

OREGON HEALTH FUND BOARD – Health Equities Committee Meeting

January 10, 2008
9:00 am - 12:00 pm

Central City Concern, Sally McCracken Bldg.
Portland, Oregon

MEMBERS PRESENT: Michelle Berlin, MD, MPH
Ed Blackburn
Ella Booth, Ph.D., Chair
John Duke, MBA
Scott Ekblad
Yves Lefranc, MD
Jackie Mercer
Maria Michalczyk, RN, MA
Melinda Muller, MD, FACP
Holden Leung, MSW
Noelle Wiggins, MSPH

MEMBERS EXCUSED: Bruce Bliatout, Ph.D.
Honora Englander, MD
Joe Finkbonner, Vice Chair
Laurie Powers, Ph.D., MSW
Tricia Tillman, MPH, Vice Chair

STAFF PRESENT: Heidi Allen, OHREC Project Manager
Nate Hierlmaier, Policy Analyst

ISSUES HEARD:

- Call to Order/Approval of December 20 Minutes/Introductions
- Review of Staff Panel Policy
- Update of OHFB and Committee Activities
- Approval of Final Recommendations concerning Federal Waiver and Citizenship Documentation for OHP
- Approval of Final Recommendations Concerning Outreach
- Invited Testimony Concerning Final Eligibility Recommendations
- Approval of Final Recommendations Concerning Eligibility
- Invited Testimony: Primary Care Renewal and Medical Homes
- Delivery System Committee's Draft Medical Home Conceptual Framework
- Developing Consensus: Crafting Draft Recommendations concerning Medical Home and Primary Care Renewal Strategies
- Public Testimony

These minutes are in compliance with Legislative Rules. Only text enclosed in italicized quotation marks reports a speaker's exact words. For complete contents, please refer to the recordings.

(Digitally Recorded)

Chair

I. Call to order/Approval of December 20 minutes/Introductions

- Meeting was called to order. There is a quorum.

Motion to approve minutes from December 20, 2007, is seconded.

Motion passed unanimously.

Heidi Allen

II. Staff Review Panel Policy (see exhibit materials)

- There was concern expressed by one individual that informal work groups may have been making decisions and not adhering to public meeting laws. It was clarified that the informal work groups are for helping with preparation of committee meetings; there is no quorum and no voting.
- Minutes are not usually taken, and there is no quorum and no decisions made.
- Correction on number 5. It should read “. . . highlighting 2 A-E.” Should be “. . . highlighting 3 A-E.”

Heidi Allen

III. Update on Oregon Health Fund Board (OHFB) and Committee Activities

- OHFB is meeting Tuesday, January 15, to talk about community based organizations and collaboratives, the safety net and demonstration projects.
- Rick Curtis, from California, and Jon Gruber, MIT Health Economist (by phone), met with the finance committee yesterday to discuss future modeling.
- Eligibility & Enrollment is getting ready to make affordability recommendations and then will next address eligibility issues.
- OHFB has contracted with PAC/West, to improve two-way communication between committees and the OHFB.
- At the end of January, two reports are due to the legislature: (1) from the Exchange workgroup; and (2) a progress report of the Board and all of the committees. Heidi Allen will be preparing a one-page progress report for the HEC.

Heidi Allen

IV. Approval of Final Recommendations Concerning Federal Waiver and Citizenship Documentation for OHP

- Federal Deficit Reduction Act of 2007 required an original birth certificate for documentation and this additional barrier has led to a decline in citizens being covered.
- Audit of Oregon's Medicaid program prior to the administrative changes showed that there was not a problem with ineligible people enrolled in Oregon Medicaid and that methodology used was sufficient.
- It is a recommendation to the Federal Laws Committee (FLC) and the Oregon Health Fund Board (OHFP) that Oregon pursue a waiver from the administrative rule that set the standards for the birth certificate; and, if a waiver is possible, to go forth with one. Only population this affects is those eligible for Medicaid.
- Correct number 1 to say 2006.
- The title ending wording of “OHP-like Programs” to be changed to “Medicaid and Expansion Programs.”

Motion to approve final recommendations for Federal Waiver on Citizenship documentation as amended is seconded.

Motion passed unanimously.

Chair

V. Approval of Final Recommendations Concerning Outreach (see exhibit materials)

Review of recommendations updated with changes at the direction of the Committee. Changes included:

- changing wording of number 1 to “. . . populations that encounter additional barriers such as individuals having cognitive, mental health, deafness or sensory disorders, physical disabilities, chemical dependency or mental health condition, and individuals in homelessness.”
- Added number 4.
- Added ending statement of 100% enrollment.
- Discussion on the meaning of “geographical isolation” from number 1. Definition of rural used for state and federal programs is a community of either 30 or 40 thousand or fewer that is at least ten miles or more away from a community of that size or larger. Suggestion was made to change it to geographical disadvantage.

Motion to approve final recommendation on outreach as amended is seconded. **Motion passed unanimously.**

Noelle Wiggins

VI. Invited Testimony Concerning Final Eligibility Recommendations

- Ellen Lowe, Chair, Eligibility and Enrollment Committee (E & E), testified that the E & E Committee will also be looking at issues related to immigration and eligibility. They welcome the Health Equities Committee’s ideas on how universal eligibility can be enacted.
- Noelle Wiggins highlighted the three points of December’s draft straw person: 1) no one be denied access based on citizenship or documentation requirements; 2) no new state funds will be used; and 3) establishment of a fund for contributors (employers, hospitals, organizations, etc) that would pay for the health care of these individuals.
- Tina Castanares , MD, discussed the history of the problems of obtaining health care for immigrants and the current political sentiment regarding immigration. She echoed Ellen Lowe’s recommendation to give legislators choices and thoughtful policy options to ensure universality of the OHF.

Chair

VII. Approval and Final Recommendations Concerning Eligibility

- Discussion regarding approach of recommendations.
- Should recommendation start with compromise and push it forward or start with a strong statement?
- Discussion of establishing a fund for health care and the role of employers and “pay or play”.
- It was decided to revise current straw person and possibly develop a second. Volunteers for a staff review panel were noted.
- Vote will be scheduled for next meeting.

CareOregon
OPCA

VIII. Invited Testimony: Primary Care Renewal and Medical Homes

Heidi Allen introduced Dr. David Labby, Medical Director of CareOregon, and Craig Hostetler, Executive Director, Oregon Primary Care Association.

- Dr. David Labby gave a Power Point presentation to the Committee identifying specific aspects of patient populations and ideas for changing the delivery model system. There was committee discussion regarding rural areas.
- Craig Hostetler gave testimony concerning primary care and incentives and efforts for improving outcomes. He noted industry concern regarding decreasing numbers of primary care physicians.

Chair

IX. Delivery Systems Committee's Draft Medical Home Conceptual Framework (see exhibit material).

Staff stated that while HEC does not need to have the full discussion of medical home it can provide input to the Delivery Systems Committee elements needed to reduce disparities.

Introduced Ilana Weinbaum, staff to the Delivery System:

- Provided highlights from the work of the Delivery system in developing framework for delivery system reform.

Discussion

- Discussion on excessive profits being returned to payers of the premiums if reorganization is found to save money as hoped.
- Areas where there will be least resistance are around uninsured and Medicaid followed by commercial insurance which will present greater resistance.
- Services in rural areas and communities with fewer resources where these models may be difficult to implement.

Melinda Muller

X. Developing Consensus: Crafting Draft Recommendations Concerning Medical Home and Primary Care Renewal Strategies (see exhibit materials)

- Community based organizations/plan/resources.
- Institutions not paying for care may save money as a result of improved care.
- Vote on a recommendation next meeting.
- Comments on integration recommendations will be sent to those members assigned to working on it by next Wednesday.

Chair

XI. Public Testimony

- Katherine Bradley, Administrator for the Office of Family Health,
 - Public Health System and community components already in place, e.g., Public Health nurses, healthy start programs.
 - Language changing from physician-based to provider-based language.
 - Provider tax and insurance tax.
 - Concepts should be centered around community, population-based perspective, and public health.

Chair

XII. Adjournment

The meeting was adjourned at approximately 12:00 pm.

Next meeting is January 24 at 9:00 a.m.

Submitted By: Paula Hird

Reviewed By: Heidi Allen

EXHIBIT MATERIALS:

- A. December 20th Meeting Minutes
- B. January 10th Agenda
- C. OHFB January Newsletter
- D. Staff Review Panel Policy
- E. Final Recommendations: Federal Waiver Concerning Citizenship Documentation for OHP
- F. Final Recommendations Concerning Outreach
- G. Final Recommendations Concerning Eligibility
- H. Draft Recommendations Concerning Medical Home and Primary Care Renewal
- I. Delivery System Medical Home Draft Conceptual Framework
- J. AAFP Joint Principle on the Patient-Centered Medical Home, available at:
http://www.aafp.org/online/etc/medialib/aafp_org/documents/policy/fed/jointprinciplespcmh0207.Par.0001.File.tmp/022107medicalhome.pdf
- K. *Closing the Divide: How Medical Homes Promote Equity in Health Care*, Commonwealth Fund report available at:
http://www.commonwealthfund.org/usr_doc/1035_Beal_closing_divide_medical_homes.pdf?section=4039
- L. *The Medical Home Model of Primary Care: Implications for the Healthy Oregon Act*, Office for Oregon Health Policy & Research.