

OREGON HEALTH FUND BOARD

November 25, 2008
2:00 pm – 3:00 pm
(Digitally Recorded)

Oregon State Library
250 Winter Street NE
Salem Oregon
Room 102 and 103

MEMBERS PRESENT:

Barney Speight
Charles Hofmann
Eileen Brady
Jonathan Ater
Marcus Mundy
Raymond Miao
Thomas Chamberlain
William Thorndike, Jr

ISSUES HEARD:

- **Call to Order – Gov Kulongoski**
- **OHFB Process – B. Thorndike**
- **Overview “bending the curve” – E. Brady**
- **Overview “Oregon Health Authority” – J. Ater**
- **Overview “Bringing everyone under the tent” – C. Hofmann**
- **Overview “Workforce Recommendations” – T. Chamberlain**
- **Overview “Health Equity Recommendations” – M. Mundy**
- **Overview of Federal Changes – R. Miao**
- **Next steps for the report - Gov Kulongoski**
- **Additional Remarks – Sen. Courtney and Rep. Hunt**
- **Adjourn - Gov Kulongoski**

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- 1. Call to Order / Review Agenda / There was a quorum.**
- 2. OHFB Process**
 - Highlights of committees, staff, and events were briefly discussed.
 - The committee worked hard to involve the public in this process. There were over 1,000 Oregonians who attended these meetings. Over and over again they heard the concerns of Oregonians about health care at these meetings.
 - Praise was given to OHPR and their involvement, DHS and the various offices and people involved.
- 3. Overview “Bending the Curve”**
 - The board has come to the exciting conclusion that the current health care system can afford to cover the children of Oregon and some of the low income adults in Oregon given the amount of dollars in the system.
 - Using existing dollars not even additional dollars we can leverage enough Federal funds to make a huge impact on the health care in this state.
 - If all that is done is cover more people for the short term and the cost of health care keeps going up we will need to eliminate people from program.
 - In order to build a sustainable system we cannot continue to fund a broken system. We need a long term solution.
 - Our recommendations suggest that we can save up to 10 billion dollars over the next 10 years and build a world class health care system.
 - We need political courage, creativity and innovation.
 - The vision includes a fully deployed electronic health records program statewide.
 - The goal is to avoid the lottery, save 10 billion dollars, and build a 50 year solution.
- 4. Overview “Oregon Health Authority”**
 - The current system has no system organization or organizer anywhere in the process and no integration happening.
 - If the state organizes itself and efforts regarding this matter it would make all the difference.

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5. Overview “Bringing everyone under the tent”

- Covering everyone can be done fairly fast but insurance doesn't equal access to health care, it doesn't equal affordable health care, and it doesn't equal quality health care.
- Simply providing health care doesn't accomplish the goal.
- Adopting a phased approach is suggested that will get us to universal coverage in 4-6 years.
 - Insure that there is health care coverage for all children by getting all children who are currently eligible under the OHP and into the system without passing the cost on to the consumers.
 - Recommend the state apply for an additional federal waiver.
 - Cover remaining adults, this will require an individual mandate, individual insurance market reform, and a payroll tax.

6. Overview “Workforce Recommendations”

- We believe as a board that Workforce is an important component. We need to change; we need a new work model that encourages new and existing professionals to meet the need of all Oregonians.
- We need to develop a work force that will have providers in every region of the state, that's essential to what were trying to do.
- The other piece is to recognize the authority as it relates to workforce the authority would work as a coordination vehicle between professionals, the health care institute and move the proposal forward.
- Having a culturally competent workforce to make sure that we have a workforce that reflects the diversity of our community and that are sensitive to the differences in our cultures.

7. Overview “Health Equity Recommendations”

- Improving the quality of care by creating and reduce the disparities of care that occur within the contents of health care delivery by creating the health authority spoken of earlier.
- Make this model an essential element in Oregon health system.
- Expand the data collection area to identify problems and solutions to achieve health equity.
- If we take these recommendations from the health equity comm. and implement them not as a separate piece but part of the aggregate that we will have done a good job

8. Overview of Federal Changes

- If we can achieve even a component of a working system that we will probably have the attention of the federal government.

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- The number one thing to do is organize a health authority to go to the Federal level and focus on Federal legislation.
- It's key to get Federal reform.
- If we the state are in a financial crunch it would be easy to say we cannot do anything, but there are things in this plan that would cost almost nothing.
- OPDP is already in place; if we can bring more people to it we will have greater buying power.

9. Additional Remarks

- The board has done a great job at setting a vision and a goal.
- Amazed at the enormity of what 329 required the committee to do.
- Several bills are being started on the house side, the house and the senate want to work together on the details of those bills so that when it passes out of the house the senate will have a pretty good understanding of what is coming to us.
- There are concerns about cost containment and about workforce issues that will result from this.
- The OHFB has given Oregon an opportunity to set an example for the country.

10. Adjourn; the meeting was adjourned on time.

There is no future meetings scheduled at this time.

Submitted By:
Tina Huntley

Reviewed By:
Tina Edlund