes as in prior reports: 1) membership is up, 2) utilization is still low, and 3) due to #2, financial performance is strong and leads to an expectation of gainshare for the year. Highlights included: preview that July membership has now exceeded 36,000, but he noted a downturn for the first time since August 2019 when membership was 25,000; operating and net income of \$637,000 and \$1,087,000, respectively, largely driven by positive investment income; cash and investment reserves of \$39 M, up from \$29 M in the prior year; projected SHARE commitment of \$1.9 M, with a reminder that this is a volatile number; 84% MBR for CareOregon, with a 16.7% positive Year Over Year medical expense trend. Almost all service categories show a rebound in increased YOY utilization trends. Discussion focused on an estimate of a 9% drop in enrollment with the redetermination process; concerns are that utilization will increase just as rates decrease in 2024. The Board asked for future information on enrollment trends by Category of Aid.

Governance and Compliance Committee

Mimi reminded the Board of the committee update in the Board Packet and also introduced the application of Dr. Lena Walker, representing Columbia County.

3. Open Meeting/Action Items

By vote of the Directors present, the Board approved the motion to accept the April 2023 financial report as recommended by the Finance Committee.

By a vote of the Directors present, the Board approved the election of Dr. Lena Walker to serve her first two-year term on the Board, as nominated by the Governance Committee.

4. General Updates

Columbia County: The Columbia County Fair is from July 19-23. Sherrie noted continued hiring of mental health counselors for the SBHCs, and that CHS will also provide mental health staff for the Jewell SBHC in Clatsop County. CCMH hosted the first Community Conversation About Behavioral Health, staffed by OSU-Extension. Mimi referenced the Jensen Partners study regarding feasibility of a new hospital in Columbia County: it is not feasible, although there are several recommendations to bring new services to the county to address higher acuity populations.

5. Tillamook County: Erin noted the County leased land to CARE to build low barrier/no barrier housing, funded by BHRN money, that will ultimately result in forty-six new beds, with an additional \$1.5 M in state funds to rehouse individuals. The Health Department is hosting a fentanyl awareness event in partnership with Clatsop County, called *Nachos and Narcan*, to increase distribution of naloxone across the community.

Clatsop County: Pam noted two new providers starting at Providence, one in primary care and one new general surgeon. Steven mentioned SETD will not be reinstating full bus service in Seaside; this was a result of misappropriation of funds by SETD. The state will not release additional loan funds to SETD until an audit is completed. Viviana noted an open house at Columbia River Inn in Astoria on 7/31, 12:30 p.m., a new housing facility for families and women.

There being no further business to discuss, the meeting of the Board adjourned at 12:02 p.m.

Small Group Breakout Notes
BOD Meeting, July 17, 2023

Examples of Social Determinants of Health (SDOH)

- Transportation, language, houselessness/housing insecurity, oral health, rent/utilities assistance, racial trauma (affecting access and willingness to participate in health care/social care systems), trauma (childhood vs adult), poverty and economic insecurity, disability, isolation, food anxiety, childcare access, family status, education, family resources
- Intersectionality an issue
- Difference between race (not a SDOH) and racism (is SDOH) because racism is a driver of health inequities
- Structural vs. individual SDOH (e.g. racial trauma)

CPCCO's Role in Addressing SDOH

- Financial supports, seed money
- Member Education
- Advocacy for policy change, promote awareness of needs/issues
- Convening partners and using our platform to highlight work of partner organizations
- Understand and articulate regional needs, including linking Board with local/state policy developments
- Direct services/warm handoffs to connect members to resources
- Formal relationships with community organizations
- Integration of clinical and community services via grants
- Two roles: member service and community solutions

Notable Comments from Demographic Data

- Age + disability of population may not align with focus on younger populations
- Need to note impacts of migration in and out of service area for specific demographic groups
- Prior census was politicized and discouraged participation by certain demographic groups
- Can't see underlying trends from prior to current census data
- English + Spanish speaking represent > 95% of total

Thinking Differently About CPCCO Investments

- Need to prioritize investments by teasing out the needs from data
- Be more proactive in funding unmet needs, using data, and monitor success
- More long-term/longitudinal investments for sustainability
- Universal design driven
- For workforce: partners to share/co-fund staff especially for scale
- Value data differently: account for locally collected data and include confidence levels
- Increase community connections and peer supports for members
- Increase funding accessibility for small organizations

What Barriers May Inhibit Ability to Meet Needs

- We can be big and slow, inhibiting right funding at right time

- Data is reliably incomplete: we don't know what we don't know
- Money is limited and tracking/reporting may be impede
- Needed partners don't exist or don't have capacity
- Economies of scale
- Workforce recruitment/retention and meaningful roles
- Regulatory requirements limit what we can do
- Can be misalignment between individual and community needs; do we really know member needs and experiences