2022 SHARE Initiative Detailed Spending Report PacificSource Community Solutions-Central Oregon CCO

Instructions: Describe all SHARE funds your CCO spent January 1–December 31, 2021. Submit your completed table to CCO.MCODeliverableReports@dhsoha.state.or.us by June 30, 2022. Questions? Please contact Transformation.Center@dhsoha.state.or.us

Paid to [SDOH-E partner name or "CCO internal"]	Project, program or initiative associated with payment	Brief description of services or infrastructure to address SDOH-E *See spending exclusions below	Total amount committed	Amount paid through December 31, 2021	funding from other sources if	Confirm spending has NOT (and will not) be counted as health-related services
Central Oregon Frequent Users System Engagement (FUSE)	Landlord Engagement and Retention Program	The project's goal is to increase housing placements for FUSE participants that are chronically homeless individuals. In addition, funding helped create a collaborative program to serve additional unhoused or at-risk families and individuals selected to receive an Emergency Housing Voucher (EHV). Benefits from this project included a package to incentivize leasing to participants. This includes renters insurance, pre-screening, outreach materials, and a dedicated Landlord Liaison. Landlord participants of the FUSE Permanent Supportive Housing program are also eligible to access a "Landlord Mitigation Fund" which acts as additional insurance for property owners willing to lease to individuals with significant barriers.		57,991.63	N/A	
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*Note - SHARE Initiative dollars must be segregated for SHARE Initiative spending only. SHARE dollars may not be spent on:

- Medicaid-covered services (a CCO may not count expenses that are factored into its global budget);
- Expenses that have been reported separately, such as health-related services (a CCO may not double-count spending);
- General administrative costs that are not directly related to a SDOH-E and/or health disparities related initiative;
- General administrative costs that are otherwise necessary for the regular business operations of the CCO and compliance with federal/state requirements (for example, providing interpreters), including any staffing required by contract (for example, traditional health worker liaison);
- · Sponsorships/advertising;
- · Equipment or services to address an identified medical need (for example, corrective lenses, specialized clothing);
- · Member incentives (for example, gift cards for accessing preventive services);
- · Costs for SDOH-E related research where findings are only used internally, only by another private entity, or are proprietary;
- Educational or promotional items or goods for the purpose of general distribution through a health fair or other event not targeted at populations experiencing health disparities;
- · Political campaign contributions; or
- Advocacy specific to CCO operations and financing (as opposed to advocacy for policy that advances SDOH-E
 objectives).