

**MINUTES OF THE MEETING
OF THE BOARD OF DIRECTORS OF
Eastern Oregon Coordinated Care Organization, LLC
(EOCCO)**

**January 30, 2025
The Moda Tower
601 SW Second Avenue
24th Floor Boardroom
Portland, OR 97204
And Teleconference**

BOARD MEMBERS PRESENT:	Bob Seymour, Robin Richardson, Harold Geller, Ann Ford, Oceana Gonzales-Banuelos, Dr. Liz Powers, Alisha Lundgren, Chris Siegner, Christy Trotter, Chanel Kelly, Art Mathisen, Shawn Gee, Lannie Checketts, James Williams, Dan Grigg, and Dr. Curtis Peters.
OTHERS PRESENT:	Robert Gootee, CEO Moda Health, Dave Evans, Sean Jessup, Kraig Anderson, Summer Prantl Nudelman, Courtney Valenzuela, Mikayla Briare, Mina Zarnegin, Joe Greenman, Nick Gross, Kayla Jones, Mark Danburg-Wyld, Greg Hansen, Emma Loftin, Bill Dwyer, Jenna Grantham, Dr. Holly Jo Hodges, ODS Community Health. Dr. Chuck Hofmann, EOCCO clinical consultant; Dennis Burke, EOCCO, consultant; Landon Dybdal, Heidi Martinez, Lake District Hospital; Yami Gonzalez Perez, OHA Innovator Agent; Ken Hart Valley Family Health Care, Dina Ellwanger and Tony Swart St Alphonsus Hospital, Melissa Thompson, Lourdes Reyna Alcalá, and Steve Manesis GOBHI; Jamie Poindexter, CommonSpirit Health; Rebeckah Berry, The Roundhouse Foundation; Al Barton, Mid-Columbia Center for Living; Catherine White, Harney District Hospital; Chantay Jett, Wallowa Valley Center for Wellness; Nic Powers, Winding Waters Clinic.
WELCOME AND INTRODUCTION:	EOCCO Board members and guests briefly introduced themselves. Robert Gootee remarked that EOCCO is an amazing organization that brings this broad and diverse group representing different organizations across a geography of hundreds of miles. He offered a history and overview of Oregon's Medicaid CCO program. Next, he discussed the current challenges, which include OHA's requirements and the rate development process. Mr. Richardson addressed other

	issues, such as how the lack of access in Oregon’s rural and frontier areas constitutes EOCCO’s leading health equity issue.
CALL TO ORDER:	Mr. Richardson called the meeting to order at 11:04 AM.
APPROVAL OF MINUTES:	Upon a motion by Mr. Geller and seconded by Dr. Powers, the Board unanimously approved the minutes of the meeting of the Board of December 20, 2024, a copy of which was provided to the Board in advance of the meeting.
CEO UPDATE:	Mr. Jessup provided an overview of key EOCCO operational highlights. OHA rate development problems were the primary driver of EOCCO’s 2024 financial results. This will result in a goal of 2025 break-even performance. Finally, we will need to closely monitor federal Medicaid policy this coming year to inform our business strategy in the coming years. Mr. Richardson gave a short presentation on ideas to promote greater engagement with the EOCCO board members.
OHA PROGRAM UPDATES:	Ms. Gonzalez Perez provided an overview of numerous Oregon Health Authority program initiatives potentially impactful for Coordinated Care Organizations. OHA is currently deeply engaged in the 2025 Oregon legislative session and is dealing with daily legislative hurdles. OHA is excited about its expansion of regional health equity coalitions. CCOs will receive performance snapshots next week, which is a real-time performance assessment including network adequacy, member rights and health equity, and financial performance. OHA plans to meet with each CCO to review the findings. Ms. Gonzalez Perez believes that EOCCO will receive generally favorable reviews. The rough draft showed that EOCCO has a high level of financial performance. Mr. Richardson asked what advice she could give the EOCCO board from her perspective at OHA. Ms. Gonzalez Perez answered that EOCCO should continue doing what it is doing and draw on the internal strengths that it has developed. EOCCO does exceptional work despite being a smaller CCO. Mr. Richardson responded that high on our mind is the problem of OHA rates - is it helpful if our board members voice their concerns individually? Ms. Gonzalez replied, “Yes.” At OHA, the leadership and decision makers are used to CCO pushback, but having contact with individual providers and consumers can have a greater impact.

	Dr. Hathi's listening session was a good demonstration of this point, as some of those meetings mirrored concerns being heard from the CCOs. Messaging from the local level can capture agency leadership attention differently.
ODS COMMUNITY DENTAL UPDATE:	Mr. Hansen provided a presentation on the state of Medicaid dental rates. Over several years, the dental rates have been reduced significantly. Mr. Burke commented on discussions he has had about dentists avoiding participation in CCOs. They are concerned that a lack of access would run the risk of being overrun by Medicaid patients accompanying any decision to offer OHP provider services - they want to explore limited access contracts. Mr. Hansen answered that we do contract with dentists who are interested in limited participation. Mr. Burke said that the dentists are not aware of this, and Mr. Hansen acknowledged that getting the word out on this is one of our biggest challenges. Mr. Richardson asked Mr. Peters what his advice is for our dental efforts; Mr. Peters answered by advising the importance for recruitment of specialists and dentists. Dr. Powers asked what the plan is to expand access to anesthesia related to dental care. Mr. Hansen indicated that we are expanding services in this way. Ms. Trotter commented PNW University in Yakima is opening a dental school to get more dentists in rural settings. There may be opportunities to fund scholarships.
LEGISLATIVE UPDATE:	Ms. Barichello, Vice President at Moda Health, was introduced and announced her expanded role that now includes government relations. She provided an update on legislative bills potentially impacting EOCCO. Some of the issues that we are closely tracking are the reauthorization of the premium provider tax and the improvement of Medicaid dental rates. Mr. Richardson added that the state budget is the key to everything else that happens in the legislature. We also need to be active with our local legislators. Dr. Hoffman suggested having an EOCCO legislative day. Mr. Richardson added that we need to testify on legislation on a more regular basis. Mr. Williams mentioned the association of counties as an additional resource. Mr. Geller asked whether all the CCOs might join together in a full-court press. Sean responded that getting all of the CCOs to agree and get on the same page can be a challenge, but common issues do emerge.

ENROLLMENT DEMOGRAPHIC CHANGES:	Mr. Anderson provided a presentation on EOCCO membership dynamics and ongoing enrollment trends. The Board provided input on new services geared to assisting new types of enrolled members. Dr. Powers mentioned that she sees her 65+ patients losing their Medicaid - why? Ms. Grantham answered that those members received their redetermination late in the process. Dr. Powers added that she is seeing the SPMI population in residential facilities experiencing this. Ms. Gonzalez Perez interjected that there are policy change proposals around looking at income and asset determinations for this population. Ms. Jett mentioned that they have received resources to help patients with financial planning to offload assets using trusts to avoid eligibility problems.
FINANCIAL UPDATES:	Mr. Evans provided a financial update, starting with EOCCO's invested assets. Mr. Kalina from RVK co-presented and provided an overview of the investment policy allocation. Upon a motion by Mr. Seymour and seconded by Mr. Williams, the Board unanimously approved EOCCO's investment transactions for Q4'2024. Upon a motion by Dr. Powers and seconded by Mr. Seymour, the Board unanimously approved EOCCO's 2025 proposed investment policy (no changes). Mr. Evans next provided an overview of EOCCO's financial forecast for 2025. We expect continued member growth, but unfavorable OHA rate setting will result in roughly flat revenue. Reinsurance will increase: we have an outlier claim at Seattle Children's Hospital, with the claim cost running \$88K per day. Upon a motion by Mr. Checketts and seconded by Dr. Powers, the Board unanimously approved EOCCO's 2025 proposed financial forecast.
2025 GLOBAL BUDGET:	Ms. Jones provided an update on 2025 EOCCO cost-saving initiatives. Mr. Siegner asked about how out-of-area provider cost savings will play out. Mr. Jones answered that WA hospitals drive most of this expense. We have historically used the OHA FFS rates, which are no longer sustainable. It is expected that OHA will change the regulation to some percentage of the Medicare rates. Dr. Hoffman asked what our leverage is with the out of area providers in getting better rates. Ms. Jones answered that this process will be challenging. Mr. Richardson added that care has to go across state lines in our geography, and we need to speak up about this issue because OHA

	is not giving us appropriate credit for these costs. Ms. Grantham provided an overview of EOCCO's 2025 global budget. Ultimately, this process consists of how we take OHA revenue and divide it equitably between the service lines. Dr. Powers asked why the PMPM for dental seems grossly inadequate. Ms. Grantham responded that a lack of benchmarking of rates risks eroding the dental network. CCOs obtained the dental populations because OHA failed to maintain a dental network. Underfunding dental services creates a vicious cycle where network gaps undermine member utilization, and OHA cuts rates further due to declining utilization. Upon a motion by Mr. Seymour and seconded by Mr. Gee the Board unanimously approved EOCCO's 2025 proposed global budget capitate rate changes.
PUBLIC COMMENT AND ADJOURNMENT	Mr. Jessup directed the board's attention to some additional materials in the board packet (informational items). The meeting was adjourned.



Secretary