

**OREGON HEALTH POLICY COMMISSION (OHPC)**

April 4, 2008  
1:00 p.m.  
Meeting recorded

Wilsonville Training Center  
Wilsonville, OR

**MEMBERS PRESENT:** Kerry Barnett, Chair  
Jonathan Ater, Vice-Chair  
Vanetta Abdellatif  
Geoff Brown  
Alice Dale  
Senator Richard Devlin  
Vickie Gates  
Representative Mitch Greenlick  
Jim Lussier  
Steve Sharp  
Rick Wopat, MD

**MEMBERS EXCUSED:** Denise Honzel  
Representative Ron Maurer  
Senator Ben Westlund

**STAFF PRESENT:** Gretchen Morley, OHPC Director  
Jeanene Smith, MD, Administrator, OHP  
Tina Edlund, Deputy Administrator, OHP  
Barney Speight, Executive Director, OHFB  
Nora Leibowitz, Senior Policy Analyst, OHPC  
Zarie Haverkate, Communications Coordinator

**ISSUES HEARD:**

- Review of SB 329 work to date
- Discussion of additional areas of interest to commission
- Invited testimony
- Next steps for OHPC

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**Kerry Barnett I. Call to order / Announcement**

- There is quorum.
- Chair Barnett welcomed Gretchen Morley back.
- Chair Barnett announced that this will be his last meeting as Chair. He stated that he been privileged to be Chair of the Commission for several years, but due to other responsibilities, he would like to offer the opportunity to another member to Chair. The Committee thanked Kerry for his work as Chair.

**II. Approval of minutes**

- December 12, 2007 minutes approved as submitted.

**Gretchen Morley III. Updates on ongoing Commission projects**  
**Nora Leibowitz**

**Health Reform Collaborative (HRC)**

- The HRC is continuing to meet and grow, with wide membership representation. Held a retreat in the Fall 2007 to develop charter, rules, membership. HRC is supporting SB 329 public engagement through use of a website [www.talkhealthreform.org](http://www.talkhealthreform.org). The website posts weekly health

reform topics and provides a forum for public to air views and various members of the HRC write guest articles. So far, use has of the website has been low to moderate. There are a number of related organizations have added the link to their website.

- Discussion of local collaboratives; Central Oregon Collaborative top priority is how to integrate health care, improve access to health care and lower costs.
- Gretchen will ask DHS Office for Health Planning for an update on the collaboratives.
- Barney Speight participated as a panel member at an Oregon Health Forum sponsored event a few months ago and heard an update on the collaborative efforts.

#### **Community Health Priorities**

- The Commission is also working with the Northwest Health Foundation (NWHF) and Public Health Division regarding community health priorities. Lost Susan Allen as Public Health Officer, but Public Health Division is still involved.
- Northwest Health Foundation has completed some polling around public health priorities for use in the 2009 Legislative session. NWHF is now focusing on communication campaign and working with media to report health issues. Looking for local leaders to talk about health through the use of 'advertorials' in newspapers and public on the web.
- Are looking at receiving public input to form public policy and will then connect the OHPC to this work.
- Need to bridge gaps between public and private health. Heidi Allen working on health indicators to use in discussions for improving care. Sean Kolmer will share information from OHPR website with Commissioners regarding this issue.

**Barney Speight**

#### **IV. Review of SB 329 work to date**

- Distributed SB 329 report to the Legislature.
- Barney acknowledged the work of many of the OHPC members who are serving on the Board, Committees and Work Groups. Health Services Commission and the Medicaid Advisory Commission members have also been involved in SB 329 work.
- Committees are expected to complete work in 30-60 days and provide reports to the Board. The Board will integrate recommendations of the Committees between May and August.
- Enrollment and Eligibility Committee has submitted affordability recommendations to the Board.
- Revenue options are complex and controversial. Rick Curtis of Institute for Health Policy Solutions and Jonathan Gruber from MIT have been hired as consultants to model the individual mandate and 'pay or play' scenarios. Initial modeling should be available mid- to late-April.
- Health Insurance Exchange issues are complex. The Exchange Work Group is doing a good job on market reform changes with individual mandate.
- 13 community meetings will be held throughout Oregon from May to mid-June. This is an opportunity to hear what people are thinking about health care reform and will help in drafting the report to the Governor and Legislature. Importance of marketing to maximize attendance at meetings.
- May 10 – 11 is the annual Kinsman conference on Health Ethics. This year it will focus on health care reform and will include 200 health care

professionals. CD's from the conference will be available with recommendations for the Board to refer to.

- Report to the Legislature has been deferred to November 1. The Board will use September for public outreach hosting 6 to 8 meetings to receive input before preparing the final report.
- Commission stressed the importance of having a strong communications plan.
- There is a broad-based interest in health care reform to 1) expand access to 600,000 insured (funding) and 2) get increased value out of health care system. From acute to aggressive management of chronic care, pay for performance, etc. Both parallel to build consensus.
- Need to see end game. Need vision around health care in Oregon.
- Need to also talk about cost of not covering the uninsured. What are barriers to overcome to get healthcare.

Kerry Barnett /  
Gretchen Morley

## V. Discussion of additional areas of interest to Commission

### *Invited guests:*

#### **Lisa Dodson, MD, Director of Oregon Area Health Education Centers**

In addition to her duties as Director of OAHEC, Dr. Dodson also works part-time as a Family Physician, commuting each week to rural Eastern Oregon. OAHEC is aggressively working to increase education for physicians and medical workers in Oregon.

- Have determined that Oregon doesn't have enough Primary Care Physicians (PCPs), and won't have enough doctors to treat people. United States has more doctors than other countries but not in PCPs. Need diverse doctors (regionally, ethnically).
- Nurse Practitioners don't tend to go to rural counties.
- We are pricing ourselves out of the market for primary care. Tuition/costs at OHSU rose 25%.
- Physicians are aging and we're losing faster than gaining new physicians.
- There is a malpractice crisis in the state.
- More out-of-state applicants enrolling in medical schools (4,500) who are less likely to stay to practice in Oregon once they graduate. OAHEC has aggressively worked on this and Oregon students increased to 60 – 70% this year.
- Will add an osteopathic school in Lebanon and Corvallis.
- Pilot project to provide temporary respite coverage to local rural communities when the local physician is not available. Need funding to keep rural areas covered for physicians.

#### **Jo Isgrigg, Ph.D., Exec. Dir. For the Health Care Workforce Institute**

Dr. Isgrigg distributed information from the HCWI. A lot is happening around work force development.

- The Institute is developing a work plan at the direction of the Senate Health Care Reform Committee to collect workforce demographic data. OHPR is assisting with this work.
- Working to provide data on the number of physicians, where located, what type of practice, and hours they work. This will help identify where dollars need to be invested to meet current and future needs.

- HCWI is working collaboratively with other organizations to recruit doctors, nurses, dentists, and other health care professionals to replace the large number of retiring workforce.
- Legislation on loan forgiveness is needed to assist physician and nurse student education and to allow retired nurses to return to work without affecting their pensions.
- Need data on faculty recruitment and funding. Difficult to retain faculty as can make more money practicing medicine.
- Have doubled enrollment in nursing programs since 2000. Still a huge problem in rural areas.

Kerry Barnett

#### VI. Next Steps for OHPC

- It's important to develop a 2008 Work Plan for the Commission. Need to look at what issues need to be worked on that aren't being addressed by SB 329 work.
- Gretchen distributed a report by the United Health Foundation on America's health rankings for 2007 in response to a request by Rep. Maurer that the OHPC may want to look into **Quality Indicators** in order to provide input to the 2009 Legislature.
- The OHPC also discussed the need to take on **Work Force** issues to meet future needs, which would compliment the work of the Health Fund Board's Delivery System Committee. To meet future workforce needs, Oregon may need to look at going from the "health care professional" model currently in place to a "social support" model for certain tasks in rural and other areas of the state as an example of how to do things differently for a sustainable health care system. This isn't being currently being addressed by OHFB.
- Another area that was considered was the **Malpractice** issue. However, generally felt that the OHPC wasn't the proper venue for this topic as it will also involve taking on court reform and other legal issues.
- Discussed staff's and some of the Commission member's ability to take on additional projects at this time due to heavy workload of SB 329. Staff will be working on SB 329 work through the spring and summer 2008. If can't take on OHPC projects at this time, the Commission was agreeable with taking a hiatus until fall 2008. However, it strongly expressed the need to provide the necessary leadership and data for the 2009 Legislative session.
- Commissioners agreed quality indicators and work force issues in primary care were areas needing work.
- **Next Meeting:** Planned for September and/or November 2008, with possible sub-group meeting before then. Gretchen and staff will take input from today's meeting and assess ability to do work and recommend how to shape projects to develop a work plan and distribute to Commission for feedback.

Kerry Barnett

#### VI. Public Testimony

- Written testimony was received from Noreen Arnold in support of a marijuana tax (Initiative 124).
- Karen Salisbury of Albany, Oregon, asked the commission to support Initiative 124 to set up a dispensary system for medical marijuana.

Meeting adjourned at 4:55 p.m.

**Submitted by:**

Zarie Haverkate, Communications Coordinator

**Reviewed by:**

Gretchen Morley, Director OHPC

**EXHIBIT SUMMARY**

A – Agenda

B – December 12 meeting minutes

C – OHPC Work Plan for fall 2007 – spring 2008

D – Oregon Health Fund Board – February report to the Legislature

OREGON HEALTH POLICY COMMISSION (OHPC)

Sept 18, 2008  
1:30 p.m.  
Meeting recorded

Northwest Health Foundation  
Portland, OR

MEMBERS PRESENT:           **Vanetta Abdellatif, (newly elected) Chair**  
                                      **Kerry Barnett, Chair**  
                                      **Jonathan Ater, Vice-Chair**  
                                      **Geoff Brown (by phone)**  
                                      **Alice Dale**  
                                      **Vickie Gates**  
                                      **Representative Mitch Greenlick**  
                                      **Denise Honzel**  
                                      **Jim Lussier (by phone)**  
                                      **Senator Frank Morse**  
                                      **Steve Sharp**  
                                      **Rick Wopat, MD**

MEMBERS EXCUSED:       **Senator Alan Bates**  
                                      **Representative Ron Maurer**

STAFF PRESENT:           **Gretchen Morley, OHPC Director**  
                                      **Jeanene Smith, MD, Administrator, OHPR**  
                                      **Nora Leibowitz, Senior Policy Analyst, OHPC**  
                                      **Zarie Haverkate, Communications Coordinator**

GUEST:                       **Claudia Black, Governor's Office**

ISSUES HEARD:

- **Nomination of New OHPC Chair**
- **Discussion and Commissioner input on the draft Oregon Health Fund Board draft action plan**
- **Discussion of next steps for Commission**

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Kerry Barnett    **I. Call to order / Announcement**

- There is quorum.
- Chair Barnett welcomed Senator Morse as a new member.

**II. Approval of minutes**

- April 4, 2008 minutes approved as submitted.

Kerry Barnett    **III. Nomination and approval of new OHPC Chair**

Chair Barnett reflected on the accomplishments of the Commission and for the opportunity to chair the Commission. **Motion** to nominate Vanetta Abdellatif as Chair, effective immediately is seconded. **Motion passed unanimously.**

Jeanene Smith

#### IV. Discussion and Commissioner Input on the draft Oregon Health Fund (OHFB) Board draft action plan

Distributed and presented an overview of the 8 essential buildings blocks that make up the OHFB draft action plan. The OHFB held 10 town hall forums throughout Oregon from September 8 – 18 for public comment. The Board is reviewing public comments from the meetings and will finalize its report in October to deliver to the Governor and Legislature in November. She asked Commissioners for input on the report.

##### **Discussion**

- Appreciated the thoughtful work over the last year to develop a comprehensive health plan for Oregon.
- Felt the OHFB appropriately emphasized insurance coverage and health system reform.
- Some commissioners felt the report doesn't aim high enough in covering all Oregonians
- Concerned about taxes. Would like to see identified top 10 ideas and steps to achieve cost containment.
- Need to cover all Oregonians, not just children and the very poor. Need to bring everyone under the tent to fairly spread costs.
- Providers support delivery system change, work force reform, and transparency.
- Some disconnects regarding urgency and vision to systematically deliver health care, change behavior, and control costs. Concern that timeline in Board's plan is so long and delivery system so long will lose sight of prize.
- Implementing a provider tax increase gives public the impression someone else pay for health care. Need a shared fund for all Oregonians.
- Posting health care prices on the web and increased transparency around prices and purchasing based on evidence-based meds will result in cost control in the market.
- Need to stop tweaking a broken health care system.
- Concern that scope and authority of the proposed Oregon Health Authority is too broad to be effective.
- Sees OHA organizational structure like ODOT commission, and things a collaborative model would be more successful.
- Make goals bolder with shortened timelines, clear road map, and more aggressive cost controls.

##### **Recommendation:**

1) Based on conversations today, Commissioners asked Director to draft a letter to the OHFB, outlining its recommendations to the Board's draft plan. Gretchen will distribute the draft to Commissioners for review prior to forwarding to the Board. Recommendations to include:

- The Board "aim higher" by planning for universal health care access sooner than 2013. It will be hard to get Oregonians to pay for system reforms now when affordable care for some is five years away.
- Further articulate options to curb costs, and
- Clarify the role of the proposed Oregon Health Authority and how it affects the Commission. Concern with the entity becoming a mega-agency that directly administers programs or takes on too wide a scope.
- Increase transparency (i.e., quality, cost, smart use of public/private tools for solutions to use regulations work or global budgeting).

2) Commissioners to explore cost containment solutions at its next meeting and possibly through a subcommittee of the Commission, and forward any recommendations to the OHFB at a later date.

**Claudia Black V. Request from Governor's Office**

Oregon was one of nine states to receive a Commonwealth Fund Quality Institute grant for technical assistance to develop a Statewide Quality Improvement Action Plan. The Governor's Office and OHPR has been coordinating the work thus far through a state team, of which Representatives Greenlick and Maurer, and Vickie Gates are members. However, the Governor's Office feels the OHPC might be the more appropriate "home" for the grant to oversee development, monitor the progress, and provide public venue.

Rep. Greenlick sees a broader goal for the grant in developing a statewide integrated plan for quality. Commissioners agreed to oversee the development of the Statewide Quality Improvement Action Plan for a year and then revisit to see if the OHPC is the appropriate venue. Gretchen will bring a detailed Charter to the November meeting. Jim Lussier volunteered to join the work group.

**Gretchen Morley VI. Next Steps for OHPC**

The Commission agreed to discuss at the November meeting:

- Statewide Quality Improvement Action Plan
- Cost Containment issues
- Meeting dates for 2009

**Meeting adjourned at approximately 5 p.m.**

**Submitted by:**  
Zarie Haverkate, Communications Coordinator

**Reviewed by:**  
Gretchen Morley, Director OHPC

**EXHIBIT SUMMARY**

- A – Agenda
- B – April 4 meeting minutes
- C – Aim High: Building a Healthy Oregon, Community Town Hall Forums September 2008
- D – OHFB Selection Sections of Draft for Public Review and Comment, September 2008
- E – What's Next for the OHPC?

**OREGON HEALTH POLICY COMMISSION (OHPC)**

November 3, 2008  
1:30 p.m.  
Meeting recorded

Portland State Office Building  
Portland, OR

**MEMBERS PRESENT:** Vanetta Abdellatif, Chair  
Jonathan Ater, Vice-Chair  
Kerry Barnett  
Geoff Brown (by phone)  
Representative Mitch Greenlick  
Denise Honzel  
Senator Frank Morse  
Steve Sharp

**MEMBERS EXCUSED:** Senator Alan Bates  
Alice Dale  
Vickie Gates  
Jim Lussier  
Representative Ron Maurer  
Rick Wopat, MD

**STAFF PRESENT:** Gretchen Morley, OHPC Director  
Jeanene Smith, MD, Administrator, OHP  
Nora Leibowitz, Senior Policy Analyst, OHPC  
Zarie Haverkate, Communications Coordinator

**GUEST:** Erin Fair, Senator Bates' Office

**ISSUES HEARD:**

- Discuss and approve draft charter for Statewide QI Team
- OHFB Proposed Reform Plan and Cost Containment
- Next steps

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**Chair Abdellatif I. Call to order / Approval of Minutes / Update**

- September 18, 2008 minutes approved as submitted.
- 2009 OHPC meetings: Proposed the OHPC meet every other month in 2009, and may need to meet more frequently via conference calls depending on the issues. Have set a January 13 meeting and are waiting until the Legislative Committee Schedules come out before setting the remaining dates. Hope to focus the January 13 meeting on legislative issues.
- Health Reform Collaborative: Retreat to discuss its role for this legislative session (what it wants to support, etc.) Gretchen will keep the Commissioners informed.
- Jonathan Ater appreciated the letter from the OHPC to the Oregon Health Fund Board. The Oregon Health Fund Board is recommending its work continue via the Oregon Health Authority. The OHPC can continue the work on many of the reform efforts mentioned by the OHFB. Rep. Greenlick will introduce a bill to implement the OHFB recommendations, including an Oregon Health Authority.

**Gretchen Morley II. Quality Improvement Team Draft Charter**

Commissioners reviewed the draft charter and slide document outlining Quality Improvement Action plan.

**Discussion**

- QI Team will select and rank issues to work on and bring progress report to OHPC in January.
- Key goal to align public agency efforts around quality, in alignment with private efforts.
- Would like to see more 'action' words in charter.
- Define 'triple aim' in clearer language and link to OHFB recommendations.
- Need a broader representation on the team such as addictions and mental health representative, and public sector representative (i.e., Purchasers Coalition, provider groups).

**Chair Abdellatif / Gretchen Morley III. OHFB Proposed Reform Plan and Cost Containmentment**

Distributed excerpt from the Oregon Health Fund Board's report on cost containment, "Bending the Cost Curve in Oregon" as a support document in framing additional discussion around cost containment.

**Discussion**

- Complimented Board for addressing need for cost containment
- If we agree that current growth isn't sustainable, what medical inflation rate is sustainable? That then becomes the goal as a business model.
- Board leaning now to recommend a Health Authority and for the OHPC to start on the work now.
- An alternative to global budgeting, Minnesota is changing incentives for a more open free market model.
- Need competition to drive costs down.
- If identify a base (i.e., 87% Medicaid reimbursement rate), work innovatively to arrive at goal within available revenues.
- How to make free market work with a third-party payer system?
- How does Oregon affect the federal structure around reimbursement rates?
- How can mandate a reduction in services? What would you reduce? How would you measure? Evidenced based. Complex issues.
- OHPC can add value during session by advising on role of Health Authority.
- How to create action to reduce cost. Purchaser focus, not state legislative focus.
- Look at others across the nation working on cost containment.

**Testimony:**

- **Jennifer Valley** with Voter Power. Discussed need for safe access and evaluation of medical marijuana.
- **Pam Marea-Nason, RN.** Asked that discussions around cost containment be broadened to include cost to individuals in system, i.e., inadequate care, loss of functional status in the workplace.

**Chair Abdellatif IV. Next Steps for OHPC**

The next meeting will be held Tuesday, January 13, 2009, at the State Capitol. Topics for discussion at the next meeting include:

- Review Statewide Quality Improvement Action Plan progress
- Additional team members needed for QI Team

- Legislative discussion
- Meeting dates for 2009

**Meeting adjourned at approximately 11:30 pm.**

**Submitted by:**

Zarie Haverkate, Communications Coordinator

**Reviewed by:**

Gretchen Morley, Director OHPC

**EXHIBIT SUMMARY**

A – Agenda

B – September 18 meeting minutes

C – Draft State Quality Improvement Team Charter

D – Draft excerpt from OHFB report “Bending the Cost Curve in Oregon”