



BEGIN: 10:00AM

ADJOURN: 12:00PM

CCO RURAL ADVISORY COUNCIL MEETING

Florence - Siuslaw Public Library, Bromley Room

December 6th, 2012

10:00am-12:00pm

MEETING MINUTES

Present

RAC Members

1. Lezlee Craven
2. Shelley Morris
3. Patricia Muchmore
4. Heather Murphy
5. Charene Reavis
6. Jessica Rice
7. Joyce Richardson
8. Robin Roberts
9. Rick Yecny

Staff Members

1. Lindsey Adkisson, Lane County Public Health
2. CA Baskerville, Lane County Public Health

Guests

1. Karen Gaffney, Lane County Health & Human Services, Trillium Board Member
2. Rick Kincade, PeaceHealth, Trillium Board member, Clinical Advisory Panel member

1. Introductions and Welcome

- a. Members shared their names and where they were from as well as why they are interested in being a part of the Rural Advisory Council (RAC).

2. Announcements

- a. Stipends/mileage reimbursement
 - i. **Stipends** – Members of the RAC that are enrolled in OHP or are parents/guardians of kids enrolled in OHP are eligible to receive a stipend of \$18/hour for their participation at CCO related meetings (ex: RAC meeting, workgroups, etc.). In order to receive this, please follow the following directions:
 1. Fill out and return to Lindsey a complete W-9 form
 - a. Attn: Lindsey Adkisson
Lane County Health & Human Services
151 7th Ave., Room 410
Eugene, OR 97401

- b. **Email:** Lindsey.Adkisson@co.lane.or.us
 - c. **Fax:** 541-682-8700 (ATTN: Lindsey Adkisson)
 - 2. Sign-in at **every** meeting you attend as a RAC representative for CCO business (this includes regular RAC meetings, workgroup meetings, or CCO special meetings/events/trainings).
- ii. **Mileage** – ALL RAC members are eligible to receive mileage reimbursement for their time at CCO-related activities. In order to receive mileage reimbursement, please follow the following instructions:
 - 1. Fill out a mileage reimbursement form with mileage accrued during the month (Lindsey will send this out via email)
 - 2. Return to Lindsey following the instructions on the back of the form. Please return by the 27th of each month in order to receive the reimbursement the following month.
- b. Notebooks – all members received a notebook with background information on the CCO as well as RAC roster, draft Charter agreement, and Trillium Transformation Plan.

3. Community Health Assessment Presentation

- a. Rick Kincade, a physician from PeaceHealth and Clinical Advisory Panel member for Trillium presented data from the Lane County Community Health Assessment (CHA).
- b. PeaceHealth, Trillium, and Lane County Public Health have been working together to conduct a joint community health assessment as well as a Community Health Improvement Plan (CHIP).
- c. The group has been sharing the data with over 20 different groups throughout Lane County in order to receive feedback and assess what is missing from the data collection.
- d. The purpose of the assessment is to determine the health status of Lane County residents and create shared “community narrative” of what is impacting us. This assessment will then drive the CHIP.
- e. Lindsey will send out the powerpoint presentation over email.

4. CCO/Rural Advisory Council Overview

- a. Karen Gaffney, Assistant Director of Lane County Health and Human Services shared information on the background of the CCO and the responsibilities of the RAC.
 - i. The CCO was started August 1st and combined physical and mental/behavioral health managed care into one organization in Lane County (previously, LIPA managed physical health care and LaneCare managed behavioral health).
 - ii. The CCO seeks to meet the Triple Aim: better health, better care, and lower cost by using evidence based practices to coordinate a person’s physical and mental health.
 - iii. How do we meet the Triple Aim?
 - 1. There is an emphasis on community collaboration. This is why the Community Advisory Council and Rural Advisory Council were formed.
 - 2. Primary care health homes will be created – these are patient-centered primary care health home to provide comprehensive care for patients.

- 3. Prevention – impacting a patient earlier and setting policies that change behavior and impact the environment.
 - iv. One important note is that there is no extra money to do this.
 - v. There is a lot of pressure but also a lot of excitement. This is all new – not sure where we are going but we have to do something, our healthcare system isn't sustainable
 - vi. Only other way to save money is to deny access care
- b. Charter Agreement
 - i. Boards/Councils:
 - 1. **Board of Directors:** 21 people that includes 2 representatives from the Community Advisory Council and 1 representative from the Rural Advisory Council
 - 2. **Clinical Advisory Panel:** different types of providers who are looking at the quality/cost issues of delivery of care
 - 3. Community Advisory Council – a 20 member council that is majority OHP members/parents of OHP kids; ensures that the healthcare needs of the community/consumers are being met
 - 4. Rural Advisory Council – a council that is majority OHP members/parents of OHP kids; ensures that the healthcare needs of the rural community/consumers are being met
 - ii. Purpose of RAC:
 - 1. To advise and make recommendations of governing board
 - 2. Ensure that Trillium remains responsive to rural consumer and community health needs
 - 3. Advise on the design and priorities of Trillium in achieving the Triple Aim
 - 4. Provide a link back to the community to engage community members in achieving goals of Triple Aim
- c. Focus of the CAC and RAC:
 - i. Prevention
 - ii. Health Disparities
 - iii. CHA/CHIP
 - iv. Additionally – other issues that the community feels is necessary
- d. Leadership
 - i. 1 RAC member serves on Governing Board
 - ii. There is a Chair and Vice-Chair
- e. Lane County Public Health provides staff support at all meetings to make sure the CAC and RAC are meeting the Trillium goals
- f. This is the inaugural meeting for the inaugural group – you can shape how everything happens

5. RAC Structure and Logistics

- a. Meetings – when/where
 - i. What would work best for the group?
 - 1. Rotating locations to rural communities – it is important for members to see the other communities
 - a. The first 15 minutes of each meeting could be devoted to highlighting unique situations within that particular community
 - 2. Include conference calls

3. Charter states that the group needs to meet face-to-face at least every 3 months
 - a. Could meet months in-between over conference call or Skype
 4. Important to meet monthly until the group fully gets going
 5. Veneta, although not represented on the CAC, would be happy to hold a meeting – it is in a central location within the County.
- ii. Decision:
1. The group will meet monthly, in-person
 2. The group will rotate communities, while keeping in mind road conditions/weather
 3. The group will meet every 3 months in Florence so that everyone can participate (one member from Florence is unable to travel)
 4. The group will meet on the 2nd Friday of each month from 11:00-1:00pm
 5. The next meeting will be:
 - a. Cottage Grove, location TBD, January 11th from 11:00am-1:00pm
- b. Leadership (Board Rep, Chair/Vice-Chair)
- i. The Governing Board meets from 7:00-9:00am in Eugene on the 2nd Monday of each month with the ability for people to call-in, if needed
 - ii. The group agreed that the Governing Board Rep, the Chair, and the Vice-Chair should be 3 separate people
 - iii. Nominees are as follows:
 1. Shelley
 2. Lezlee
 3. Char
 - iv. Nominees need to send Lindsey a few written sentences over email about who you are, why you are interested in the position, and what you feel you could bring.
- c. Workgroups
- i. Lindsey briefly went over the workgroups already created by the Community Advisory Council and encouraged RAC members to begin participating, if they want to.
 - ii. If interested, RAC members should email the staff contact to confirm next meeting time/location.
 - iii. The workgroups and their staff contacts are as follows:

(Room 525, Lane County Health & Human Services Building, 151 W. 7th Ave., Eugene)

 1. **Community Health Assessment/Community Health Improvement Plan**
 - a. Meets on the 2nd Tuesday of each month from 2:00pm – 3:00pm
 - b. Staff contact: Lindsey Adkisson
(Lindsey.Adkisson@co.lane.or.us)
 2. **Health Disparities**

- a. Meets on the 2nd Thursday of each month from 12:00-1:00pm
- b. Staff contact: Brian Johnson
(Brian.Johnson2@co.lane.or.us)

3. Prevention

- a. Meets on the 3rd Tuesday of each month from 1:30-2:30pm
- b. Staff contact: Jennifer Webster
(Jennifer.Webster@co.lane.or.us)
- d. Decision-making rules – tabled until next meeting

6. Next Steps

- a. Next meeting: **Cottage Grove, location TBD, January 11th from 11:00am-1:00pm**