MINUTES OF THE MEETING
OF THE BOARD OF DIRECTORS OF

Eastern Oregon Coordinated Care Organization, LLC

(EOCCO)

October 23, 2025
Eastern Oregon University
One University Boulevard
Hole Union Building Multipurpose Room 339
La Grande, OR 97850
And Teleconference

BOARD MEMBERS PRESENT:	Robin Richardson, Al Barton, Alisha Lundgren, Curtis Peters, Harold Geller, Ann Ford, Oceana Gonzales-Banuelos, Chanel Kelly, Dr. Liz Powers, Shawn Gee, Lannie Checketts, Jeremy Davis, James Williams, Dan Grigg, and Christy Bracewell Trotter, Art Mathisen.
OTHERS PRESENT:	Sean Jessup, Summer Prantl Nudelman, Joe Greenman, Nick Gross, Sare Crowell, Kayla Jones, Emma Loftin, Courtney Valenzuela, Kali Paine, Jenna Stevens, Mina Zarnegin, Holly Jo Hodges, Dave Evans, ODS Community Health. Dr. Chuck Hofmann, EOCCO clinical consultant; Dennis Burke, EOCCO, consultant; David Rollins, Grande Ronde Hospital; Bob Houser, Morrow County Health District/Pioneer Memorial Hospital; Ken Hart and Sarah Ludovic, Valley Family Health Care; Nic Powers, Winding Waters Clinic; Dina Ellwanger, St Alphonsus Hospital; Landon Dybdal Lake District Hospital; Jamie Poindexter, St. Anthony Hospital.
WELCOME AND INTRODUCTION:	EOCCO Board members and guests briefly introduced themselves. Mr. Richardson provided welcoming remarks and thanked everyone for taking the time to be in attendance.
CALL TO ORDER:	Mr. Richardson called the meeting to order at 11:06 AM.
APPROVAL OF MINUTES:	**Upon a motion by Mr. Geller and seconded by Mr. Davis, the Board unanimously approved the minutes of the meeting of the Board of May 16, 2025, a copy of which was provided to the Board in advance of the meeting.**
ANNOUNCEMENTS:	Dr. Hodges and Ms. Valenzuela provided a briefing and recap of the EOCCO Summit held on September 18 in Pendleton. This was a free event hosted by EOCCO to help connect professionals providing services to EOCCO members. Dr. Hodges shared that

	the event was recorded and available for public viewing. Mr. Burke stated that the first session of the day's events was fascinating and encouraged everyone to watch it. Dr. Hodges added that the MOUD testimonials were not recorded, but Dr. Hoffman provided a short overview of those testimonials and how impactful they were as statements on behalf of the program.
LCHP/CAC UPDATES:	Ms. Reyna Alcala provided an update on recent activities of the EOCCO CAC. The CAC welcomed Jasmine Sanchez as the first CAC youth member, and they are working to fill other positions. They have received briefings from OHA on the State Health Improvement Program, including updates on state initiatives and the impacts of HR1 on Oregon's Medicaid program. Ms. Lundgren extended her thanks for helping Ms. Sanchez join the CAC. Mr. Richardson thanked Ms. Kelly for chairing the CAC.
CEO UPDATE:	Mr. Jessup began his update with a briefing on the latest information on the 2025 financial landscape for CCO and the 2026 state rate-setting process. In 2025, CCO losses were significant. Initially, OHA was proposing an aggregate CCO rate increase of 3.4%. After prolonged advocacy, the CCOs were able to persuade OHA to increase those aggregate rates to 10.2%. Ultimately, part of that increased rate will be partially funded and offset by a reduction in the 2025 and 2026 quality pool. Each CCO then had its individual costs benchmarked for resulting in an 8.9% 2026 rate increase for EOCCO. Mr. Jessup shared that he believes that the OHA benchmarking methodology is incorrect and does not accurately reflect EOCCO costs. A final late change that will increase the rate to an increase of 9.3% for 2026, resulting from our continued advocacy and actuarial analysis. Finally, Mr. Jessup shared that a Rural Maternity Investment is budgeted by OHA in 2026 and that should benefit EOCCO's service area. Ms. Trotter asked about our plan to manage costs associated with high-cost drugs. Mr. Jessup responded that we will implement case management procedures using OHA criteria. Mr. Richardson commented that we have never had an organized ask for our advocacy, meaning Fawn Barrie helps us arrange standard talking points for all of our board members and supporters to use when talking to local legislators. Governor Kotek is convening an HR1 advisory committee chaired by Dr. Goldberg.

	Mr. Richardson emphasized our need to advocate for our rates to receive adequate rate increases over the coming three-year period to bring rates back to a sustainable level to support the work that EOCCO does in the community.
FINANCIAL UPDATES:	Mr. Evans provided an overview of EOCCO's balance sheet and P&L statement through September 30, 2025. Revenue on the year is up by 1% resulting from increased membership. Claims costs have increased by 4% and our MLR is higher in 2025. Positive investment returns have helped offset reductions in income from operations. Mr. Evans next provided an overview of the plan to dissolve Summit Health Plan, including related financial arrangements between EOCCO and Summit. **Upon a motion by Mr. Geller and seconded by Mr. Davis, the Board unanimously approved the Guaranty Agreement with Summit, a copy of which was provided to the Board in advance of the meeting. Upon a motion by Mr. Geller and seconded by Mr. Peters, the Board unanimously approved the dissolution of the Surplus Note between EOCCO and Summit. Upon a motion by Mr. Grigg and seconded by Ms. Kelly, the Board unanimously approved EOCCO's investment transactions for Q2 and Q3, 2025. Upon a motion by Mr. Gee and seconded by Mr. Geller, the Board unanimously approved the independent audit appointments of EOCCO with Jim Brown from the Portland office as financial auditor and Kumar Kanisan from the Chicago office as actuarial auditor.**
BOARD APPOINTMENT:	Mr. Richardson introduced Al Barton. Mr. Barton is the CEO of the Mid-Columbia Center for Living. Mr. Barton has extensive experience in providing mental health services. **Upon a motion by Ms. Ellwanger and seconded by Mr. Davis, the Board unanimously approved the appointment of Al Barton to the EOCCO Board.**
COST SAVINGS UPDATE:	Ms. Jones provided an update on the progress of previously identified cost savings goals. In the aggregate, EOCCO has achieved nearly 50% of the cost savings goal. Mr. Grigg asked whether we could ever have Co-pays for the ED. Ms. Jones indicated that state policy prohibits this, and OHA is unwilling to change this policy at this time. Mr. Richardson shared that this presentation doesn't describe all of the

	cost savings efforts, and these initiatives will continue to be a priority.
COST DRIVERS:	Ms. Stevens provided an actuarial analysis of EOCCO's drivers of cost trends. Key factors addressed included large claims, OHA fee schedule increases, out-of-state hospital expenses, cost-based facilities, and the impact of the PHE unwinding and trends in increased population acuity.
2025 P&L, CAPITAL AND RBC FORECAST:	Mr. Evans and Ms. Stevens turned next to an overview of the 2025-year-end forecast and RBC projections. These projections included various financial management options for forecasting the end of 2025 accounting of EOCCO. One option presented was the use of quality dollars to support EOCCO income and capital. Mr. Grigg shared some concerns with using quality dollars as a fiscal support to improve losses. He indicated that this is similar to what OHA is doing to improve CCO rates throughout the state. Mr. Powers indicated that the quality dollars are tied to metric-based incentives, and those could be deemphasized with reduced funding. Mr. Evans acknowledged that this is essentially using quality dollars to replace reduced premiums on a short-term term temporary basis. In the end, this is an option that will increase our projected RBC to 280%, which is much closer to our target goal. Mr. Geller indicated that he is impressed with the presentation and agrees that these are difficult choices.
GRANT COMMITTEE 2026 CBIR FUNDING RECOMMENDATIONS:	Dr. Hoffman provided an update on the CBIR process and timeline. He next shared how the committee undertakes its review and recommendation process before providing the recommendation to the Board for approval. **Upon a motion by Mr. Peters and seconded by Mr. Grigg, the Board approved the CBIR funding recommendations, as provided to the Board in advance of the meeting, with Ms. Lundgren abstaining.**
PRIMARY CARE CAPITATION:	Ms. Jones provided an overview of EOCCO's history of evaluating and compensating primary care services under a capitated model. This presentation outlined what has been learned from this initiative and upcoming changes to enhance performance and engagement with providers.
2026 PRIMARY CARE BEHAVIORAL HEALTH INTEGRATION UPDATE:	Ms. Prantl provided an overview of EOCCO's history of integrating behavioral health services. This presentation included what has been learned with this initiative and upcoming changes to improve

	performance and engagement with the providers to better ensure accurate reimbursement. Starting in 2026, we are changing several aspects of this reimbursement methodology. Mr. Powers asked about what the timeline is for this change. Ms. Prantl responded that 1/1/26 is the implementation date. Ms. Stevens added that for some clinics, this will be an increase in reimbursement because they are serving a significant portion of our members. OHA is increasingly disallowing these types of encounters as non-medical expenses and not applicable to rate setting.
PUBLIC COMMENT AND ADJOURNMENT	Public comment was announced and offered by the chair. No public comment offered. Mr. Richardson added as a final note that we plan to develop talking points for Board members when communicating with members of the legislature to champion the EOCCO cause and advocate for improved reimbursements for services. The meeting was adjourned.

Secretary