

Public Comments

The [Health Care Market Oversight](#) (HCMO) program reviews proposed health care business deals to make sure they support Oregon's goals of health equity, lower costs, increased access, and better care. This document presents public comments related to the HCMO review of 087 Cascade High Value Network. OHA accepted public comments during the preliminary review period. Public comments were received via email to hcmo.info@oha.oregon.gov, voicemail, or by filling out the [Public Comment Form](#). Comments are presented below in the order received and may include typos or misspellings. Personal contact information for individuals has been removed.

OHA expresses no views on the substance of these comments, and their publication does not constitute an endorsement by OHA of the views expressed.

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact us by email at hcmo.info@oha.oregon.gov or by phone at 503-945-6161. We accept all relay calls.

1. 9/10/2026

Two observations for OHA's awareness at this preliminary stage:

- First, we are not aware of any consultation with Oregon's FQHCs during the network's formation, and we would encourage solicitation of the perspectives of those organizations, especially those already operating in partnership with each participating hospital.
- Second, if appropriate after completion of our review, we may submit substantive comment sharing our observations about the transaction's implications for provider organization agreements with Coordinated Care Organizations (CCOs). The filing's competitive analysis is organized by county; however, the eleven participating hospitals are distributed across only three CCO service areas. We believe this distinction is material to OHA's review.

Thank you for your consideration.

Nicolas Powers, MBA, FACHE

Chief Executive Officer

Winding Waters Clinic

2. 9/14/2026

My name is Jared Rogers and I serve on the Board of Trustees for Grande Ronde Hospital (GRH). I support the Cascade High Value Network (Network) for a number of reasons.

Since the Covid outbreak in 2020, the health care industry has lost many professional providers and support staff leading to workforce shortages that still plague us at GRH. I believe the Network will allow participating hospitals to share best practices and care coordination, like telehealth opportunities, that will help us in this regard.

I believe the Network will also create the opportunity for each member hospital to share resources and expertise in a way that will certainly improve the quality of care provided for the patients in their individual communities.

Perhaps most importantly, the Network allows GRH to preserve our local identity control, and community focus. We will be able to keep health care services and initiatives local while using Network opportunities like shared quality initiatives, care coordination, and other member expertise to strengthen and expand the offerings we provide to our patients.

For these reasons, I fully support the Cascade High Value Network and would encourage your approval of this initiative.

Thank you for the opportunity to provide input.

Jared Rogers

3. 9/15/2026

My name is Michael Billman and I serve on the Board of Directors for Grande Ronde Hospital.

I am writing in support of the Cascade High Value Network.

As part of my regular employment I frequently work in high intensity forest collaborative groups centered on challenging issues. As such I very much appreciate the value of working in large, collaborative settings.

Rural hospitals face increasing challenges related to workforce shortages, administrative complexity, technology investments, and changes in healthcare reimbursement. Seeing an opportunity for smaller rural hospitals to work together, collaboratively, is a potential huge win for our extended health care system, and hence, society as a whole.

The Cascade High Value Network offers an opportunity for independent rural hospitals to collaborate while maintaining local ownership, governance, and accountability. This approach allows hospitals to work together on quality improvement, care coordination, and population health initiatives while continuing to make decisions locally.

I believe the Network has the potential to strengthen healthcare access, improve quality, support health equity, and enhance the long-term sustainability of rural healthcare services throughout Oregon.

For these reasons, I support the Cascade High Value Network and respectfully encourage approval of this initiative.

Thank you for the opportunity to provide input.

Michael Billman

4. 9/16/2026

I am Kathleen Cathey. I serve on the Board of Directors for Grande Ronde Hospital and retired in 2025 after serving for nearly 20 years as Eastern Oregon field staff for US Senator Ron Wyden. In my years on the job, I worked with hospitals and clinics

across rural Oregon and witnessed the incredible work that independent, community-based hospitals perform to meet community needs.

I also witnessed the struggle to maintain services in the face of facility and equipment needs, increasing costs and the rise of distrust in standard medicine.

Rural independent hospital administrators deal with the same complex systems, in terms of billing, EHRs, policies, purchasing, staff training and recruitment, oversight, rate negotiation and cybersecurity as the larger corporate structures. The CHVN gives us an opportunity to collaborate and build shared capacity without losing autonomy or community accountability.

Grande Ronde Hospital is one of the larger independent hospitals in our area, part of an interdependent system and an access midpoint for our neighbors. For instance, we serve birthing moms who cross the mountain pass because the Baker hospital closed their OB program. Pregnant women can't reliably expect OB care in Idaho because of the many maternity closures in that state, so we are the closest, safest resource.

Our hospital has been investing in equipment, technology and facility upgrades so our rural residents can access the care they need. At a time when gas is \$5.25 a gallon, and a reasonable hotel costs \$150 per night, many of our people simply cannot afford to travel for medical care as they have over the decades.

I'm deeply impressed by the move toward the CHVN; it's a more collaborative and efficient model, reducing admin time and dollars so we can focus on meeting high standards and keeping our community healthy.

I encourage you to approve this application. Please do not hesitate to reach out if you have questions of me.

Thank you!

5. 9/17/2026

My name is Gary Bell, and I serve on the Board of Trustees for Grande Ronde Hospital.

I am writing in support of the Cascade High Value Network. Having spent 34 years in law enforcement, including six years as Chief of Police, I have seen firsthand the value of organizations working together toward common goals. Rural hospitals face

significant challenges in workforce, technology, reimbursement, and the increasing complexity of healthcare delivery. Collaboration provides an opportunity to address these challenges while maintaining local ownership, governance, and accountability.

I believe the Network can strengthen access to care, improve coordination and quality, and provide valuable shared resources for rural communities throughout Oregon. Most importantly, it offers a way for rural hospitals to work together while remaining accountable to the communities they serve.

For these reasons, I support the Cascade High Value Network and respectfully encourage approval of the initiative.

Thank you for the opportunity to provide public comment.

6. 9/18/2026

My name is Lewis Baynes. I serve on the Board of Trustees for Grande Ronde Hospital and was privileged to serve Grande Ronde Hospital as an Emergency Medicine M.D. for forty years. I am writing in support of the Cascade High Value Network (CHVN).

I support the CHVN because it offers a pathway for rural hospitals to collaborate without losing local ownership and control. Over the course of my career, I have had an inside view of the many challenges facing rural hospitals in Oregon as healthcare delivery has become more and more complex, expensive and increasingly less sustainable. To survive and maintain local control it is imperative that rural hospitals band together and find solutions to the challenges which include staffing shortages, rising operating and technology costs, changing payment requirements and administrative complexity.

Access to care can be greatly improved for our rural populations through the CHVN by improved care coordination, shared best practices, population health initiatives, telehealth opportunities & data-driven quality improvement. This collaborative model encourages rural hospitals and providers to learn from one another, share best practices, and continuously improve the quality of care delivered to patients. Building shared infrastructure gives access to resources i.e. technology & care coordination that may not be otherwise afforded by each individual hospital.

In summary, as a board member, I strongly believe collaboration among independent hospitals is vastly superior to consolidation. As these rural, critical access hospitals work together we may anticipate improved results such as reduced costs through shared technology and capital improvements, improved coordination of care, streamlining health care access locally as well as for specialty care referrals and improving efficiencies.

Thank you for the opportunity to express these considerations along with my support for CHVN.

7. 9/19/2026

My name is William Gamble and I serve on the Board of Trustees for Grande Ronde Hospital in La Grande, Oregon.

I am writing in support of the Cascade High Value Network.

Rural hospitals face increasing challenges related to workforce shortages, administrative complexity, technology investments, and changes in healthcare reimbursement. These challenges can be difficult for individual hospitals to address alone.

The Cascade High Value Network offers an opportunity for independent rural hospitals to collaborate while maintaining local ownership, governance, and accountability. This approach allows hospitals to work together on quality improvement, care coordination, and population health initiatives while continuing to make decisions locally.

I believe the Network has the potential to strengthen healthcare access, improve quality, support health equity, and enhance the long-term sustainability of rural healthcare services throughout Oregon.

For these reasons, I support the Cascade High Value Network and respectfully encourage approval of this initiative.

Thank you for the opportunity to provide input.

William Gamble

8. 9/19/2026

Hello,

I have included my letter of support for the Cascade Network.

While I represent OHSU in the capacity of a rural leader, the attached letter expresses my personal and professional views.

Thank you.

Dear OHA Healthcare Market Oversight Program Members,

I am writing in support of the Cascades Rural High Value Network application. As a fourth-generation rural Oregonian and PhD-prepared registered nurse with 45 years of rural nursing experience, I offer this perspective from both lived and professional experience. As Associate Dean for the OHSU School of Nursing in La Grande, Regional Associate Dean for the OHSU Campus for Rural Health Education in Northeast Oregon, and a Trustee on the Grande Ronde Hospital Board, I work closely with rural health systems across the region and witness firsthand both the strengths and challenges of rural healthcare.

A Clinical Integrated Network/High Value Network, such as the Cascades Rural High Value Network, is a pragmatic and forward-looking approach to sustaining rural healthcare in today's evolving healthcare market. These networks bring clinicians and healthcare organizations together to improve health outcomes, strengthen system capacity, reduce costs, and strategically share resources. This type of collaboration reflects the longstanding tradition of rural communities working together to solve problems, share resources, and sustain essential services, while advancing the goals of Oregon's Rural Healthcare Transformation Program.

By integrating rather than duplicating functional processes, member organizations can achieve efficiencies that would be difficult to realize independently. The Cascades Rural High Value Network enables rural organizations to achieve the scale necessary for long-term sustainability while preserving local governance, local decision-making, and local access to care. In rural communities, collaboration is often what makes autonomy possible. Through shared recruitment, credentialing, population health initiatives, performance improvement, purchasing, and technology, rural organizations

can strengthen capacity, improve efficiency, and keep care close to home. This type of innovation has long positioned Oregon as a national leader in healthcare.

In closing, I recognize the significant challenges facing rural healthcare, particularly amid ongoing uncertainty in federal healthcare funding and policy. At the same time, I see a unique opportunity to strengthen the long-term sustainability of rural health systems through purposeful collaboration. The Cascades Rural High Value Network represents that opportunity. By creating a strong collective voice and a framework for coordinated and collaborative action, it will help ensure equitable access to high-quality healthcare, strengthen the sustainability of rural health systems, and support the economic vitality of the communities they serve.

Patricia Barfield, PhD, RN (she/her)

9. 9/20/2026

My name is Tom Bedell. I currently serve as the Chairman of the Board of Directors for Southern Coos Health District which includes the Southern Coos Hospital & Health Center (SCHHC) in Bandon, Oregon.

I am writing to express my support for the application from the Cascades Rural High Value Network and its approval.

I have served on the SCHHC Board of Directors for a total of over 8 years, and have seen first-hand how difficult it is for a small independent rural hospital to achieve financial viability due to our relatively low volume of patient care services. I have also seen how critically important it is for us to keep our small rural hospital open and continuing to provide services in our community. One reason I support the CRHVN is that it provides an opportunity to improve our finances, while also remaining independent. I anticipate that our hospital would gain purchasing strength by being part of this network and thus better control our expenses. One example is the opportunity to share expensive medical personnel among hospitals. In order for our hospital to provide a full array of Radiology and Diagnostic Imaging services, we need to employ at least 1 mammography technician, 1 ultrasound technician, 1 CT scanning technician and 1 MRI technician. Why not use our clinically integrated network to hire staff for all 3 hospitals in Coos County and share them among our facilities? I am certain that we would save money. The same is true of Information Technology services. One IT help desk could support multiple facilities.

There are many more examples I could list, and the benefits are not only financial.

I support the Cascades Rural High Value Network and respectfully request approval of this initiative.

Sincerely,

Tom Bedell

About HCMO

The Healthcare Market Oversight Program reviews proposed health care business deals to make sure they support statewide goals related to cost, equity, access, and quality. For more info, you can connect with HCMO staff:

Health Care Market Oversight
800 NE Oregon St, Suite 772
Portland, OR, 97232
503-945-6161
hcmo.info@oha.oregon.gov
oregon.gov/HCMO

