

Columbia Pacific Coordinated Care Organization
Board of Directors Meeting: October 21, 2013
Summary Discussion

The meeting was held in Portland. Sixteen of the twenty Board members were present.

Discussion Topics:

1. Annual Meeting. The annual meeting of the Board of Directors was deferred from September to this meeting due to the CEO absence last month. Board members were asked to review the Conflict of Interest policy and sign a statement regarding any potential conflict. Nine of the 20 Directors were nominated and elected to a second term on the Board of Directors; their terms will end September 2015.
2. Compliance Program and Privacy Report. The CCO's Compliance Officer and Information and Security Officer presented the Columbia Pacific CCO Compliance Program for Board approval. The Program meets the criteria established for effective ethics and compliance programs contained in the Federal Sentencing Guidelines adopted by the Office of the Inspector General of DHHS and by the Centers for Medicare and Medicaid Services. The Board approved the CCO's Compliance Program.
3. Clinical Advisory Panel/Finance Committee Work Session Report. The Board discussed the outcomes from a joint work session held in early October. Among other topics discussed were funds flows from the state to the CCOs and on to providers, how to further develop integrated care models for patients best served in either primary care or behavioral health homes, and alternative financing models to support outcomes rather than fee-based visits.
4. Finance update. The Board discussed the current financial reports for the CCO.
5. OHA's Health System Transformation Funds. The CCO's proposal was submitted to the state to receive the first installment of the \$1.4 million grant funds. The expectation is that the state will be able to disburse the funds for budgeted projects by early December, at the latest. While this submission needed to reflect the programs that are ready for immediate funding, it also included placeholders for additional programs that will be vetted and submitted with additional budget information to OHA later.
6. Community Advisory Councils. The CCO's four Councils collaborated widely with community organizations to distribute surveys for community member input into what constitutes health, what the most prevalent health issues are in each county, and what improvements each community should focus on. The survey information will be presented in final form to each of the four local Councils in November. There will also be public meetings scheduled in each community to present the high level indicators of health focus areas based on survey results.