

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

**April 16, 2020**

**Teleconference only due to COVID-19**

**BOARD MEMBERS  
PRESENT:**

Dennis Burke, Dr. Bruce Carlson, Jeremy Davis, Larry Davy, Harold Geller, Dr. Renee Grandi, Ken Hart, Diane Kilkenny, Carlos Olivares, Robin Richardson, Chris Siegner, Karen Wheeler and Christopher Zadeh.

**OTHERS PRESENT:**

Mark Danburg-Wyld, Dave Evans, Debra Florence, Sean Jessup, and Marilyn McGraffin, Moda/ODS Community Health. Dr. Chuck Hofmann, EOCCO clinical consultant. Bob Seymour, Grande Ronde Hospital. Charles Tveit, Lake District Hospital. Troy Soenen, GOBHI. Derek Daly, Blue Mountain Hospital District. Dan Grigg, Harney District Hospital. Glenn Davis, Yakima Valley Farm Workers Clinic. Estela Gomez, EOCCO Innovator Agent. Ray Gibbons.

**WELCOME AND  
INTRODUCTION:**

Mr. Richardson welcomed everyone to the teleconference Board meeting. He thanked everyone for their patience in working with the video conference format.

**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 Dr. Carlson, the Board unanimously approved the minutes of the meeting of the Board on February 21, 2020.

**FINANCIAL UPDATES:**

Mr. Evans presented EOCCO's financials. He advised that EOCCO experienced an increase in enrollment and premium rate. He explained that EOCCO received an additional 2,500 members likely attributable to the COVID-19 situation and noted that this was lower than initially projected at the beginning of the statewide shut down. He explained EOCCO's current projected loss ratio is lower than last year's loss ratio. He noted that EOCCO's investment portfolio was currently down due to the market volatility due to

COVID-19 with an overall loss of \$860,000. He clarified that increased revenue was currently offsetting the investment losses.

Mr. Olivares asked questions regarding medical utilization and the calculation methodology. He noted that Yakima Valley Farm Workers Clinic has seen a notable decrease in utilization as a result of COVID-19 and assumed that was the case with the hospitals.

Mr. Evans reminded the Board that it had previously approved investments in three tranches from cash into the investment portfolio. He advised that due to market volatility, he had delayed the first tranche to prevent additional losses.

**2019/2020 EARLY  
QUALITY POOL  
RELEASE DISCUSSION**

Mr. Jessup stated that OHA decided to release a portion of the 2019 quality funding early in order to help get funds in providers' hands who are experiencing hardship as a result of the COVID-19 shutdown.

He explained that EOCCO will receive \$6,100,000 of the quality funding early, with the remaining \$4,100,000 million released according to the standard schedule. Mr. Jessup clarified that the total payment will be less than in prior years because the OHA pool was smaller than it had been in the past.

Mr. Jessup noted that some CCOs are continuing to struggle to meet the CCO quality measures, which could result in more a larger challenge pool fund may than in previous years.

He reminded the Board that OHA changed the quality program funding mechanism under CCO 2.0. Previously, quality funds were not included in the premium rate. However, starting in 2020, quality funds were now included in the premium rate. OHA then withheld the quality funds prior to paying the CCOs' premiums. He advised that OHA suspended the withhold due to COVID-19 resulting in approximately \$1,100,000 in additional premiums per month beginning April 2020 that OHA advised should be filtered out to the provider community. He advised that the OHA will not claw back any of the

“withhold” quality funds that have been released by OHA.

Mr. Jessup recommended to the Board release a portion of these funds and withhold a portion if a provider is disproportionately impacted by COVID-19.

He proposed fully funding the PCP quality bonus payments early which EOCCO would normally payout at a later date pursuant to the terms of those provider contracts. Further, some of the quality funding would also be distributed to both contracted DCOs and GOBHI. He clarified that the DCO’s and GOBHI will be required to provide detailed reporting regarding the recipients of and use of the additional funding. EOCCO will be required to report this information back to the OHA.

Mr. Olivares stated that PCPCH money was now tied to risk adjustment. He was concerned with loss of revenue on this category. Additionally, he questioned the need to make payments to the DCOs since they are experiencing little to no claims volume with the dental offices being shut down.

Mr. Jessup advised that EOCCO was obligated to pay quality funds to the DCOs per contract, though it would normally happen significantly later in the year. He indicated that the early payment is intended to allow DCOs to funnel funds into the dental offices during a time when they are unable to see patients. Mr. Richardson also noted that many of the DCOs have capitated agreements with dental offices so, while the claims volume was down, DCOs were still making payments.

Upon a motion by Mr. Geller and seconded by Mr. J. Davis, each Board member approved the proposed quality funds distribution apart from Mr. Olivares, who voted against.

**EOCCO MEMBERSHIP  
GROWTH PROJECTIONS**

Mr. Jessup provided an update on EOCCO membership number and noted that the immediate surge in enrollment did not occur in response to COVID-19. He indicated that May would be the most telling on whether

a significant spike will actually occur due to the OHA enrollment and disenrollment process.

Mr. Richardson advised the Board that he had engaged in discussions with OHA to offer EOCCO's assistance in getting providers offices re-opened and serving members. He explained that a call occurred with the health systems and the OHA to discuss options. He said that another call will occur with the Governor's health policy team to continue to discuss options for providers going forward.

Robin noted that work was being done to advocate for the five county hospitals to qualify for the paycheck protection which had been denied as a result of the county hospitals being classified as government entities.

Mr. Daly thanked Robin for his advocacy on behalf of EOCCO and eastern Oregon providers.

**PUBLIC COMMENT:**

Mr. Richardson opened the meeting for public comment. There being no additional public comment, Mr. Richardson moved onto informational reports and updates.

**INFORMATIONAL REPORTS & UPDATES:**

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

**ADJOURN:**

There being no further business, the meeting was adjourned.

  
Assistant Secretary