



Community Advisory Council Meeting Minutes

Wednesday, April 30, 2025 · 12:00 – 1:00pm

Time zone: America/Los_Angeles

Google Meet joining info

Video call link: <https://meet.google.com/pwq-oxtx-aqw>

Or dial: (US) +1 574-404-7860 PIN: 401 737 124#

More phone numbers: <https://tel.meet/pwq-oxtx-aqw?pin=9499081723435>

Attendees:

EOCCO CAC Member Roll Call

Wheeler County: Elaine “Ellie” Bray, **Wallowa County:** Ted Thorne, **Union County:** Commissioner Matt Scarfo, Diana Elledge, Winnie Andrews, **Umatilla County:** Morgan Linder, **Confederated Tribes of the Umatilla Indian Reservation (CTUIR):** Maurice Bronson, **Malheur County:** Oceana Banuelos Gonzalez, **Morrow County:** **Sherman County:** **Lake County:** Bailey Guido, Commissioner James Williams, Iris Contreras, **Harney County:** Jennifer Williams **Burns Paiute Tribe:** , **Grant County:** , **Gilliam County:** Chanel Kelly, Bonnie Kraxberger, Lisa Helms **Baker County:** Albert Rowley, Kristina Gueli, Chastity Anderson

EOCCO: Marci McMurphy, Lourdes Reyna, Rosalie Kelly, Britney Garcia, Norman Valdez, John Lucero, Summer Prantl, Yami Gonzalez

Guests: Karen Mathson, Rosa Armeta,, Tasha Robinson, Sarah Hartenstein Wheeler County Public Health, Jody Warnock Community in Action, Amy Bell, MCHD, Jameela Norton (OHA HTO),, Amanda Tran, Rebecca ,

TOPIC	DISCUSSION	ACTION ITEM
Welcome Roll Call and Introductions	<p>Maurice Bronson called for a motion to approve the February meeting minutes. Albert Rowley motioned, Jennifer Williams seconded the motion. The motions passed</p> <p>For those joining virtually it was requested to please put their name in the chat:</p> <p>Jennifer to Everyone 1:03 PM I can hear now, thank you! Jennifer Williams Harney County</p> <p>Summer Prantl, EOCCO to Everyone 1:04 PM Summer Prantl, EOCCO</p> <p>You to Everyone 1:04 PM</p>	<p>Motion: Rowley / Williams motion to approve the meeting minutes. The motion passed.</p>

	<p>Rose Kelly, GOBHI</p> <p>Rebecca Stricker, MCHD to Everyone 1:04 PM (Edited) Rebecca Stricker, MCHD</p> <p>Tasha Robinson, EOCCO to Everyone 1:04 PM Tasha Robinson, EOCCO</p> <p>Amy Bell 1:05 PM Amy Bell, Advantage Dental Jody Warnock, Community in Action, Malheur and Harney Counties</p> <p>Karen Mathson to Everyone 1:05 PM Karen Mathson, Union County, consumer</p> <p>Rosa Armenta to Everyone 1:05 PM Rosa Armenta - Regional Outreach Coordinator with the Community Partner Outreach Program. Covering Umatilla, Morrow, Union and Wallowa counties.</p> <p>Jennifer 1:05 PM I 2nd</p>	
<p>Healthier Together Oregon (HTO)</p>	<p>Healthier Together Oregon: What are your health priorities?</p> <p>Oregon Health Authority (OHA) State Health Assessment (SHA) State Health Improvement Plan (SHIP) Presentation by Jameela Norton, who is the lead for SHA/SHIP Steering Committee and Community Engagement. She introduced her team Cinita Vimieiro, Healthier Together Oregon Strategist, Victoria Demchak - Lead for the State Health Assessment (SHA), and Dulce Sanabria - Strategic Initiatives Coordinator.</p> <p>Jameela presented on the State Health Improvement Plan (SHIP). The SHIP is a roadmap that outlines strategies to address our state's biggest health priorities. It informs policy, partnerships, and investments for OHA and other state agencies in alignment with OHA's Strategic Plan. At the end of May, Jameela's team will be meeting and would like your input on the priorities. These include institutional bias, adversity, trauma, and toxic stress, behavioral health, economic drivers of health, such as housing, transportation and living wage jobs, and access to equitable preventive health care.</p>	

The feedback they have received from staff & partners is that the priorities were important but challenging to accomplish with the resources available. They would like to see clearer priorities, and identify what they can do.

What should our new priorities be? They worked with the steering committee and OHA to come up with a new plan. There are limitations to what they can do, and it was important to acknowledge this and be transparent. Coordinated Care Organizations (CCOs) must choose 2 SHIP strategies to work on.

After meeting with community partners they came up with 7 priorities. They have two URLs one for Spanish and one for English to complete a survey.

Draft Priorities

1. Healthy environment
2. Emergency preparedness and response - building relationships before the emergencies happen
3. Health across the lifespan
4. Disease prevention and health promotion
5. Physical, mental, community safety
6. Mental well-being and behavioral health
7. Equitable social conditions.

The physical, mental, community safety priority came from contact with community partners reaching out to them.

Mental well-being and behavioral health priority - the role of public health is continuing to invest and promote mental and behavioral health.

Equitable social conditions - they are trying out language they heard that the Social Determinants of Health people had some issues with.

Jameela presenting slides of each of the above numbered priorities. She asked for feedback from the CAC.

Feedback:

- Equitable social conditions - equity it is important to make language easy for our community, community social conditions was suggested.

- Youth and child care - a lot of these overlap with our youth, mental health and safety. Priority is social emotional health so we can address it over more than one category.
- Emergency preparedness & response should be more than earthquakes, school shootings, and fire. It should include things like having a pharmacy close down. Figuring it out before it happens. Having a quick acting team who can pull the right people in to cover or have a conversation about it.
- Equitable social conditions: Could this give EOCCO permission to use funds for things like the VeggieRx program, or expanding amenities, food insecurity - is a public health topic that both the government and health providers should be looking at. Housing and promoting ways to decrease homelessness? Oregon is trying to be thoughtful and use the resources we have like health insurance to help with homelessness. Give our CCO's some directions. Funding our preschool initiatives. Using our power to fund HRSN to prioritize.
- Would this include access to oral health - yes. That is something that Eastern Oregon needs to call out specifically.
- We would like youth to be part of the process and engage them. Youth have a different way of talking about health. We need to approach teens to get those voices. They need to know access information.
- Provide more outreach to youth who are transitioning out of high school. They aren't familiar with their insurance, or where they can find resources. This is a barrier. After school you don't see them at the doctor's office. If they were more familiar with the process it would help them know what the opportunities are available. It is important for the providers to be visible to the youth so they feel comfortable getting services. Youth need to know their options.
- Exposure to electronic screens (phones, tablets etc) - early childhood education is talking about screens. This is leading to children disconnecting and not learning how to interact.
- Rise of homelessness - which affects your mental and physical health. A higher percentage of people relapse. Nobody has resources. During disasters there aren't

	<p>resources. I see focus on preventing homelessness now, because once you are out there you're on your own.</p> <ul style="list-style-type: none"> ● Issues with people coming out of high school with no work history. ● People who are corralled into apartment complexes don't have advocates when that isn't working out. ● If we don't set up our youth for success the impact will be greater down the road. ● NEMT is there an age limit? People with small children and infants lack the ability to utilize the transportation services. In some communities there is limited staff to provide transportation. Perhaps a shuttle to the treatment areas to provide childcare for parents who need to go to the doctor. ● How do we provide support for people coming out of rehab? There is a serious need for daycare. We hear about people who don't have childcare and/or they don't have a ride. We need more resources for parents. Suggestion of a parent support group, possibly providing incentives for them to attend. <p>Jameela thanked the group for letting her share and their input.</p>	
<p>SHARE - Lourdes Reyna Alcala</p>	<p>Lourdes presented on 2025 Supporting Health for All through Reinvestment (SHARE) Initiative. The SHARE Initiative provides funding for projects that address Social Determinants of Health & Equity (SDoH-E) with a priority on housing. The awards range from \$15,000 to \$250,000. Projects can take from 1 to 3 years. These funds should primarily benefit EOCCO members, and they must align with the EOCCO Community Health Improvement Plan (CHIP).</p> <p>This year, 30 applications were submitted asking for around \$4.7 million. There were applications from all 12 counties in EOCCO, and some covered more than one county. The LCHP reviewed, scored and recommended the applications first. Then after reviewing all the applications the CAC Subcommittee recommended 16 of them at a cost of around \$2.2 million. These include submissions from 11 of EOCCOs 12 counties.</p> <p>Lourdes presented each project and reviewed the CAC Subcommittee recommended applications.</p>	<p>Motion: Gueli / Bronson motion to approve the recommended SHARE applications. The motion passed.</p>

	<p>Next these will go to the EOCCO Board of Directors for final approval. The applicants will be notified sometime in June 2025, and projects will begin October 1, 2025.</p>	
<p>EOCCO Community advisory Council - Tash Rbbinson</p>	<p>Tasha Robinson provided a brief overview of the incentive measures for 2025. Each year the Oregon Health Authority (OHA) selects measures with targets to see how well Coordinated care organizations (CCOs) are doing to improve member care, make quality care accessible, eliminate health disparities, and curb the cost of health care. CCOs are awarded funds from a quality pool based on their annual performance. EOCCO uses funds to pay providers quality bonus payments, enhance Patient-Centered Primary Care Home (PCPCH) payments, and fund Community Benefit Initiative Reinvestment (CBIR) grants.</p> <p>2025 Incentive Measures:</p> <p><i>Claims Based Measures</i></p> <ul style="list-style-type: none"> ● Childhood Immunization Status Combo 3 ● Health Assessments for Children in DHS custody ● Immunizations for Adolescents ● Initiation and Engagement of Substance Use Disorder (SUD) treatment ● Oral Evaluation for Adults with Diabetes ● Preventive Dental Services for ages 1 to 14 ● Well-child Visits for ages 3 to 6 ● Child-Level Social-Emotional Intervention/Treatment Services <p><i>Chart Review/Hybrid Measures</i></p> <ul style="list-style-type: none"> ● Timeliness of Postpartum Care ● Meaningful Language Access to Culturally Responsive Health Care Services ● SDOH: Social Needs Screening & Referral <p><i>Clinical Quality Measures</i></p> <ul style="list-style-type: none"> ● Depression Screening and Follow-up ● Diabetes HbA1c Poor Control <p>Tasha showed slides on the target OHA had set, our progress so far this year, and compared it to last year's measures at this time.</p>	

	<p>The final performance numbers will be released in June or July.</p> <p>Tasha shared postpartum resources - cribs for kids and safe sleep kits. Please email EOCCOMetrics@modahealth.com for forms. Baby Care Kits are also available for EOCCO parents, clinics, and organizations. Here is a link to request the kit: https://www.eocco.com/news/2022/Baby-Care-Kit</p> <p>Organizations will have to track their distribution of kits annually using this form: Baby Care Kit Tracker Form</p> <p>If you have questions email EOCCOMetrics@modahealth.com or reach out to Tasha: Tasha Robinson, EOCCO 2:20 PM Tasha.Robinson@modahealth.com or EOCCOMetrics@modahealth.com</p>	
<p>OHA Updates - Yami Gonzalez OHA</p>	<p>Yami shared some updates from OHA. There is an opportunity from OHA for community-based organizations interested in providing equity health access clinics. Yami will send the information out.</p> <p>The new CCO contract with OHA has been delayed for two years. This impacts members because things can be added or removed. For a lot of the social needs we are seeing in our community please utilize the HRSN climate benefit and EOCCO flex program.</p>	
<p>CAC Member Comment & Feedback - Maurice Bronson</p>	<p>We have a client we have seen who is having issues with NEMT. She will go to the walk-in clinic. Her neighbor takes her to these appointments. She is usually sick for a couple of days afterwards. She'll call NEMT to ask them for reimbursement for her neighbor. If she doesn't call them quickly she can't get reimbursement, and now the neighbor doesn't want to take her. Lourdes asked her to send the information to her and she will follow up. Marci commented if you call the next business day that is okay.</p> <p>Issue with members who aren't on EOCCO from another county but have moved to the county temporarily for three months. They can't get health care while they are here. Is there a way to work that out?</p> <p>Summer asked Rebecca to email her so she can get more in-depth information to work it out. Summer Prantl, summer.prantl@modahealth.com</p>	

	<p>Providers are scarce and access is hard. Her son had a mental health crisis and still hasn't seen a provider. They have done the evaluations and done the work but still haven't gotten an appointment.</p> <p>Social needs nutrition benefit where medically tailored meals are delivered. It has been discussed in the LCHP meetings. There was no problem seeing the dietician, but they didn't know how to do the program. EOCCO was supposed to be setting up a meeting to train the dieticians on how to handle this in the beginning of April. Did that happen? One member is waiting to be approved. The dietician and the doctor felt she needed it, but no one knew how.</p> <p>NEON is the provider who is working on this program. They should keep in touch with them. NEON has 45 days to respond. The main number is 541-624-5101. Emily Miller, 541-980-8807 works on nutritional support.</p>	
Next Meeting	Wednesday, June 11, 2025- Meeting will be virtual	
Adjourn	Meeting minutes submitted by Rosalie Kelly	