

**Benton Local Advisory Committee (BLAC) Minutes**  
**Friday, March 27 2015**  
Benton County Sunset Building, 10:30 AM – 1:30 PM

**Call To Order:** Meeting was called to order by Rebekah Fowler at 10:35 AM.

**Introductions:**

Present:, Sam Sappington (Co-Chair), Amy Roy (Secretary), Richard McCain, Sr. (Stretch McCain), Karen Caul, Marisabel Gouverneur, Judy Ball.

Ex-Officio: Lawrence Eby (CAC Chair), Rebekah Fowler (CAC Coordinator), Mitch Anderson (Director, Benton County Health Department).

Absent (with apology): Hilary Harrison (Chair). Michael Volpe, Deborah Morera, Lauren Zimbelman, Melissa Marshall, Joe Zaerr.

**Announcements:**

Rebekah Fowler reminded the committee of registration for June 3 & 4 CAC Summit in Sunriver. Also motivational interviewing training on tobacco cessation on June 3<sup>rd</sup> before the Summit from 8 to noon. Signing up for the training comes with a second hotel night. Members encouraged to sign up. See email from Sam Sappington for link.

April 20 IHN-CCO public meeting, Corvallis Library. dinner 5-5:30 before meeting.

May 11 CAC and CCO orientation and update at Oregon Coast Community College, 400 SE College Way, Community rm 140 Newport, 9 AM Regional CAC meeting to follow at 2 PM.

Rebekah Fowler reported on the March 9 Regional CAC meeting in Tangent. Dental care organizers Deborah Loyd from Capitol Dental, and Katie Noah from Willamette Dental spoke presented. They said IHN is the only CCO to have hired a dental coordinator.

Judy Ball and Marisabel Gouverneur heard on NPR that Advantage Dental records were hacked. Judy Ball asked when the CCO contracts with outside entities, what is in those contracts about protecting patient information.? Rebekah Fowler reported that the CCO has a privacy work group. It is working on a database to be shared by all the providers. The work group is talking about ways to filter the information and keep it safe. There may not be anything stricter than the Health Insurance Portability and Accountability Act (HIPAA). Mitch Anderson Said that HIPAA is pretty restrictive. Judy says HIPAA lacks teeth. Amy Roy asked is there is something being done to help the people whose information has been breached. Karen Caul said the BCBS has provided to people who were compromised.

**Action:** Rebekah Fowler will ask Eryn Womack the IHN-CCO dental coordinator, about security for OHP members using Advantage for their dental care.

Rebekah Fowler reported on Bill Bouska's report to the CAC. Benton County uninsured rate is 4.8%, Lincoln is 3.8, and Linn is 2.1%. This does not count the undocumented. This has gone down significantly. See Regional CAC minutes from March 9 for details <http://www.samhealth.org/healthplans/community/cac/Pages/CACminutes.aspx>

Rebekah Fowler also reported that the Regional CAC discussed the purchase of Trillium CCO in Lane County by a for-profit out-of-state insurance company. Amy Roy asked about profits in CCOs and what for-profit companies who buy CCOs are allowed to do with profits. Larry Eby said that IHN-CCO is non-profit and is not interested in selling.

**Approval of Minutes** from February 27, 2015. Karen Caul moved to ask for an editable Word version of the minutes so that people can review and suggest edits. Judy Ball seconded. Motion approved.

Marisabel Gouverneur suggested adding a list of acronyms to the end of each minutes.

Amy Roy passed out an updated roster for people to add information and check for corrections.

**BLAC Recruitment Update:** Sam Sappington reported that Hilary Harrison hoped to come to the Regional CAC on March 9 but couldn't get away from her new job. She is taking another month away from the BLAC. 4<sup>th</sup> Fridays are difficult for her. Bill Bouska also has a conflict with 4<sup>th</sup> Friday meetings. Sam Sappington asked if we should look for another meeting date, maybe meetings could be switched to the 2<sup>nd</sup> Friday. Rebekah Fowler suggested we send out an email to see if others can make it on 2<sup>nd</sup> Fridays.

**Action:** Sam Sappington to make a doodle poll.

**Communication Coordination Committee Report:** Kelley Kaiser gave Rebekah Fowler a stack of responses to her request for reports on their activities for the CHIP. They are in all different formats. Rebekah Fowler is working on compiling them and will share them next meeting.

**Benton County Update:** Mitch Anderson reported on what is happening at the Benton County Health Department. On April 9, as part of National Public Health Week, Benton County Health Department will host an event 5:30 – 7:30 at the Sunset Building. They will present a report about access to care. Intended for community at large, and County Commissioners will be there.

Sam Sappington asked Mitch Anderson what is happening that is of interest in the legislature. He replied there is talk of reforms to the public health system. A number of bills related to behavioral health and addiction services. Some have money, some changes in requirements. Sara Gelser will head a task force around the behavioral

health system. They will look at disparities between OHP, commercial insurance, and uninsured. National Association of County and City Health Officials (NACCHO) is using Benton County as an example of good tobacco cessation programs. Benton County is working with Linn County on a criminal justice health interface grant. Also working with Linn on a grant to spread behavioral health first aid farther. Mitch Anderson is concerned about needing increased behavioral health funding and the state behavioral health director announced HSE (Health Safety and Environment?) is taking the federal behavioral health block grant out of the budget in case it will be cut at the state level. That is an \$8 million statewide cut. Sam Sappington asked how that would affect Benton County. Mitch Anderson said he will know later where that money will come from. It is mostly money for crisis intervention. Sam Sappington asked if the legislature is doing any actions on OHP expansion? Mitch Anderson said he is not aware of discussion of that longer term picture. OHA is probably doing more of that planning done.

Sam Sappington brought up the difficulty of seeing his provider in a timely way. He couldn't get an appointment with his PCP until June. He asked Mitch Anderson what is the county doing to help fix this problem? Mitch Anderson answered that the health center has a budget and adjusts staffing depending on the budget. The response is slower than IHN but the panel of providers is expanding. Monroe had lots of room but then Trillium CCO closed to new members and the Monroe IHN-CCO clinic took people from Junction City (Lane County). Word got out and others from Lane County signed up. Now they are closed to Lane County residents except for close by people in Junction city. One of the big problems is the lack of space in Monroe. Corvallis site has no room to expand either. The standard panel for PCP is 1200 to 1400 patients. Now they are trying to get the Primary Care Providers (PCPs) to have a bigger panel. The panel in this case refers to the number of patients a doctor has on his or her list.

Sam Sappington and Amy Roy reported on the March 25 sub group meeting on Behavioral Health (BH). Karen Caul and Deborah Morera were also at the sub group meeting. Some of the ideas they brainstormed are:

BH Goal #2 reduce stigma to improve access and service utilization. Possible outcomes-- community education, outreach efforts, messaging, billboards, behavioral health day, acceptance of integration of behavioral and physical health. Normalize behavioral health struggles (at some point everyone will have behavioral health struggles). Trying to reduce the fear of dealing with behavioral health issues or with people with behavioral health issues. Sharing stories about behavioral health. Training PCPs to be comfortable with behavioral health issues and having experts in-house to refer them to. Encouraging discussion of behavioral health issues in general public. Routine behavioral health screening opportunities. As well as physical checkup, have behavioral health screenings. One stop shopping of services behavioral health and behavioral health.

Outcome? Increase the percentage of members who are comfortable with getting behavioral health care.

Community will be more aware of and comfortable with behavioral health issues.  
Behavioral health and physical health will be integrated to support general well being of the individual.

Behavioral health will be seen as a general health issue with which we all deal.

### BHG#3

Expand service options for behavioral health treatment.

Expand in-school resources and peer support.

Expansion of training for behavioral health behavioral health providers.

Behavioral health services and screenings in elementary and middle schools.

Opt out for behavioral health screenings rather than opt in. Don't do screenings without being sure there are resources to follow up.

### Outcomes

Increase resources in a variety of places.

Increase percentage of members who receive behavioral health behavioral health screening and treatment.

Possibly merge the BHG#3 outcomes with the Access to Care outcomes.

**Adjourn 1:35 PM**

**Next meeting: TBA (possibly April 24), 2015, Sunset Building 10:30 – 1:30pm**