

Columbia Pacific Coordinated Care Organization
Board of Directors Meeting: June 17, 2013
Summary Discussion

The meeting was held in St. Helens, Columbia County. Sixteen of twenty Board members were present.

Discussion Topics:

1. Early Learning Council Hubs and integration opportunities with the Columbia Pacific CCO. There are numerous overlaps between the objectives and measures of the hubs and the CCOs, creating numerous opportunities for local investment in community initiatives that will improve child health and school readiness.
2. Alcohol and Drug Residential Services. The management of this benefit becomes an accountability of the CCOs starting July 1st. CCO members may be placed in any of the approximately 300 beds around the state, creating new challenges for care coordination, patient placement and management. GOBHI will contract with Columbia Pacific to manage the benefit on the CCO's behalf, starting in July.
3. Clinical Advisory Panel update. The Columbia Pacific CCO Clinical Advisory Panel (CAP) is well represented across the disciplines, including physicians, behaviorists, a clinical pharmacist, nurse practitioner, clinical quality improvement nurse and dentist. Current focus is on three strategies: 1) achieving necessary improvements in clinical Incentive Measures required by the state; 2) reducing unnecessary utilization by patients with frequent ED visits and/or hospital admissions; and 3) achieving desired goals in three Performance Improvement Projects. The PIPs include timely prenatal care including depression and substance use screening, reducing opiate prescribing and addictions, and improving rates of developmental screenings for children up to age 3.
4. Community Advisory Councils update. The 4 local Community Advisory Councils are working on formalizing membership and starting on review of existing community health needs assessments in each county. The Councils will also do baseline community surveys of health needs and issues in July. Each local council is also nominating representatives for a Regional Council that will coordinate the work across the CCO service area.
5. Finance update. The Board discussed the current financial reports for the CCO.
6. Integration status. The Board discussed the variety of models being pursued across the CCO focused on integration of behavioral and medical care within and across clinics. All are complicated by the billing and payment rules imposed by federal and state governments.

Education Sessions:

1. The Board of Directors received training on their fiduciary responsibilities for an effective CCO Compliance Program as well as the new Omnibus HIPAA rules governing protection of Personal Health Information (PHI). The Board approved a resolution appointing the CCO's compliance officers, naming the CCO Compliance Committee and requesting development of a comprehensive compliance program.
2. The Board heard a presentation about Oregon Health CO-OP, the Oregon Health Insurance Exchange (Cover Oregon), and the interplay between Medicaid and non-Medicaid adults who will be eligible for coverage effective January 2014.