

**MINUTES OF THE MEETING
OF THE BOARD OF DIRECTORS OF
Eastern Oregon Coordinated Care Organization, LLC
(EOCCO)
June 5, 2023
Wildhorse Resort & Casio
46510 Wildhorse Blvd. Pendleton, OR 97801
And Teleconference**

BOARD MEMBERS PRESENT:	Robin Richardson, Harold Geller, Christy Trotter, James Williams, Dr. Renee Grandi, Karen Wheeler, Christopher Zadeh, Larry Davy, Lannie Checketts, Jim Schlenker, Oceana Gonzales-Banuelos, Alisha Lundgren, Diana Elledge, and Dr. Curtis Peters.
OTHERS PRESENT:	Dave Evans, Sean Jessup, Kraig Anderson, Dr. Yale Popowich, Kayla Jones, Summer Prantl Nudelman, Bill Dwyer, Mina Zarnegin, Kali Payne, Audrey Thomas, Mark Danburg-Wyld, Joe Greenman, Dr. Holly Jo Hodges, Courtney Valenzuela and Jenna Grantham, ODS Community Health; Dr. Chuck Hofmann, EOCCO clinical consultant; Ken Hart, Valley Family Health Care; Bob Seymour, Grande Ronde Hospital; Cam Marlowe, Blue Mountain Hospital District; Charlie Tveit, Lake District Hospital; Yami Gonzalez Perez, OHA Innovator Agent; Ari Wagner and Lourdes Reyna Alcala, GOBHI; Dennis Burke, EOCCO Consultant, Dan Grigg Harney District Hospital. Paul McGinnis, Dina Ellwanger, Nic Powers, Kimberly Lindsey, Steven Jensen, Priscilla Garcia, Ben Murray, John Shafer, Kylie Thorne, Mike Erickson, Shana Alexander, Martha Snow, Kerry Plunkett, Sheri Selander
WELCOME AND INTRODUCTION:	Mr. Richardson welcomed everyone and requested that EOCCO Board members and invited guests introduce themselves. Mr. Richardson thanked the guests representing the Yellowhawk Tribal Health Center for taking the time to attend the meeting.
CALL TO ORDER:	Mr. Richardson called the meeting to order.
APPROVAL OF MINUTES:	Upon a motion by Dr. Grandi and seconded by Mr. Davy, the Board unanimously approved the minutes of the meeting of the Board of February 8, 2023, a copy of which was provided to the Board in advance of the meeting.
OHA PROGRAM UPDATES:	Ms. Gonzalez Perez began her presentation with an update on OHA’s planning for the conclusion and

	<p>unwinding timeline of the federal Public Health Emergency. The PHE concluded in May and SNAP emergency allotments expired in March. SNAP phase-out exemptions and reinstatements of baseline program policies resume throughout June and July. Beginning in April, OHA began processing the first Medicaid renewals. The timeline of ongoing renewals was presented. Temporary Medicaid expansion is available until July of 2024 when OHA anticipates the full initiation of the Oregon Basic Health Plan. OHA is currently working with CMS and Treasury to finalize details for a mid-2024 launch that minimizes disruption to individuals in the marketplace. Mr. Richardson asked Ms. Gonzalez Perez what OHA management thinks of the redetermination numbers so far in the process. Ms. Gonzalez Perez answered that the numbers observed to date are somewhat more favorable for maintaining coverage than they initially expected. Ms. Wheeler asked why Malheur County’s SNAP benefit for able-bodied adults is different. Ms. Gonzalez Perez did not know the reason for counties with different policies but she thought it had something to do with how the employment is structured in various parts of the state. She will follow up. Mr. Richardson reminded the Board that CCOs will collaborate with OHA to administer the Basic Health Plan in their respective CCO service areas, including EOCCO.</p>
<p>EOCCO LCHP/CAC UPDATES:</p>	<p>Ms. Elledge provided the board with a brief update sharing that the CAC is working on reviewing and assessing funding decisions for health promotion initiatives in local communities.</p>
<p>REDETERMINATION STRATEGY AND ENROLLMENT FORECAST:</p>	<p>Ms. Zarnegin first provided a summary of past EOCCO membership trends and how the redetermination process is likely to alter those trends. At present day, membership continues to grow incrementally even though redetermination is taking place in the background. Mr. Marlowe asked whether EOCCO is doing anything with its partners to help the ineligible population find and obtain new coverage. Ms. Zarnegin replied that EOCCO has implemented strategies to assist members with non-Medicaid coverage. Mr. Jessup said that EOCCO staff actively helps members navigate coverage options. Mr. Anderson next provided an actuarial analysis of the impact of redeterminations on EOCCO enrollment. The headline number of the analysis is that we expect</p>

	EOCCO to have a total number of 70,000 members by January 2025. This would constitute a membership reduction of 8,000 members from current enrollment. There is also an estimated additional 2,000 members via “full” Basic Health Plan eligibility enrolment.
CORPORATE GOVERNANCE ANNUAL DISCLOSURE (CGAD):	Mr. Greenman provided an update to the board regarding EOCCO’s legally required Corporate Governance Annual Disclosure submitted to OHA. A copy of the CGAD was circulated to all Board members.
FINANCIAL UPDATE & ACTUARIAL UPDATES:	Mr. Evans began by presenting EOCCO’s financial results. Enrollment growth continues to cause underlying revenue growth. Net income performance has improved in 2023 due to improved return on investment income. Mr. Evans next shared the final calculation of EOCCO’s SHARE Initiative obligation for contract year 2022. The expected obligation total is \$1,870,000 which is slightly lower than our initial estimate because EOCCO’s RBC came in slightly lower than expected. Mr. Evans next turned to EOCCO’s investments. Upon a motion of Ms. Wheeler and Seconded by Ms. Elledge the Board unanimously approved the EOCCO investment transactions for Q1 of 2023. A question from the floor asked whether OHA has indicated whether it might reconsider its required RBC levels for CCOs. Mr. Richardson answered that this seems unlikely because OHA plans to launch the BHP with the help of CCOs next year and the BHP will be structured more like an insurance product which will require initial reserves for implementation.
2022/2023 SHARED SAVINGS MODEL PERFORMANCE UPDATE:	Mr. Danburg-Wyld shared the results of the 2022-2023 shared savings model. After accounting for IBNR, final surplus amounts will be paid to providers in the fall under the terms of EOCCO’s shared savings model.
EOCCO COST AND UTILIZATION UPDATE AND PCP SCORE CARD:	Mr. Dwyer presented highlights of data from the EOCCO cost utilization dashboard. Cost growth was highest for inpatient, professional, and mental health services which is mostly administered by GOBHI for behavioral health. ED utilization continues to trend up while pharmacy utilization has been essentially flat. Mr. Dwyer next presented EOCCO’s planned primary care scorecard that assesses PCP performance against a benchmark trend.
BOARD MEETING STIPEND DISCUSSION:	Mr. Jessup previously discussed this topic during the February meeting. The intent of a stipend is to provide

	<p>some share of reimbursement of the cost of Board members to attend in-person EOCCO Board meetings. A stipend could be paid to a Board member or the Board member’s organization as reimbursement if the organization pays member costs to attend as an employee of the organization. Ms. Trotter commented that the tax implication of stipend payments is the responsibility of the member. Ms. Elledge asked if the intent of the stipend was to pay the cost of the hotel and mileage. Mr. Jessup said yes.</p> <p>Upon a motion by Dr. Grandi and seconded by Ms. Elledge EOCCO unanimously approved paying stipends of up to \$400 per Board member upon request to reimburse reasonable transportation costs of attending EOCCO Board meetings in person.</p>
<p>2023 SHARE RECOMMENDATIONS:</p>	<p>Ms. Prantl Nudelman provided an overview of EOCCO’s obligation to the Supporting Health for All Through Reinvestment (SHARE) program. Share requires CCOs to invest a percent of profits into community health. OHA's priority is housing initiatives. All counties in EOCCO’s service area will receive SHARE funding. EOCCO booked \$1.87M from financial results as its share obligation. EOCCO’s formal proposal is \$1.95M in SHARE funding, \$77k over the \$1.87 obligation. If a CCO exceeds the SHARE minimum OHA does not credit the overage toward any future year of SHARE spending. Upon a motion by Dr. Grandi and seconded by Mr. Zadeh, EOCCO unanimously approved the 2023 total SHARE spending allocation recommendation.</p>
<p>WORKFORCE DEVELOPMENT UPDATES:</p>	<p>Dr. Hoffman began this presentation by providing an update on EOCCO’s efforts to fund Eastern Oregon University scholarships. EOCCO will fund up to 3 yearly \$10,000 scholarships for both undergraduate Anthropology/Sociology and Psychology students for a period of 5 years (\$60,000 each year x 5 years = \$300,000). Students can apply up until September 1st and then the University will recommend awards based on the students' applications. Dr. Hoffman next provided an update on the Psychiatric Mental Health Nurse Practitioner Training Program. In 2022, EOCCO awarded \$50,000 for the program to match an OHSU Foundation grant of \$50,000 resulting in a total of \$100,000. Next, Ms. Valenzuela provided CHW promotion and Healthcare interpreter updates. Since</p>

	<p>the program's inception in 2016, OSU has trained over 370 CHWs and contributed over \$1m to the program's success. In 2022, EOCCO saw over 22,000 encounters billed by CHWs. EOCCO will continue to provide technical assistance to clinics and CBOs to improve billing and reporting rates. The Health Care Interpreter training program launched in January of 2023 with 24 students in the first cohort. All students received a scholarship that covered 100% of the course tuition and materials. Finally, Ms. Wagner provided GOBHI's behavioral health workforce campaign update, including videos of the campaign.</p>
PUBLIC COMMENT:	<p>Mr. Richardson invited public comment and there was none. Ms. Elledge shared her appreciation for the CAC's support of GOBHI's BH efforts. Ms. Wheeler shared that the GOBHI board has committed \$500k to scholarships.</p>
ADJOURN:	<p>There being no further business, the meeting was adjourned at 3:03 PM</p>

Thomas J. Bekke

Secretary