



2022 CCO Oregon Annual Conference: Celebrating 10 years of Oregon's Coordinated Care Model

Thursday, September 29 from 9:00am to 4:30pm

Salem Convention Center

9:00am Morning plenary

Willamette
B/C

Welcome and opening remarks

Samantha Shepherd, Executive Director, CCO Oregon

Jeremiah Rigsby, Co-Chair, CCO Oregon Board of Directors and Chief of Staff, CareOregon

Keynote address

Governor John Kitzhaber

10:00am Break

10:10am Concurrent sessions - Round 1

Willamette
A

An Ounce of Prevention: Investing early for better health outcomes

Peg King & Maureen Seferovich, Health Share of Oregon; Holly Hermes & Brad Olson, Randall Children's Clinic - Legacy Health Systems; Kasey Edwards Snider, Project Nurture - Providence Medical Group; Evan Weaver, Washington County Public Health

Health Share is a leader in upstream prevention work, prioritizing systems improvement for children and families by creating a prevention-focused and interconnected network that integrates health care and community partners, giving every family and child the best start. Health Share's work has taught us that investing early optimizes the chances for kindergarten readiness and lifelong well-being. This panel presentation will highlight three initiatives that focus on maternal and child health including our initial funding/development of Project Nurture, Help Me Grow and the EveryStep Collaborative (foster care medical homes). We will share how the CCO served as a key "backbone" organization to develop and promote the initiatives, how these partnerships have improved both member health outcomes and systems alignment, and how these initiatives address the social determinants of health and reduce health disparities.

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Transitional Housing - Bringing stability and hope

Maggie Klein, Oregon Health & Sciences University; Sarah Holland, Central City Concern; Alyssa Craigie, Health Share of Oregon

As a social determinant of health (SDOH), housing influences physical and behavioral health outcomes. Addressing individuals' housing needs is essential to reducing health inequities for

individuals experiencing housing insecurity. With the goal of improving health for members, Health Share of Oregon is collaborating with OHSU Health Integrated Delivery System (IDS) and Central City Concern (CCC) as well as culturally responsive housing service providers to develop a housing benefit program. The program is focused on key times of transition when individuals can benefit from expedited and equitable access to housing, wrap-around support, and service navigation. In this presentation, panelists will share how development and implementation of the program was established as a demonstration to expand the impact of and access to health-related services for members and to ensure services are delivered equitably. The Oregon Health Authority has included the development and implementation of SDOH benefits, including housing, in the 1115 Medicaid Demonstration Waiver renewal. If approved by the Centers for Medicare and Medicaid Services, this type of housing benefit will become part of the benefit package provided under the Oregon Health Plan.

Croisan
Creek A

Collaborative strategies to advance the Coordinated Care Model (combined presentation)

A. Addressing health-related social needs: How collaboration between a CCO and a Community-Based Organization (CBO) helps to achieve shared goals

Carly Hood-Ronick, Project Access NOW; Dave Fife, CareOregon

The partnership between CareOregon and Project Access NOW (PANOW) is exemplary of how coordinated care organizations and community-based organizations can and should work together to achieve both the principals of the coordinated care model as well as the community-centered goals articulated in Oregon's new 1115 Medicaid Waiver application. This partnership, formed in 2020 has grown CareOregon's capacity for health-related service spending and delivery by more than 1,300% and has increased the efficiency of both organizations. In 2021 alone, PANOW provided almost \$2.5 million in services and bulk supply items. Additionally, by acting as a primary social resource connection for Federally Qualified Health Clinics these clinics are better able to focus on providing care. Presenters will share how the partnership supports Oregon Health Plan member needs, meets CCO social spending requirements, and could be expanded in the future.

B. COVID immunization work in coordinated care

Danielle Shannon, WVP Health Authority

WVP Health Authority, an independent physicians' association, has worked with historically underserved populations within Marion and Polk counties since 1976. The Marion-Polk 2019 community health assessment demonstrated a need for childhood and adolescent immunizations within disenfranchised populations. WVP's Clinical Support Provider (CSP) department, in conjunction with PacificSource Community Solutions, recognized this need and envisioned WVP's CSP clinical pharmacists as part of the solution. CSP clinical pharmacists meet people where they are to educate and dispel immunization hesitancy and provide needed childhood vaccinations. Hear how WVP's Clinical Support Providers worked and partnered with Oregon's Vaccine for Children (VFC) program to

provide and administer vaccinations at no cost to children who may not otherwise be vaccinated, including CCO patients and the uninsured.

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Creek B/C

Bridging Care Gaps- Utilizing Community Health Workers in a dental care team

Iris Bicksler, PacificSource Health Plan; Manu Chaudhry, Cindy Fisher & Cheryl Rosecrans, Capitol Dental Care

The role of Dental Community Health Worker (DCHW) bridges members who have not accessed dental care to a dental home for comprehensive dental care and helps link members to additional social and health resources as needed. The DCHW adds value for the coordinated care organization, dental care organization, and their members by building relationships within underserved populations, providing enhanced navigation to dental care, and follow up to ensure patient compliance. Panelists will share perspectives on how this role is improving metrics and outcomes, potential for expansion, and impact for historically underserved populations. The DCHW will share day-to-day workflows and tools, which help track and evaluate equity, inclusion, and statistics on efficacy of the work. Additionally, you will hear stories from the field that highlight impact and the multisector connections this position provides to ensure members are receiving services to optimize their health.

11:10am Break

11:20am Concurrent sessions - Round 2

Willamette
A

Telehealth services before, during, and after a public health emergency

Jacque Serrano, GOBHI; Shawn Carvalho, Community Counseling Solutions - Umatilla County; Aaron Grigg, Center for Human Development; Alexa Jett, CareOregon Dental

Providers across Oregon and health care disciplines began using telehealth years before the COVID pandemic, but as the onset of COVID occurred, more and more care was delivered through telehealth. Exemplifying how telehealth integrates into the provider network and addresses the needs of those served, panelists from GOBHI and CareOregon Dental will share their experiences delivering and offering behavioral health and dental services. Telehealth providers utilize synchronous audio-video capabilities and members are always able to choose a different provider, but with the health care workforce shortage and increased need in many populations, telehealth offers opportunities for beneficial outcomes for patients, providers, and the overall system. Are telehealth services at this magnitude here to stay?

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Climate and Health: Development of a climate dashboard

Beth Bambrick & Cat Livingston, Health Share of Oregon; Richard Bruno & Heather Hollingsworth, Central City Concern; Catherine Potter, Kaiser Permanente; Maggie Klein, Oregon Health & Sciences University

As climate events and their impact on health increase, the need for identification and outreach to vulnerable CCO members has risen. With input and guidance from its Clinical Advisory Panel, and relying on emerging literature regarding climate and health, Health Share developed a rubric for risk assessment based on climate event type, medical conditions, prior heat-related claims, geography, and other factors. This assessment will empower network care coordinators and providers to identify individuals who may be at risk and benefit from outreach or interventions to support, including the use of health related supports. Health Share staff, plan partners, and regional providers will present their dashboard, detail how it was constructed, and report on its use.

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The Intersection of health equity and reproductive health access in Oregon

Hayley Nunn, Planned Parenthood Columbia Willamette and Amy Handler, Planned Parenthood Southwestern Oregon

Oregon remains one of the few states with secure access to legal and safe reproductive health services, including abortion. Reproductive health care is a key element to achieving health equity and removing health disparities in vulnerable populations. To meet the OHA's goals around social determinants of health and health equity, reproductive health access must be considered and supported. This presentation will include a diverse panel to review how patients access care in Oregon today, current challenges to providing reproductive health services, what is anticipated for the future, and how CCOs can support access to reproductive health services through their existing initiatives and projects.

12:20pm

Networking lunch and plenary

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U.S. Senator Jeff Merkley video address

Behavioral Health panel

State Senator Kate Lieber, Co-Chair, Joint Ways and Means, Subcommittee on Human Services;
Member, Senate Committee on Human Services, Mental Health, and Recovery

State Representative Raquel Moore-Green, Vice-Chair, House Committee on Behavioral Health;
Member, House Committee on Health Care

State Representative Tawna Sanchez, Co-Chair, Joint Committee on Ways and Means

Judge Nan Waller, Oregon Judicial Department, Multnomah County

Dana Hittle, Interim Medicaid Director, Oregon Health Authority

Facilitator: Bill Bouska, Director of Government Relations, Samaritan Health Services

1:50pm

Break

2:00pm

Concurrent sessions - Round 3

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Impacts of innovative projects in the coordinated care model

Charissa Young-White, InterCommunity Health Network CCO (IHN-CCO); Ricardo Contreras, Casa Latinos Unidos; Carissa Cousins, Samaritan Encompass and ABC House; Laura Estreich, Disability Equity Center; Allison Hobgood, Corvallis Daytime Drop-in Center

Driving the CCO model in Benton, Lincoln, and Linn counties, IHN-CCO has a strong community focus through partnerships that support the continuum of care for members and the community. Through the Collective Impact model, IHN-CCO supports and funds pilot projects by partnering with community-based organizations (CBO) directly serving its members. Projects are prioritized based on impact on population health, focusing on cultural appropriateness with historically marginalized populations. While the funding and resources come from IHN-CCO, the CBOs and populations served drive the projects and ensure the voice of the member is heard. In this presentation, three pilot projects will be highlighted: Encompass, serving high-need foster children; Project Bravery, increasing access to services for LGBTQ2S youth; ENLACES, providing Community Health Worker services to the Latinx community; and Disability Equity Center, increasing access to services for the disabled community. Successful outcomes will be discussed.

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Community Information Exchange: A vital tool in addressing health inequities

Justin Straus, Cascade Health Alliance; Marty Carty, Oregon Primary Care Association; Carly Hood-Ronick, Project Access Now; Hope Peskin-Shepherd, Oregon Health Authority; Tiana Wilkinson, PacificSource; State Representative Maxine Dexter

As Oregon seeks to eliminate health inequities by 2030, the use of a Community Information Exchange (CIE) has been identified as a critical tool for policy makers to meet this public health goal. With the passage of HB 4150 from the 2022 Legislation Session, Oregon, through the Oregon Health Authority's CIE Workgroup, has begun bringing together community-based organizations, health care, and government entities to strategize and align efforts around CIE in Oregon. This panel will include state legislative and policy experts to provide an overview of the work happening in Oregon and include the expertise of policymakers who have advanced best practices for protecting consumer-directed privacy of social care data exchange in New Hampshire. This panel will provide attendees with an overview of the expansive work happening to address social determinants of health through CIE, a preview of future legislative efforts to build on this work, and lessons learned and best practices from other states.

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Implementing the American Society of Addiction Medicine (ASAM) criteria to fidelity

Bennett Garner & Ben Ryden, Comagine; David Gastfriend, DynamiCare Health; Heather Jefferis, Oregon Council for Behavioral Health

The treatment of addictions is plagued by difficulties in reliably assessing patient needs that allow for placement at the most appropriate level of care. This can cause gaps in the levels of care which discourage engagement, retention, and cost effectiveness in treatment. Developing an efficient

system of assessment and providing utilization management (UM) that is linked to care coordination and quality improvement efforts can help address these problems. We will present an innovative program that integrates software from the ASAM for UM, care coordination, contingency management, and provider training that provides a promising framework for CCOs to address addictions. You will hear the current challenges in identifying appropriate care levels, how appropriate levels of care fosters continued engagement in treatment and how this integrative program can help assess system needs.

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Lessons Learned: Assessing language services to provide equitable access to care

Anna Lynch & George Marlton, CareOregon; Piyawee Ruenjinda, Anna Wheeler-Kay, & Carlos Nunez Quinard, OHA Certified Interpreters

In response to the requirements of CCO 2.0 which support Title VI mandates of the Civil Rights Act, CareOregon issued a call for proposals for Health Care Interpreter Services. In addition to connecting CareOregon members to health in their preferred language, a key intention of this process was to dismantle structural barriers through three areas of focus: appropriate utilization in all areas of access, interpreter network that meets the needs of the members, and feedback mechanisms that ensure members have a voice in process and quality improvement. This interactive presentation will share the method, discoveries and lessons learned from the RFP process, resulting in value-based contracts and implementation.

3:00pm

Break

3:10pm

Closing plenary

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Oregon State Legislative panel

State Senator Dick Anderson, Vice Chair, Senate Committee for Housing and Development; Member, Joint Task Force on Universal Health Care

State Senator Elizabeth Steiner-Hayward, Co-Chair, Joint Task Force on the Bridge Program; Co-Chair, Joint Committee on Ways and Means

State Representative Rob Nosse, Chair, House Health Care Committee; Chair, House Committee on Behavioral Health

State Representative Wlnsvey Campos, Member, House Committee on Health Care; Member, Joint Committee On Ways and Means Interim Subcommittee on Human Services

State Representative Teresa Alonso León, Chair, House Committee on Education; Member, House Committee on Health Care

Facilitator: Sean Kolmer, Co-Chair, CCO Oregon Board of Directors and Senior Vice President of Policy and Strategy, Oregon Association of Hospitals and Health Systems

4:30pm

Thank you for attending!