Agenda/Notes
Office of Governor Tina Kotek
RJC Health Equity and Human Services Committee
August 19, 2026 – Zoom
3:00 – 5:00 pm
Moderator – Javier Cervantes

MEMBERS

A	Annie Valtierra-Sanchez	X	Jackie Leung	A	Matt Newell-Ching
E	Coi Vu	E	Josie Silverman-Mendez	X	Melinda Del Rio
A	Dolores Martinez	A	Leslie Gregory	A	Tae-Sun Kim
X	Elizur Bello	X	Marin Arreola	X	Reginald Gilmore

OTHER ATTENDEES

X	Andre Bealer	X	Yasmin Solorio	X	Javier Cervantes
X	Kristina Narayan	E	April Rohman	X	Rachel Currans-Henry
X	Jessica Hoffman, ODHS	X	Roberto Gutierrez, ODHS	E	Jordan Dion, ODHS
X	Cheryl Miller, ODHS	A	Mariya Klimenko, ODHS		

Topic/Lead	Notes/Main Points	Decisions/Action Items
Medicaid Sustainability Discussion	*Meeting starts at 3:09pm. Attendee's provide introductions.* *Medicaid Sustainability postponed, first agenda item is agency report backs.*	
Agency Report Backs • Oregon Health Authority (OHA) Addressing previous question: including CBO Funding Questions, POPS/LC • Oregon Dept. of Human Services (ODHS) Addressing previous question: including CBO Funding Questions, POPS/LC	*Oregon Dept. of Human Services (ODHS) presents first and shares " Health Equity and Human Services Committee (HEHSC) Update: SNAP Access and CBO Partnerships" slides.* *Presenters are Cheryl Miller, Community Engagement & Strategic Partnership Officer and Jessica Hoffman, Oregon Eligibility Partnership Interim Director.* **Cheryl**: We held two in person meetings in Salem and Portland, and one virtual. They were called "Together We Plan" and we walked through the Agency Recommended Budget (ARB) process, answer questions. One that always came up was if the Department can advocate for their budget in the legislature. Not our job, we can only answer questions. ODHS programs hosted more than 55 engagement events with community partners. Held "Together we Plan" meetings with staff. Continue partnerships with Office of Tribal Affairs. Participated in two tribal director convenings, part of Tribal	

	Consultation that was on June 30th at Klamath Falls. It's important because this was the first consultation around ARB by any state agency. *Maintaining SNAP access* **Jessica**: Part of the work we have been doing with HR1 impacts is helping participants and public at large maintain access to SNAP. Doing all we can to reduce payment errors, information is timely reported and processed arcuately. Exploring admin approaches and operating models to reduce burden on staff and applicants. Partnering with community including tribes within Oregon to provide support so their tribal members so they can maintain access, given sometimes confusing changes with language in the bill. We are partnering with Community Based Organizations (CBOs) to ensure they have timely updates with what's happening and upcoming changes with Medicaid. *Grants to Community Based Organizations* **Cheryl**: Why a funding breakdown isn't a quick pull today? We have grants, personal services contracts, and Work Order Contracts (WOC). Grants are really tied to specific types of funding sources that are often federal sources and have limitations. We have more flex when general funds are used when funding these grants. It would require a manual process to figure this all out. To identify how many contracts we have and how many contractors there are. Data from Oregon Buys is 337 nonprofits who have 668 contracts. For example, I'm a contract administrator for 611. Many contractors are grantees or have one or more contracts or grants with ODHS. When thinking about who are we contracting with, it's a wide variety of individuals, organizations, faith based organizations, (SEI, Immigrant and Refugee organizations, Latino Community Association, VOICES, Warm Springs Community Action Team, Catholic Community Services of Lane County, Uvalcree, Centro Cultural). *Work Opportunities Investment Workgroup* **Cheryl**: Met with Marin and had a conversation about and this is a concept that we originally discussed to allow CBO and Faith based organizations to partner with us and support folks who must meet work requirements. Recently met with Hygiene for All who works with houseless population. They're part of a group that is	

	trusted in the community that can connect with people who often don't have a phone or way to connect with and provide necessary information to them. That is what we'd call participant navigation and warm hand offs. We know people would love to work but have barriers to transportation or childcare. We built a budget and submitted to leadership and are looking at data to tell us where we need to go. Once we have data, we'll be able to identify regions, and can identify how much funds need to go to those regions. It's building a partnership and pulling in other resources to help people in Oregon. **Jessica**: It's also about engaging with folks who have lost benefits. We know since October about 77K people have lost snap benefits. Half were adults who weren't able to meet work requirements. Of the people who need to meet work requirements, a chunk qualify for exemptions. Work requirements have been expanded. Used to be 18-56 years old. It's now 18-64 years old. **Marin**: What are exemption examples? **Jessica**: Caregiving for someone in your home, if you are seeking physical/mental or drug and alcohol support. We can get all those details to you. We have been trying to get the word out this past year and continue to use these networks. We have a webinar monthly called "Forward Together" to give you updates on changes and things coming from the federal government. I spend a lot of time to ensure we can get all info out in the simplest way. We have multi-language tool kits and community specific outreach materials are coming soon. **Rachel**: What you heard today were targeted to questions you posed in June. If there's gaps were missing, please feel free to ask. *Kristina shares "RJC HHS Subcommittee: Medicaid Sustainability Group Report RJC Input" Slides.* **Kristina**: Written response from OHA on your questions. Can get questions or feedback to Marin. Next steps for Medicaid Advisory Group work. How	

	does the committee want to engage for ultimately the Governor's Recommended Budget (GRB). For Oregon Health Plan (OHP), notices will start to go out in September. Coverage loss will likely occur in March. 3-month sprint from notice to reality of losing it. That is the general scenario we're responding to. September revenue forecast will tell us our financial environment. We are looking at about a $421M General Fund (GF) shortfall. Governor, anticipating this, didn't want to change eligibility for Medicaid and try to keep folks insured. We are analyzing what strategies can be materialized, how policy design can affect savings. Governor is reviewing the report. Meeting with constituencies who were well represented in advisory group and getting feedback. *What has happened since the report* Met with people doing follow-up briefing. Oregon Health Policy Board – great place to find information. Presented to Local Government Advisory Committee (LGAC) who have a critical role as safety providers. Met with Disability Rights Oregon, Salud Y Poder, Oregon Law Center, and we have a presentations coming up with Coalition for Clinics (tbd scheduling). Downstream impacts that have come up are who are navigators and assisters helping people to navigate new barriers. What are implantation concerns tied to funding strategy. Which option of the process would the committee like? 1. Members read the 35 page report, provide thoughts to chairs for summary by letter 2. Members read report, have discussion at next meeting 3. GRB **Marin**: What are committee members' thoughts for process. **Reginald**: Would love to gather thoughts on report. You are giving organizations a great opportunity through grant and funding to parter with agencies to provide care to members. Us to look through info and provide feedback through email could be beneficial. Sometimes in a group system can be overwhelming because we are	Committee members to read through report and provide feedback to Javier for next meeting.

	trying to listen to counterparts while trying to give our thoughts. **Marin**: When would you like written feedback. **Kristina**: Thanks Reginald, this is very helpful and in alignment with feedback so far. Think would be great if we could share this out to the group. Would say if were looking at full report, would be helpful to have folks to do so by Sept 4th to provide it to governor. **Jackie**: To highlight if we are putting more pressure on CBOs to meet work when it comes to OHP assisters and healthcare navigation, there has to be funding that matches the ask and demand of those groups. We are one of the groups funded to do OHP and engagement work. Been additional reporting and requirements that weren't on there before which makes it hard to balance reporting requirements, healthcare navigation, and engagement and other work within budget. **Marin**: Agreed. **Reginald**: Great feedback. Although agencies are showing up, it may not be at the level the members are needing due to budget cuts. **Marin**: Question on admin cost. Is that a big expenditure? **Kristina**: Most reductions identified in report are about the admin rate provided to CCO's upper limit by 10%. CCOs are paid per member, per month. The built-in rate is no higher than 10% per admin. Some is delegated and some is absorbed. It is not a true 10% rate, bigger CCO's may likely be more at 7% with efficiency and resources, compared to smaller CCO's who may be technically at 10%. **Javier**: Sent you all OHA's written updates.	
Advocacy Priorities Discussion	**Andre**: Want to have a general list in short term and have more specificity around actual work you all want to do as it relates to your priorities. Just thinking about that as you decide given committee capacity and other factors, having a list that's manageable and meaningful to you given time we have and knowing we're going in to legislative session. *Javier shares doc with current priorities and reviews topics raised over the past year.*	

	Javier: These are things I've compiled from the committee since start of the year. **Marin**: CBO Funding was a priority as well. I'd say its number two as a priority. And moving forward in capacity with different changes. **Javier**: We might have to have a special meeting to itemize and rank priority given we don't have quorum today. Will create a template for us to think about this and rank what we keep from previous topics, what our goals are, strategic elements we want to make impacts on. **Marin**: Maybe have a special meeting to prioritize this or maybe we can talk in September. **Javier**: Will create this template and have members look at template, rank order items and add what might not be there. **Melinda**: Familiar with mental health and behavioral health field. So much as happened that I'm wanting more information or pulse on where things are with credentialing and ripple effects. A lot of CCOs set limits on who they will accept as credentialed providers through them. There is a lot happening and going on that has shifted on priority and knowing what things are in motion since start of the year. **Javier**: Might be something we ask April to provide insight there. **Rachel**: Yes, April is our liaison with behavioral health team and works with behavioral health division. Will take that back so they can be the one that reports and facilitates presentation here. **Marin**: Do we want to set up a time or schedule a meeting for September? **Jaiver**: Yasmin can set up a poll for availability.	Questions on behavioral health will be sent to April Rohman for more insight. Yasmin to send scheduling poll to set up September meeting. Javier to create template for members to rank priorities.
Meeting Time Question	**Javier**: There has been a request to move the meeting time. In last year this time seems to work best for most people. Leaving it to committee to discuss if they'd like to move the meeting time or keep.	

	Committee members comment on keeping the overall meeting time. Discuss availability for September meeting. Meeting concludes at 4:25pm.	

Meeting Materials	ODHS RJC Update Slides.pdf 260819_Medicaid Sustainability RJC HS OHA Updates Prepared for the Rac

Zoom Chat

2026-08-19 14:59:58 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:
HEHSC Agenda:
Medicaid Sustainability Discussion -20 minutes
Agency Report Backs)ODHS (Addressing previous question: including CBO Funding Questions, POPS/LC)-20 minutes
Advocacy Priorities Discussion-60 minutes
Meeting Time Question

2026-08-19 15:01:47 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:
Medicaid Sustainability Discussion -20 minutes
Agency Report Backs)
ODHS (Addressing previous question: including CBO Funding Questions, POPS/LC)-20 minute
OHA Handout (Addressing previous question: including CBO Funding Questions, POPS/LC)-20 minutes
Advocacy Priorities Discussion-60 minutes
Meeting Time Question

2026-08-19 15:05:16 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:
Medicaid Sustainability Discussion -20 minutes
Agency Report Backs)
ODHS (Addressing previous question: including CBO Funding Questions, POPS/LC)-20 minute
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Meeting Time Question

2026-08-19 15:08:28 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:
Medicaid Sustainability Discussion -20 minutes
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ODHS (Addressing previous question: including CBO Funding Questions, POPS/LC)-20 minute
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Meeting Time Question

2026-08-19 15:14:52 From Javier Cervantes, Gov. Office (El, He, Him, His) to Hosts and panelists:
Medicaid Sustainability Discussion -20 minutes
Agency Report Backs)
ODHS (Addressing previous question: including CBO Funding Questions, POPS/LC)-20 minute
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Advocacy Priorities Discussion-60 minutes
Meeting Time Question

2026-08-19 15:32:28 From Cheryl Miller, ODHS (she/her) to Hosts and panelists:
SNAP WORK Rules Page: https://www.oregon.gov/odhs/food/pages/snap-time-limits.aspx

2026-08-19 15:33:13 From Cheryl Miller, ODHS (she/her) to Hosts and panelists:
https://www.lblpartnershipforhealth.org/2026/01/28/federal-response-forward-together-oregon-zoom-partner-webinars/

2026-08-19 15:33:47 From Cheryl Miller, ODHS (she/her) to Hosts and panelists:
Updates about Federal Changes: https://www.oregon.gov/odhs/news/Pages/federal-updates.aspx

2026-08-19 15:59:53 From Andre Bealer (he/him) Gov. Office to Hosts and panelists:
All, I am on childcare pickup duty today. Moving to my phone for the remainder of the meeting.

2026-08-19 16:19:41 From Elizur Bello to Hosts and panelists:
I will be out on the last week in September, but this time of day works for me

2026-08-19 16:21:46 From Elizur Bello to Hosts and panelists:
2nd works better for me, but can make the 9th work also

2026-08-19 16:22:10 From Melinda Del Rio to Hosts and panelists:
Thursdays work best for me but I can adjust my schedule with enough notice depending on prior commitments.

2026-08-19 16:22:43 From Elizur Bello to Hosts and panelists:
I will put a hold for the 2nd

OREGON DEPARTMENT OF Human Services



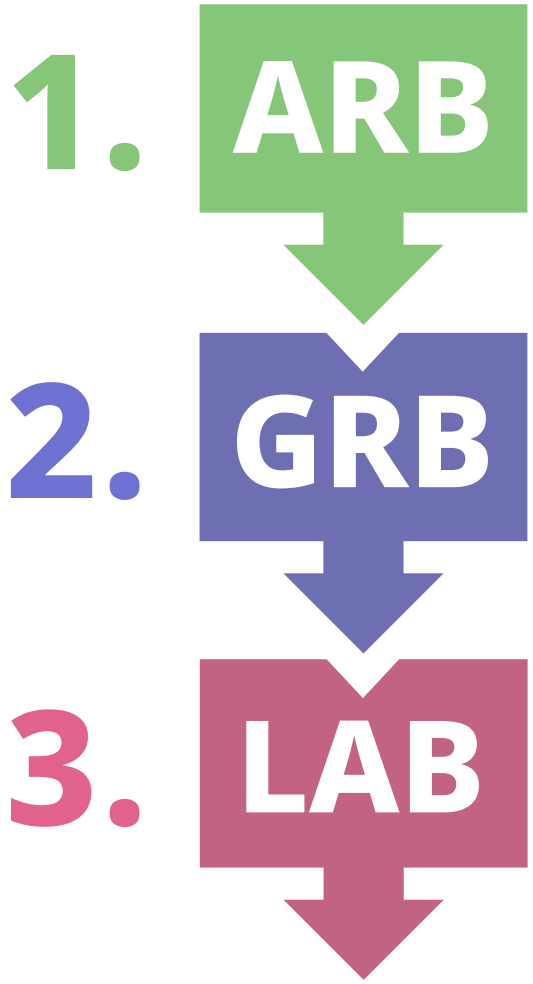


Health Equity and Human Services Committee (HEHSC) Update:

SNAP Access and CBO Partnerships

August 19, 2026 | **Prepared in advance of the 2027-2029 Governor's Request Budget (GRB)**

Budget Development: Community & Tribal Input



AGENCY REQUEST BUDGET (ARB)

- ODHS held two in-person and one virtual “Together We Plan” events
- Programs hosted 55+ engagement events
- Tribal Consultation on the ARB was held June 30, 2026 in Klamath Falls

GOVERNOR’S RECOMMENDED BUDGET (GRB)

we are here

September – December 2026

LEGISLATIVELY ADOPTED BUDGET (LAB)

January – June 2027

OREGON DEPARTMENT OF Human Services

Maintaining SNAP Access

Reduce Payment Errors

Tighten administrative accuracy to protect continued federal funding and participant trust.

Explore Administrative Approaches

Consider different operating models to reduce burden while preserving access.

Honor Government-to-Government Relationships

Support Tribes that want to administer their own Supplemental Nutrition Assistance Program (SNAP) benefits and expanding ODHS services and support directly in Tribal communities.

Partner with Community Based Organizations

Provide CBOs with language and community-specific tools, timely ongoing updates, and create Work Opportunities Investment Program.

OREGON DEPARTMENT OF Human Services

Grants to Community Based Organizations

Why a funding breakdown isn't a quick pull today

Each CBO Grant & Contract → **Tied to a Specific Funding Source** → **General Fund vs. Other** → **Requires Manual Budget Review**

Bottom line: ODHS doesn't have a consolidated way to produce a CBO grant funding breakdown today. Grants & Contracts funding is tied to its underlying funding source, so identifying General Fund vs. other requires Budget to review each grant or contract individually — and the committee's interest may be limited to specific grant/contract types.

660 Nonprofits

Grants, Personal Services Contracts, or Work Order Contracts

SECTION 3

Work Opportunities Investment Workgroup

Provide Funding through a Regional Trusted Intermediary

Trusted Intermediary Regional Grants → **Build Employer and Partner Connections** → **Participant Navigation and Warm Handoffs** → **Barrier Reduction and Retention Support:**

CORE FOCUS

Build community capacity—not just referrals—so people can access realistic opportunities and successfully navigate work activities.

OREGON DEPARTMENT OF Human Services

SNAP Changes & Who HR1 is Impacting

Loss of Benefits and Funding

From October 2025 through July 2026, more than **77,000 Oregonians lost Supplemental Nutrition Assistance Program (SNAP) benefits**, Including more than **38,000 due to work requirements**.

During that time, Oregon lost more than **$112 million in SNAP food benefits**.

Who Is Most Impacted by HR1

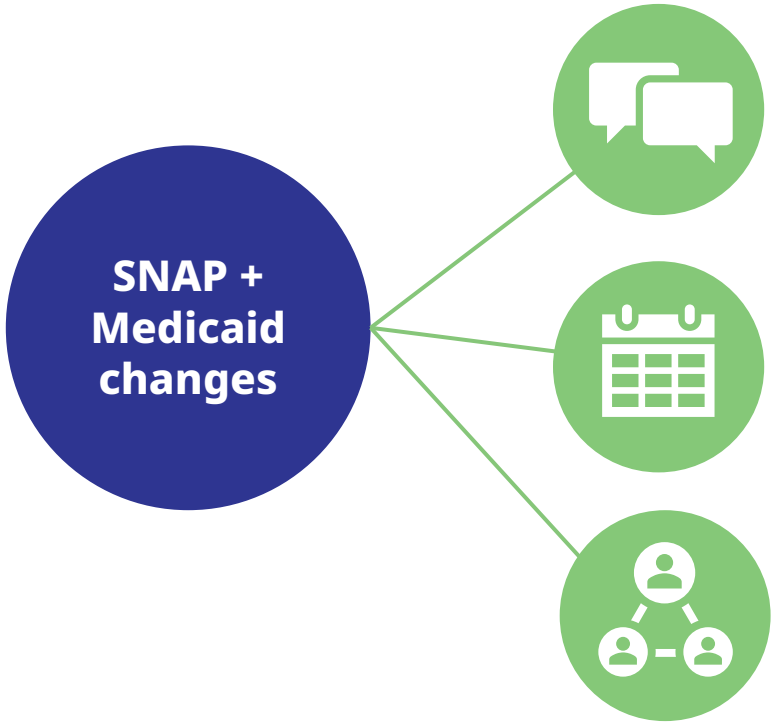
~50% of everyone who has come off SNAP since Oct. 2025 are Able-Bodied Adults Without Dependents (ABAWD).

~2,000 legally present non-citizens have lost SNAP eligibility due to HR1 changes.

Tribes have flagged: administrative burden and exemption gaps — e.g., excluding Tribal General Welfare payments from SNAP eligibility calculations, and expanding work-requirement exemptions for Tribal members.

OREGON DEPARTMENT OF Human Services

Keeping ODHS Assister Networks Informed



[Monthly Forward Together Webinar] (with OHA)

Weekly updates from the ODHS Federal Action Coordination Team (FACT)

Materials for Assister Networks and Community Based Organizations (CBOs)

WHY TOGETHER?

SNAP and Medicaid populations overlap significantly, so we work to keep Assisters and CBOs current on both at once.

OREGON DEPARTMENT OF Human Services

Ensuring Timely, Simple Communication

Underway Now

FACT Community Engagement branch is developing multi-language toolkits and community-specific outreach (e.g., for people experiencing homelessness).

Current channels: ODHS website updates, partner newsletters, and the joint Forward Together Webinars with OHA.

What other information would the Racial Justice Council like to receive from us – and how would you like to receive it?

Thank You | Questions?

OREGON DEPARTMENT OF
Human Services

RJC HHS Subcommittee: Medicaid Sustainability Group Report RJC Input

August 19, 2026

Kristina Narayan

Refresher: Grounding

~1.4 million Oregonians rely on the Oregon Health Plan (OHP)

57% of Oregon children receive care through OHP

~ 200,000* low-income adults are estimated to lose Medicaid coverage because of H.R. 1

$9.41 billion state and federal funds revenue lost by 2031 due to H.R. 1 policies

H.R. 1 Impacts: People, Funding

DRAFT for discussion purposes 11/24/2025			Estimated Biennial Budget Impact (in Millions)								
			2025-27			2027-29			2029-31		
Provisions that reduce OHP Caseload, leading to budget savings *	Section	Effective Date	General Funds	Other Funds	Federal Funds	General Funds	Other Funds	Federal Funds	General Funds	Other Funds	Federal Funds
Qualified non citizen definition change	71109	10/1/2026									
Work Requirements	71119	12/31/2026									
Redeterminations	71107	12/31/2026									
OHA Program Budget Savings Estimate			**5**	**-**	**(70)**	**(412)**	**-**	**(2,540)**	**(630)**	**-**	**(3,214)**
Provisions that Create Budget Challenges	Section	Effective Date	General Funds	Other Funds	Federal Funds	General Funds	Other Funds	Federal Funds	General Funds	Other Funds	Federal Funds
Provider Tax Changes	71115	10/1/2027 on passage, reductions start 1/1/2028	-	-	-	233	(331)	(229)	599	(856)	(600)
State Directed Payment Changes - Hospitals	71116		-	-	-	66	(96)	(70)	20	(44)	(55)
State Directed Payment Changes - IGT	71116		106	(156)	(105)	473	(685)	(473)	814	(1,178)	(814)
Healthier Oregon Program Emergency 90% to Title XIX	71110	10/1/2026	22		(22)	61		(61)	65		(65)
OHA Program Budget Challenges Estimate **			**128**	**(156)**	**(127)**	**833**	**(1,112)**	**(833)**	**1,498**	**(2,078)**	**(1,534)**
Total Estimated Program Impacts			**133**	**(156)**	**(197)**	**421**	**(1,112)**	**(3,372)**	**868**	**(2,078)**	**(4,748)**
Total Estimated State Funds Need - OHA Program			**133**			**421**			**868**		
Percentage of 2025-27 OHA Medicaid Program State Funds Budget			**1%**			**5%**			**10%**		

*The caseload estimates are not based on the official caseload forecast. The official forecast will be updated at a later time. These estimates are for discussion and magnitude purposes only. Changes in the caseload estimates are highly variable.

**Insurer's Assessment Revenue impact has not been estimated.

Options

- The report contains 46 options.
- The options represent strategies informed by the data reviewed by the advisory group.
- Not everyone in the group endorses all of these options.
- The Governor is not obligated to pursue any option presented in the report; the Governor will be briefed on the analysis and discussion that led to the options over the course of the next few months.

Next Steps

- Advisory group has concluded but budget process is just beginning
- Governor Kotek will review the report and be briefed by staff
- Gathering specific feedback from constituencies
- Budget figures and needs will change based on the overall enterprise environment, including but not limited to caseload forecasts (September)
- Governor's Recommended Budget by 12/1 (ORS 291.218)
- Legislative session begins
- Legislature to adopt the final budget

Specific Engagements

- Oregon Health Policy Board
- Local Government Advisory Committee (LGAC)
- Disability Rights Oregon
- Salud Y Poder
- Oregon Law Center
- Coalition of Community Health Clinics (TBD)

Feedback Themes So far

Focus Areas

- Modest reductions to provider rates but preserve incentives for preventative services and bilingual providers, etc.
- Limit OHP services before cutting services altogether
- Reducing complexity is broadly agreeable
- Understanding Oregon's benefits may be more generous, and some utilization controls may need to be restored

Concerns

- Where seeking volume/streamlining administrative delivery, ensure pathway for alternatives if critical for members (i.e., exceptions)
- Timely pay if processes move to Fee-for-Service (carved out)
- Need to interrogate where and how people use behavioral health services, be mindful of downstream impacts
- Impact to child/maternal health

RJC Subcommittee Feedback

For discussion:

- Values and principles
- Implementation considerations
- Downstream impacts
- Other areas?

Process:

Option 1) members read the report, provide thoughts to chairs for summary by letter

Option 2) members read the report, have discussion at next meeting

Option 3) GRB strategies identified between 9/14-10/10, have discussion about actual items up for consideration

OREGON DEPARTMENT OF Human Services



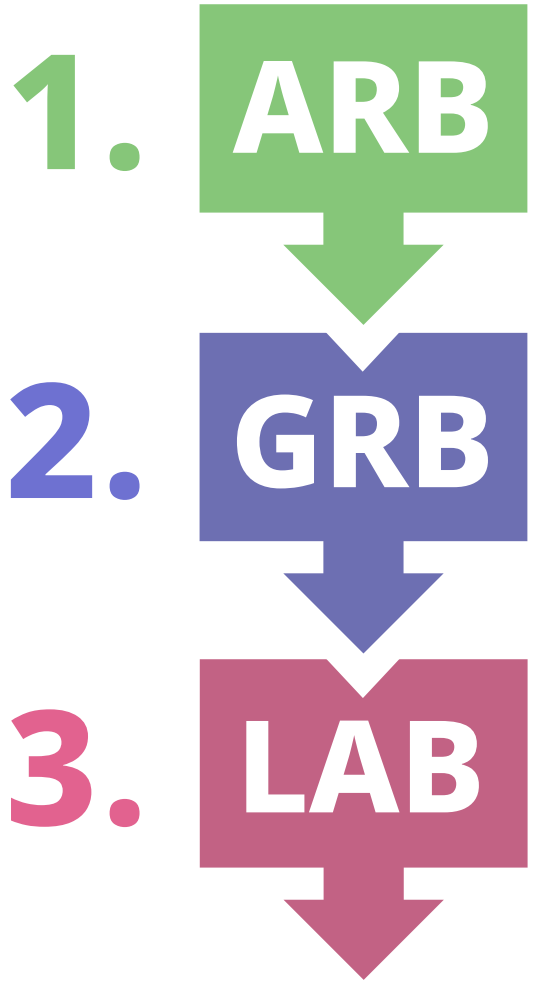


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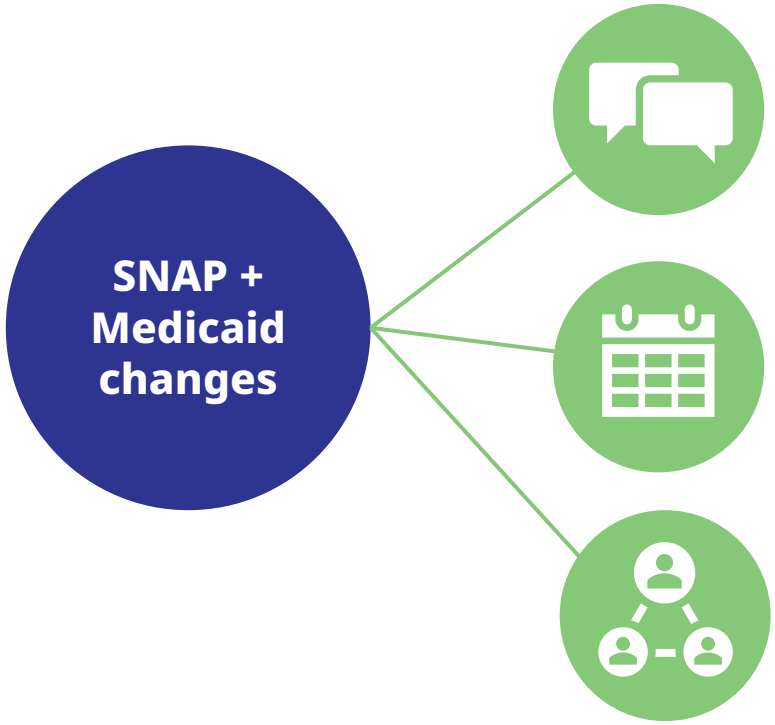
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OREGON DEPARTMENT OF
Human Services

OHA Updates Prepared for the Racial Justice Council – Health Equity Committee

August 19th, 2026

1. **Is there an opportunity to work with agencies to better understand lay of the land across all divisions to see what CBO grants are available, including OHA grants. Where are there deeper partnership opportunities with CBOS?**

   OHA is committed to transparency and accessibility in how we fund community-based organizations (CBOs). Grant opportunities are typically advertised through multiple channels to ensure broad awareness. These include announcements through established listservs that reach CBOs, local partners, and community networks, as well as postings on Oregon Buys, the State of Oregon's procurement platform. As OHA finalizes its 2027-29 budget, CBOs can expect to see newly funded grant opportunities beginning in Fall 2027.

   We recognize that CBOs and partner agencies may benefit from a clearer cross-divisional view of what funding streams currently exist and where collaborations are already in place. To support this, we would be happy to arrange a meeting to provide an overview of our existing CBO/OHA partnerships, including active grants across divisions and emerging areas for deeper collaboration.

2. **What are the financial implications of moving HOP to COO for open card?**

Early estimates of the 2027-29 fiscal impact of moving Healthier Oregon members from CCOs to Open Card are below. (Amounts in the table are in millions)

	State Funds	Federal Funds	Total Funds
Program Cost Savings	$ (70.8)	$ (20.0)	$ (90.8)
Administration of Fee-For-Service	$ 9.4	$ 11.2	$ 20.6
Net Total	$ (61.3)	$ (8.8)	$ (70.1)

Please note that OHA is further calibrating numbers ahead of Fall rebalance, so these figures will likely change.

OHA is not considering cost containment measures for Healthier Oregon. OHA always aims to balance cost control with quality and equity in health care delivery by offering the Oregon Health Plan populations, including Healthier Oregon, with the same services.

3. **How is inflation taken into account for CBO contract awards?**

The 2027-29 Continuing Service Level (CSL) budget build allowed the addition of 4.9% general inflation. CSL is the first step in developing the 2027-29 budget and reflects only what is necessary to maintain the same level of services currently provided. Policy changes or program expansions, including those related to community grants, cannot be included at the CSL stage. Additionally, CSL budget requests do not consider the state's available financial resources.

As we move further into the budget development process, all state agency budget requests for 2027-29 will be reviewed and must be balanced to available state revenues. This balancing first occurs through the Governor's Recommended Budget and later through the Legislature's deliberations. Depending on the final adopted budget, inflationary adjustments beyond the initial 4.9%, including those that might affect community grant allocations, may be incorporated if state resources allow. Final funding levels, including any grant-related capacity, will not be known until the conclusion of the 2027 Legislative session. Because reductions may be needed to align with available revenues, OHA will not know the final budget available until approximately July 2027.

4. **How is OHA allocating and connecting reimbursements with those [providers] who are succeeding with outcomes?**

Reimbursements typically refer to payments issued for health services rendered, such as Medicaid claims. Grant programs are more flexible and can be adjusted in future grant cycles to account for outputs, outcomes, work plan deliverables, and overall performance.

5. **What is the contact information for OHA ombuds?**

   The Oregon Health Authority has a team of staff who advocate for Oregon Health Plan (OHP) members. These staff are called OHP Ombudspersons. The goal of the Ombuds team is to make sure OHP members get quality health care.

   The OHA Ombuds Office can be reached at 1-877-642-0450 TTY 711 or by emailing OHA.OmbudsOffice@odhsoha.oregon.gov

   Information about the program can be found here: https://www.oregon.gov/oha/erd/pages/ombuds-program.aspx

1. **Overview of funding for the 2025-27 grant cycle to conduct OHP community engagement and navigation**

   The OHA Office of Community Health and Engagement (OCHE) within the External Relations Division has granted the following total funding amounts through the 2025-27 grant cycle:

   - Healthcare System Navigation Grant Program - $14,720,674.00 (Complementary mix of General Fund and Federal Funds)
   - Healthier Oregon Grant Program = $5,319,839 (General Fund)

   As of August 18, 2026, the number of assisters serving and supporting communities statewide is 1,726.

Funded Community Partner Organizations

Healthcare System Navigation Grant funded Organizations:

Afghan Support Network

Arcoiris Cultural

A.Y.C.O.

Asian Health and Service Center

Cascade AIDS Project

Catholic Community Services

Central City Concern

Centro Cultural del Condado de Washington

Coos County

Columbia Health Services

Corvallis Daytime Drop-in Center

Crook County

El Programa Hispano Católico

Ethiopian and Eritrean Cultural and Resource Center

Harney County Health Department

Hood River County Health Department

Immigrant and Refugee Community Organization

Klamath Health Partnership

La Clinica

Lake Health District

Learning Empowerment to Able the Disabled (LEAD)

Lifeways, Inc.

Lutheran Community Services Northwest

Micronesian Islander Community (MIC)

Nehalem Bay Health Center and Pharmacy

North by Northeast Community Health Center

Northeast Oregon Network

Northwest Human Services

Oregon Department of Corrections

Oregon L.E.A.D

Portland Public School

Project Access NOW

Rogue Community Health

Slavic Community Center of NW

Somali American Council Of Oregon

Thrive Central Oregon

Urban League of Portland

Virginia Garcia Memorial Health Center

Healthier Oregon Grant funded Organizations:

Andares

Asian Health and Service Center

Beaverton Resource Center

Casa Latinos Unidos

Catholic Community Services

Centro Cultural de Washington County

El Centro NW

Euvalcree

Interface

La Clinica

Latino Network

Mano a Mano

Mosaic

Northwest Family Services

Ollala Center

ONE Community Health

Oregon Latino Health Coalition (former)

Oregon L.E.A.D

Salud Connect

IRCO

Unete

Virginia Garcia

WeCare

**Please note that OHA will need additional time to develop a comprehensive list of all community partners funded across the entire agency. We are aiming to have this ready for the Committee later this Fall.*