

January 7, 2022

Patrick Allen, Director
Oregon Health Authority
500 Summer Street, NE, E-20
Salem, OR 97301

Subject: Response to Oregon's 1115 CMS Waiver Request

Dear Director Allen,

We write to you on behalf of the Willamette Health Council, the governing body to PacificSource Marion-Polk CCO. Our Community Advisory Council (CAC), which is comprised of local Medicaid members, representatives from local Community Based Organizations, County Health and Human Services Agencies, and local clinical organizations, offers the following feedback on Oregon's 1115 CMS Waiver proposal taking effect in 2022.

First and foremost, we would like to acknowledge and commend the Oregon Health Authority's goals regarding the topics of health equity and social determinants of health in your 1115 waiver proposal. The Willamette Health Council, including the Community Advisory Council, feel strongly that public policy and public resources must target these topics in order to create a healthcare and social care systems that meets the unique needs of *all* Oregonians. It is clear to us that OHA understands the importance of creating a system that is designed to address these priorities. We also believe it is important to recognize and respect the unique structures of local healthcare and social care delivery systems. The concept of focused equity investments would provide transformative financial support for the most marginalized community members across the Marion-Polk region, and the rest of the state; however, our CAC raised concern that the creation of Community Investment Collaboratives (CICs) may be redundant to the Willamette Health Council's existing role in which the CAC distributes funding for local initiatives. To have all three committee structures (Community Advisory Councils, Regional Health Equity Coalitions, and Community Investment Collaboratives), as one community member candidly expressed, would be "too many chefs in the kitchen" and ultimately lead to confusion as to how to get funding into the hands of those who truly need it.

For the past two years, the Willamette Health Council's CAC has worked diligently to invest Community Benefit Initiative resources into projects that align with the priorities identified in our Community Health Assessment and Community Health Improvement Plan. In addition to our CAC, the Willamette Health Council administers a Clinical Advisory Panel comprised of local healthcare professionals dedicated to improving the quality of healthcare services in the Marion/Polk community. The Willamette Health Council also administers a Community Impact Committee that addresses health and social care barriers by making investments in both clinical and community-based organizations. Equity has been a core value for each of these committees whenever investments are considered. *Will our unique community infrastructure be expected to build duplicative models in order to meet OHA's prescribed policy, or must we dismantle our current successful model and replace it with something new?*

Additionally, we would like to express concern with the heightened participatory expectations of Medicaid consumer members in the focused equity investment process. While their involvement is paramount to equitable and inclusive decision-making, we risk taking their input for granted without appropriate compensation for additional time commitment. For example, the Willamette Health

Council's CAC consumer members spend many hours throughout the year reviewing local funding proposals and are offered compensation at the allowable \$25.00 hourly stipend. These stipends, however, may ultimately impact their OHP eligibility according to income threshold. This presents a catch-22 with no safety net: consumer members can deny stipends and essentially volunteer their time with the CAC without incentive, or, they can risk their personal and family's health by accepting stipends and possibly losing their health insurance coverage entirely. Furthermore, the OHA Transformation Center has declined to offer financial literacy education to consumer members about how stipends could impact their OHP status. CAC consumer members should be reimbursed for their time without jeopardizing their eligibility for benefits, especially when OHA increasingly mandates their participation on local CCO committees. By expecting CAC members to dedicate more of their time and energy to reviewing focused equity investments, we undermine the trust of local community members who rely on us to keep them safe and healthy.

We look forward to hearing from OHA on how these concerns will be addressed during the 2022-2027 Waiver implementation period. Thank you for your time and for considering our feedback.

Sincerely,

Lisa Lillico (she/her), Community Advisory Council Co-Chair and OHP Consumer Member

Rachel Lakey (they/she), Community Advisory Council Program Manager, Willamette Health Council

Justin Hopkins (he/him), Executive Director, Willamette Health Council

