



The Underpinnings of a Rural Health Transformation

2026 EOCCO SUMMIT

October 16, 2026

100 Rural Hospitals in U.S. Closed since
2005

89 More Ceased Inpatient Care

20 Extra Miles to Access Routine Care

40 Extra Miles to Access Specialty
Services

Rural **Emergency, Maternity Care** and
Specialty Services Especially Impacted

Our Engagement with EOCCO

- In addition to Oregon's innovative CCO model, identify the **key factors that help EOCCO defy rural and frontier health care trends** in the U.S.
- Examine the **overarching structural and cultural factors** that power EOCCO.



We Started with a Hypothesis:

WHAT EOCCO does
and **HOW** it works is
qualitatively different and a
model for the future of
healthcare.

OUR DISCOVERY PROCESS

- **Reviewed EOCCO Documents, Structure, Reporting**
 - Financial
 - Health Outcomes
 - Board Presentations
 - Summit Presentations
 - Community Communications
 - Patient Communications
- **Reviewed Website and Public-Facing Content**
- **Attended Meetings:** Owner's Retreat, EOCCO Summit, Clinical Advisory Panel
- **20+ Interviews**
 - Founding Stakeholders
 - Owners
 - Providers
 - Leadership
 - Staff
- **Reviewed the CCO Landscape**
 - 15 other CCOs in Oregon
- **Drove 2000 miles of EOCCO territory**



What We Learned

ESTABLISHED THOUGHTFUL GOVERNANCE MODEL

We set it up right.

The structure proposed for EOCCO was exactly what we were looking for.

Moda was happy to NOT be a majority owner.

EOCCO's secret sauce is simple, there is not competition, everyone must win.

Every entity has a stake.

EOCCO was built on a very innovative model because none of the owners are direct competitors.

I am most proud of our new collaborative model with the payor that is patient centered.

Without local investors, you don't get true local focus...we live here!

EOCCO COLLABORATES (WE DON'T COMPETE)

Competing hospitals did not play 'nice in the sandbox' initially.

EOCCO is very close to their people and incredibly collaborative.

If membership is up and access is good at your hospital, then we could learn something from you (as a fellow owner).

There's total transparency between the owners.

None of the providers are competitive and we have the right partner in Moda.

EOCCO flipped like a dime during the pandemic (when patients were not going to the hospital) to keep providers solvent by quickly moving to a capitation model.

EOCCO CARES

To EOCCO's credit, they just do a better job and help patients. They're not just here to take money.

I am most proud of the fact that we have improved the health status of Eastern Oregonians, full stop.

What is different about EOCCO is that we start by asking, what do you need in your healthcare?

Most CCOs think about making money first and then helping patients. EOCCO thinks about patients first and then figures out how to make the money work.

Leadership really cares about the population we serve.

EOCCO SHOWS UP (IN OUR COMMUNITY)

When you have seen one county, you have seen one county. EOCCO respects hearing from each county.

I am most proud of how much we are in the community.

Patients aren't patients; they're our neighbors, teachers, friends.

The underserved stay underserved if you don't understand the local community.

You can't serve a community you don't know.

EOCCO LISTENS AND FOLLOWS THROUGH

Showing up and then following through, locally, is so important.

Providers know EOCCO will solve a problem...providers favorite insurance is now Medicaid.

There's something about having a partner (Moda) who thinks about EOCCO all the time...they nurture the whole CCO.

They have a willingness to ask: 'what do you need'?

A lack of bureaucracy allows things to happen.
Communities see that we can deliver for them.

I'm blown away by EOCCO's hands-on approach. They're not afraid of getting their hands dirty and doing the hard things.

EOCCO INVESTS IN OUR COMMUNITY

We signed 5 family physicians with investment we got from EOCCO.

We are the only CCO that funds local CACs.

During the pandemic, rural hospitals were really struggling. EOCCO changed to a capitation model which allowed money to flow back to the hospitals

EOCCO has allowed us to open two new clinics.

EOCCO pushed control to the local level...closer to the customer means meeting needs better.

(Through EOCCO) We can stabilize an independent rural hospital for decades.

During the pandemic, EOCCO put money back into the communities while others put it into their reserves. This kept hospitals alive.

We put nutritionists on staff, hired community health workers, and built onsite pharmacies.

We have used distributions from EOCCO to incent hiring new PCPs.

EOCCO is very focused on getting money back to the community. We are the only CCO to do so. The result: we don't have any problems recruiting and retaining PCPs.

EOCCO FOCUSES ON PRIMARY CARE

EOCCO is the most invested in primary care of all the CCOs.

EOCCO has differentially invested in primary care.

EOCCO's focus on primary care helped PCPs feel less like a 'cog in the wheel' and instead valued contributors to serve their patients.

About 50% of our shared resources are going into primary care.

EOCCO FOSTERS LOCAL INNOVATION

We have pushed control to the local level so we can better understand patient needs.

EOCCO has funded ideas we wanted to try...services like our Medical-Legal Partnership that would not have otherwise happened.

Innovation happens at the community level and EOCCO sparks that.

CACs are the ones that have the creativity; that is by design.

EOCCO DOESN'T ACT LIKE OTHER ALLIANCES

As a provider, I am proud of the trust within EOCCO.

It's unheard of that you have an insurer supporting the provider.

The PCPs know that if they have a problem, they can work with EOCCO to get it resolved.

It does not feel like a normal insurer-provider relationship.

Leadership put on lots of miles to build EOCCO.

EOCCO leadership was a convener that helped us have relationships with other hospitals.

I've never encountered a partnership with a commercial carrier that cared about rural healthcare...until now.



It's Your EOCCO.

**Here's a flavor for
what we heard
about it.**

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EOCCO on film

A vertical bar on the left side of the slide, composed of several colored rectangular segments: light green, dark green, light orange, dark orange, dark grey, and dark brown.

EOCCO in print

Questions