MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS OF

Eastern Oregon Coordinated Care Organization, LLC

(EOCCO)

November 5, 2020 Teleconference only due to COVID-19

| BOARD MEMBERS PRESENT: | Dr. Bruce Carlson, Lannie Checketts, Jeremy Davis, Larry Davy, Harold Geller, Oceana Gonzales- Banuelos, Dr. Renee Grandi, Diane Kilkenny, Carlos Olivares, Dr. Curtis Peters, Robin Richardson, Chris Siegner, Brian Sims, Alisha Southwick, Karen Wheeler, James Williams and Christopher Zadeh. |
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| OTHERS PRESENT: | Mark Danburg-Wyld, Dave Evans, Debra Florence, Sean Jessup, Kayla Jones, Marilyn McGraffin, Astrid Sosa and Summer Prantl Nudelman, Moda/ODS Community Health. Dr. Chuck Hofmann, EOCCO clinical consultant. Bob Seymour, Grande Ronde Hospital. Charles Tveit, Lake District Hospital. Troy Soenen, Jeanne McCarty, Jill Boyd and Ari Basil Wagner, GOBHI. Glenn Davis, Yakima Valley Farm Workers Clinic. Estela Gomez, EOCCO Innovator Agent. Jenny Word, Wallowa Memorial Hospital. Paul McGinnis, Lake Health. Derek Daly, Blue Mountain Hospital District. Dan Grigg, Harney District Hospital. Priscilla Lynn, Saint Alphonsus Medical Center. Bob Houser, Morrow County Health District. Martha Snow, ORPRN. Kristi Lapp, Linda Hettinga and Ethel Hogge, YellowHawk Tribal Health Center. Jenn Goodman, Union County. Chantay Jett. |
| WELCOME AND INTRODUCTION: | Mr. Richardson welcomed everyone to the teleconference Board meeting. Mr. Richardson announced the retirement of Ms. Kilkenny. He thanked her for her dedication to EOCCO and the people of Eastern Oregon. He noted that a gift was being arranged for her as a token of EOCCO's appreciation for her service. |
| CALL TO ORDER: | Mr. Richardson called the regular session of the meeting to order. |

| APPROVAL OF MINUTES: | Upon a motion by Mr. Geller and seconded by Ms. |
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| | Wheeler, the Board unanimously approved the |
| | minutes of the meetings of the Board on July 23, 2020 |
| | and August 19, 2020. |

APPOINTMENT OF NEW MEMBERS:

Mr. Richardson introduced two of the new Board members representing the Saint Alphonsus Health Medical Center and Good Shepherd Health Care System, respectively.

Mr. Checketts introduced himself and his background with Saint Alphonsus Health System. He spent time in both California and Iowa before returning to the system as the CFO. He thanked the Board for their warm welcome and said he looked forward to working with everyone.

Mr. Sims introduced himself and explained that he recently transitioned from Unity Point Health in Iowa to fill Mr. Burke's shoes after his retirement. He noted his appreciation for the work done by his predecessor and thanked the Board for the opportunity to serve the people of Eastern Oregon in an additional capacity.

Mr. Jessup introduced Dr. Peters, an Eastern Oregon dentist to fill the vacant DCO position on the Board. He discussed the recruiting process and noted the importance of and desire to fill the role with a practicing dentist.

Dr. Peters explained that he was excited to join the Board and noted that his clinic sees 60-70% EOCCO Medicaid patients. He explained that he had seen the benefits that EOCCO has brought to the region in his nine years of dental practice in Baker County.

Upon a motion by Mr. J. Davis and seconded by Mr. Zadeh, the Board unanimously approved the following appointments of: (i) Mr. Checketts to represent Saint Alphonsus Medical Center; (ii) Mr. Sims to represent Good Shepherd Health Care System; and (iii) Dr. Peters to the DCO representative position.

Mr. Richardson welcomed all three members to the Board and thanked them for their participation on the Board.

| OHA PROGRAM UPDATES: | Ms. Gomez presented the OHA updates. She walked through the various upcoming OHA trainings available to providers. |
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| | She noted that OHA has had ongoing open sessions to discuss updates on the COVID situation throughout Oregon. She explained that there were new requirements in place regarding COVID testing, details of which were included in her report included with the Board materials. |
| | Ms. Gomez indicated that the Oregon Health Authority Transformation Center offers a variety of training for CCOs and providers in the community. She noted that the trainings were targeted towards individuals involved with quality metrics and improvement initiatives and encouraged individuals to participate if feasible. |
| RCAC UPDATE: | Ms. Southwick provided an update on the activities of the RCAC and its recent collaboration meeting. |
| | The December RCAC meeting will focus on health equity and various options for operationalizing resources in the various Eastern Oregon counties. Further, the meeting will discuss social determinants of health which will be the major focus for each of the LCACs future plans. |
| | She noted that the Gilliam County LCAC was looking for mobile dentist coverage as it would expand access to certain challenges to meet sectors of residents. Mr. Jessup confirmed that ODS Community Dental, one of EOCCO's subcontracted DCO, should be able to assist with a resource. She noted she would pass this information onto the Gillham County LCAC so it could coordinate as needed. |
| EOCCO BEHAVIORAL HEALTH PLAN, CCO 2.0 REQUIREMENTS: | Ms. Wheeler presented the Board with GOBHI's 2020 endeavors to ensure compliance with the new CCO 2.0 Behavioral Health requirements. |
| | She explained that the Comprehensive Behavioral Health Plan was a new requirement, whose evaluation criteria and requirements had not yet been released by OHA. While the OHA has not released the requirements, she noted the CCO contract focuses on |

alignment between the CCO's Behavioral Health Plan and the local mental health authorities.

In furtherance of said alignment, Ms. Wheeler explained that GOBHI intended to hold three listening sessions via virtual platform (morning, afternoon and evening). She noted that GOBHI would also meet with Behavioral Health consumers in the region. GOBHI extended invitations to tribal partners for the listening sessions and intended, if desired, to host a session specifically for the tribal communities.

Ms. Wheeler asked for feedback from the Board on how it, and the groups the Board represents, would like to be engaged to provide input in the development of the Behavioral Health Plan. She outlined the intended structure of the Behavioral Health Plan. She noted that it would highlight specific ethnic groups based on the results of the outreach. Further, GOBHI intended to address care coordination with existing medical providers that ensured comprehensive care across all modalities for members in need. She advised the Board that it could provide input during or after the Board meeting.

Mr. Checketts inquired as to the size of the lift on the new comprehensive plan requirements in comparison to the work that GOBHI routinely undertook under the previous regulatory requirements. Ms. Wheeler advised that the Behavioral Health Plan represented a significant amount of work on a very condensed timeline, if OHA does not adjust the deliverable dates. She advised that, ideally, the information gathering and Behavioral Health Plan development would be conducted over a six month timeframe after the requirements were released. Ms. Wheeler advised the Board that, under the current OHA timeline, it would be condensed into two months over the holidays.

Ms. Wheeler explained that GOBHI had also received a significant Substance Use Disorder grant that it is also working on over the next year.

Mr. Richardson thanked the members of the Yellow Hawk tribes who joined the call.

ENROLLMENT AND BUDGET UPDATE:

Mr. Jessup presented EOCCO's enrollment numbers as of November 2, 2020 and summarized the enrollment trends throughout 2020 impacted by COVID.

Mr. Jessup advised that the state of emergency had been extended until early January. As a result, OHA continued to suspend the eligibility redeterminations process. Given the continued suspension, Mr. Jessup expected EOCCO to experience temporarily elevated enrollments into 2021. The enrollment numbers would likely return to normal mid-year 2021, settling around 56,000.

Mr. Jessup explained that OHA had put together a long-term budget work group at the state level to address anticipated financial deficits in the Medicaid budget. Mr. Jessup was asked to represent EOCCO as a participant in the work group. He commented that the numbers in the presentation do not account for the tobacco tax which recently passed during the most recent election. The tobacco tax would reduce the anticipated Oregon Medicaid budget deficit indicated in his presentation.

He provided an overview of the various options to address the deficits and explained the limitations posed by the OHA that would influence the potential options.

FINANCIAL UPDATES: Mr. Evans presented current EOCCO financials as of September 30, 2020. He noted that assets were up and that the rate reduction from OHA had been added effective in October.

Mr. Evans explained that he and his team are evaluating options for additional investments given EOCCO's cash holdings. He advised that his team was carefully watching the markets given the election and the potential for significant market fluctuations.

He noted that EOCCO's current RBC level was in excess of the requirement set by OHA for the end of 2020 of approximately \$4.4 million. He explained that the anticipated 2020 capital call to the owners would not be required if things remained stable the remainder of the year. On the P&L, EOCCO's revenue was up with utilization being suppressed by the COVID pandemic. He advised that it was possible that utilization in 2021 may be above projections to account for deferred care as a result of the pandemic.

Overall, EOCCO's financial situation was strong and performed better than expected given the current climate. The MLR performed above expectations, which resulted in additional savings to EOCCO. He noted that every one percent change in MLR represents approximately \$3 million in revenue.

Mr. Evans provided a brief summary of the basic components of the RBC and the calculation methodology. Mr. Richardson noted that the RBC requirements under 2.0 are higher in Oregon than in any other state for Medicaid. He reminded the Board that these funds cannot be used for any other purposes and must be held in reserve. He noted that a capital call was made in 2019 to meet the RBC requirements, but was optimistic that additional calls would not be necessary as given EOCCO's current financial performance. He reminded the Board that the RBC number was fluid, meaning that as enrollment increases, the required RBC amount also increases.

PROVIDER PAYMENTS: Mr. Jessup summarized the payment of the 2019/2020 quality fund amounts to providers approved at prior meetings of the Board. He noted that the checks were cut and providers should have received the payments.

ACTUARIAL UPDATES: Mr. Danburg-Wyld provided an overview of the 2020 retro rate adjustments made by OHA due to the COVID pandemic. He explained that the population that comes on and off the rolls frequently were, generally, healthier than the population that maintains consistent enrollment on OHP. OHA, given the suspension of eligibility redeterminations, adjusted the rates to account for the overall healthier than predicted OHP population. After the previous EOCCO Board meeting, OHA further revised the acuity adjustment due to a miscalculation. He explained that this resulted in a revised rate adjustment of approximately 1.2% to EOCCO, with an average reduction of 2.2% across all CCOS. Mr. Richardson reminded the Board that a 1% rate reduction results in a decrease in revenue of \$3 million.

Mr. Danburg-Wyld presented the overall change in the 2020 per member per month amounts attributable to both administrative and claims expenses. He noted that the Board previously approved a rate changes to EOCCO's subcontractors as well as a change to the various claims funds within the 2020/2021 shared savings model. Given the decrease in the rate reduction, Mr. Danburg-Wyld recommended that the Shared Savings Model revert to the original approved amount. He advised that EOCCO could adsorb the smaller loss in the general claims fund and overall EOCCO profitability.

Upon a motion by Mr. Siegner and seconded by Mr. Davy, the Board unanimously approved the proposed rates for the 2020/2021 shared savings model and claims fund to account for the reduced rate decrease.

Mr. Danburg-Wyld presented the comparison of the preliminary 2021 OHA rates and the final, revised 2020 rates. He noted that the average increase across all CCOs was 3.3%. EOCCO was on the lower side of the spectrum at 1.7%.

Mr. Danburg-Wyld noted that OHA acknowledged that the overall rate setting process was disadvantaging CCOs that performed well and successfully contained costs by giving smaller rate increases or rate holds to these CCOs. To rectify the issue, OHA intends to reward CCOs which demonstrate successful cost containment strategies with performance-based rewards commencing in 2022 on a yearly and three-year rolling basis. OHA provided projected results to CCOs which demonstrated the outcome of the anticipated program using 2019 data. Mr. Jessup noted that the finance team was evaluating how to ensure that all of EOCCO's community-based health investments were counted towards these measures and ultimately the performance-based rewards.

Mr. Richardson reminded the Board of SB 889, currently under evaluation that limits commercial insurers to a 3.4% growth rate. The rate would, over time, reduce to 3.0%. He advised that the Board should keep an eye on SB 889 as it was likely to be carried over to the Medicaid budget in the future.

Mr. Richardson and Mr. Jessup discussed the various aspects of the rate setting process. They noted the current barriers to EOCCO receiving full credit for all of the community health-based investments in the current rate setting process. They noted that the executive team was evaluating the new rules to ensure EOCCO receives full credit for these investments under the new requirements.

Mr. Danburg-Wyld presented an update on the revised YVFWC pilot program. He explained that it generated savings in a year where EOCCO's overall shared savings model struggled. He noted that there were some challenges to set the rate and budget for the program given that it was a new program.

He presented the components of the 2020/2021 revised YVFWC pilot. He explained that a set, pre-determined budget was not necessary and could be extended to other PCP groups in the future.

COMMUNITY BENEFIT INITIATIVES: Ms. Snow presented an overview of EOCCO's grant funding process and the disbursement of funds across award types and counties. For 2019, EOCCO funded grants totaling \$1.35 million.

These funds cover approximately 8,200 members and 14,600 non-members were served by the various grants issued by EOCCO.

She summarized the results by opt-in projects while comparing the results against the identified quality measures for 2019. She covered each program and the overall ROI for the grantee's actions. She noted that the programs that demonstrated positive ROI tended to focus on a specific cohort of members instead of general population measures.

Ms. Snow shared several success stories from the grant programs. It included submissions by the grant

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recipients detailing how the grant program impacted each member's life. She noted that some of these stories demonstrate the importance of multi-faceted solutions to addressing social determinants of health.

Dr. Hofmann presented the Board with the recommendations for the 2021 grant program. He provided an overview of the funds currently in the various funds that comprise the grant program overall. He explained the four new opt-in categories proposed for the 2021 grant cycle. He noted that there were no changes being proposed to the LCAC projects. For the new ideas fund, he outlined the two new recommended programs which focus on social determinates of health and health equity. For public health department grants, the grant requirements remain unchanged.

Upon a motion by Dr. Grandi and seconded by Mr. Geller, the Board unanimously approved rescinding the policy to suspend all grant funding for social determinants of health and health equity proposals.

Further, upon a motion by Ms. Wheeler and seconded by Mr. Williams, the Board unanimously approved the Grant Subcommittee proposals for the 2021 EOCCO grant program.

APPOINTMENT OF TREASURER: Upon a motion by Mr. Geller and seconded by Mr. Sims, the Board unanimously approved the appointment of Mr. J. Davis as treasurer for EOCCO.

PUBLIC COMMENT:

INFORMATIONAL REPORTS & UPDATES:

ADJOURN:

Mr. Richardson opened the meeting for public comment. There being none, Mr. Richardson moved onto informational reports and updates.

Mr. Jessup walked through the reports that were provided in advance of the meeting.

There being no further business, the meeting was adjourned.

Assistant Secretary