

Oregon Health Plan (OHP) Open Card Lived Experience Advisory Panel Annual Report, 2024-2025

Executive summary

This report provides an overview of the purpose, design, and development of the OHP Open Card Lived Experience Advisory Panel (LEAP) during its first year, February 2024- February 2025. Oregon Health Authority (OHA) and LEAP members collaboratively designed LEAP to engage members' lived experience to provide recommendations to Medicaid leadership and staff on how to improve Open Card (also known as Fee-for-Service, or FFS).

The "First Year in Review" section (pages 5-17) shows how LEAP members shaped key parts of the initiative, including new member recruitment, orientation and feedback processes grounded in their lived experiences and priorities. The "Looking Forward: Goals for 2025-2026 section (pages 18-21) outlines plans to build on member insights through a new LEAP-OHA collaboration starting in June 2026. Through a member-led "advisory proposal process," LEAP members will co-develop projects that aim to strengthen Open Card services and inform Medicaid policy decisions.

Table of contents

Executive summary	1
OHP Open Card LEAP background	3
LEAP purpose	3
First year in review, 2024-2025	4
Table 1: LEAP activities and milestones, February 2024-2025	5
New member recruitment	7
New member education	8
Member testimonials	8
LEAP feedback processes and themes	13
Looking forward: LEAP goals 2025-2026	17
LEAP Advisory Proposal Process	17
Reporting progress	17
Appendix A: LEAP Group Agreements (April 2024)	18
What are group agreements?	18
Group agreements	18
Appendix B: OHP Open Card Lived Experience Advisory Panel (LEAP) Charte	er 19

OHP Open Card LEAP background

OHP is Oregon's Medicaid program. It provides health care coverage for people from different backgrounds across Oregon. As of March 2025, about 93 percent¹ of OHP members are enrolled in a coordinated care organization (CCO) based in their region. A CCO is a network of all types of health care providers who have agreed to work together in their local communities to serve people who receive health care coverage under OHP. About 7 percent of OHP members (over 100,000 people) receive their benefits through Open Card (also known as Fee-for-Service, or FFS). Open Card members get all or part of their health care services (including physical, behavioral, and dental) from providers through a direct relationship with OHA.

OHA leadership is committed to listening to people who use OHP and engaging with communities to make policy, program, funding, and resource decisions based in their lived experience(s). One way OHA does this is through the OHP Open Card Lived Experience Advisory Panel (LEAP). The LEAP is Open Card's community advisory group in Oregon. LEAP members include past or present Open Card members and their families and people who assist members and their families navigate the Open Card system. Together, they share their experiences to advise OHA on policies and make recommendations to improve health care services for all Open Card members.

LEAP purpose

LEAP (see <u>link</u> to LEAP website) is a member-led collaboration focused on improving Open Card services. LEAP engages the lived experience of OHP Open Card members and those who support them, so that member insights guide improvements to Open Card policies and services. Through a strong collaborative partnership with OHA, LEAP lifts up member voice in decision-making about Open Card policy, funding, and services. LEAP leads improvement efforts that align with OHA's strategic goal to eliminate health inequities by 2030 (Figure 1). This includes developing more

¹ Source: Medicaid Enrollment Report, accessed March 2025 at https://www.oregon.gov/oha/HPA/ANALYTICS/Pages/medicaid-enrollment.aspx.

responsive feedback systems, influencing internal processes, and strengthening how OHA engages with members.

LEAP seeks to establish an Open Card feedback system that increases the responsiveness of internal Medicaid policy development to member voice. LEAP's OHA-member collaborative improvement processes will also help build OHA's internal capacity for eliminating health inequities by providing a model for leveraging member voice to improve Medicaid health care services. The LEAP 2024-2025 Annual Report describes the collaborative approach that LEAP members and OHA staff have built to ensure member perspectives impact Open Card policy, program, funding, and resource decisions.

OREGON Strategic Goal Eliminate health inequities in Oregon by 2030 **Building OHA's** Strengthening Fostering internal capacity **Transforming** Achieving access to healthy and commitment behavioral healthy Tribal families and to eliminate affordable health communities care for all environments health inequities

Figure 1: OHA's strategic goal²

First year in review, 2024-2025

LEAP's first group of advisory members started their two-year term (2024-2026) after a thoughtful recruitment, application and selection process. In this first year, the focus

² Source: https://www.oregon.gov/oha/Pages/Strategic-Plan.aspx

was on ensuring members had a strong understanding of the Open Card system. Simultaneously, LEAP's work centered on building governance and decision-making processes needed to be successful. Intentional effort to build mutual trust and respect, which are keys to true collaboration, were at the forefront of the work. LEAP members have shaped the collaborative process by developing new models for member recruitment, orientation, and feedback. These efforts laid the foundation for LEAP to make annual recommendations that will help Medicaid leaders and staff improve Open Card policies and services. The "Activities and Milestones Table" (Table 1, pages 5-8) below shows LEAP's month-by-month progress from February 2024 to February 2025. The sections that follow show how LEAP and OHA co-developed a member-led advisory model. Together, LEAP and OHA are pioneering innovative approaches to prioritize the voices of those with lived experience at various levels of the health care system. This creates greater opportunity for more impactful Open Card improvements now and in the years ahead.

Table 1: LEAP activities and milestones, February 2024-2025

Month	Activities and Milestones		
February 2024	Education and Context Setting: OHA held kickoff meeting		
	introducing the people, purpose and work of LEAP.		
March 2024	Education and Context Setting: OHA provided OHP (Medicaid) and		
	Open Card overview presentation for LEAP members.		
	Support Structure and Process Development: OHA staff and LEAP		
	members collaborated to begin making Group Agreements		
	(Appendix A) and OHA-LEAP collaboration processes.		
April 2024	Support Structure and Process Development: OHA collaboratively		
	developed the "Bike Rack" process with LEAP to gather the		
	questions, concerns, and ideas of LEAP members. OHA staff and		
	LEAP discussed and adopted the LEAP Group Agreements. OHA		
	staff and LEAP discussed plans for a LEAP Charter.		
May 2024	Education and Context Setting: The OHA Ombuds Program		
	presented to LEAP members about the OHP (Medicaid) grievance		
	system and OHP/Open Card member rights.		

Month	Activities and Milestones	
	Support Structure and Process Development: OHA staff introduced	
	and shared the LEAP Member Topic survey with members.	
June 2024	Education and Context Setting: The OHA Client Services Unit	
	(CSU) presented to LEAP members about the CSU program and	
	services.	
	Support Structure and Process Development: OHA staff and LEAP	
	members established a LEAP Charter subcommittee, which	
	developed a draft of the LEAP Charter through a work session.	
July 2024	Education and Context Setting: The Health Policy and Analytics	
	Division presented to LEAP members about Open Card	
	demographics and member experience.	
	Support Structure and Process Development: The LEAP Charter	
	Subcommittee met and refined the draft LEAP Charter.	
August 2024	Decision-making: LEAP members adopted the LEAP Charter	
	(Appendix B).	
	Support Structure and Process Development: OHA staff presented	
	a summary of LEAP feedback themes (Table 2) developed from	
	the LEAP Bike Rack and Member Survey data. LEAP members	
	used the decision-making model from the Charter to make a	
	Recruitment Subcommittee to address LEAP recruitment.	
September 2024	Education and Context Setting: The OHA Hearings Team	
	presented to LEAP members about the OHP/Open Card Hearings	
	process and a future Open Card Appeals process.	
October 2024	Decision-making: LEAP members approved the LEAP recruitment	
	flyer and LEAP application content questions.	
	Support Structure and Process Development: OHA staff and LEAP	
	members discussed next steps for recruitment and the need for a	
	LEAP project development process to carry out LEAP feedback.	
November 2024	Support Structure and Process Development: OHA staff and LEAP	
	discussed a draft LEAP Project Development Process (Appendix	
	D), and LEAP member provided feedback. OHA staff and LEAP	

Month	Activities and Milestones	
	members also further developed recruitment plans for LEAP New	
	Member Information Sessions (held in March 2025).	
December 2024	Decision-making: LEAP members used the LEAP Charter decision	
	making model to approve the LEAP Application for 2025 new	
	member recruitment.	
January 2025	Education and Context Setting: OHA staff worked with LEAP	
	members to learn how to use Basecamp software, a	
	communications and file storage platform now used by LEAP.	
	Support Structure and Process Development: LEAP members and	
	OHA staff reviewed the LEAP application Scoring Process.	
February 2025	Support Structure and Process Development: OHA staff and LEAP	
	members reviewed the application scoring rubric, and LEAP	
	members shared additional feedback to shape the final scoring	
	process.	

New member recruitment

LEAP's first member recruitment took place from July to December 2023. A second round began in February 2025 and will wrap up in May 2025. Starting in 2025, LEAP will recruit annually.

- For the first LEAP recruitment (July- December 2023), the Medicaid OHP
 Community Engagement team worked with staff from the OHA Equity and
 Inclusion Division and the External Relations Division (Ombuds Team) to
 develop the process.
- The application questions and scoring process were designed to prioritize the lived experience of Open Card members and broad demographic and geographic representation.
- OHA staff promoted the opportunity with community-based organizations and internal teams using email announcements, listservs, newsletters, and social media channels.
- OHA onboarded 13 individuals with Open Card lived experience as LEAP members in February 2024.

- New members were welcomed through initial LEAP orientation and optional one-on-one meetings (December 2023 and January 2024), and a LEAP new member orientation session in March 2024.
- LEAP monthly meetings are all virtual and held on the Zoom platform.

LEAP members may be eligible for compensation for time spent working with the advisory panel.

New member education

As part of the initial orientation in March 2024, OHA staff gave LEAP members an Overview of Medicaid and the Open Card system. Afterwards, LEAP members asked thoughtful and in-depth questions that helped shape future learning sessions throughout the year. In response, OHA coordinated the following presentations:

- OHA Ombuds Program (May 2024): Shared information about OHP (Medicaid) member rights, the grievance system, and trends in Open Card service denials and member complaints.
- Client Services Unit (June 2024): Explained how people apply for and access OHP and described how the unit supports Open Card members.
- Health Policy and Analytics (July 2024): Provided data on who uses Open Card, including demographic and geographic trends, and shared results from a member satisfaction survey.
- Hearings Team (September 2024): Discussed member rights to a hearing if services are denied, what to expect from the process, and how OHA supports members during the hearings process. The Medicaid Provider Clinical Support Unit also shared an overview of the new Open Card Appeals system with LEAP members.

Member testimonials

The testimonials below highlight the leadership, insight, and commitment LEAP members bring to improving the Open Card system. After their first full year of service (February 2024-March 2025), all five current LEAP members shared reflections on their experiences. The testimonials reflect:

- The diverse backgrounds, perspectives, and motivations that members bring to LEAP.
- How members deepened their understanding of Medicaid and the Open Card system.
- The ways members have shaped the processes for making recommendations.
- Bold and innovative ideas for how to improve Open Card services.

LEAP members shared these thoughts during the March 11, 2025 New Member Information Session and in follow-up emails. Their words offer powerful insight into why this work matters and how lived experience is set to make meaningful change in the Open Card system.

Member 1

"I received an email asking if I would like to apply to become a member of a new OHA program called LEAP that was starting up to find individuals who had experience with using open card or helping others navigate open card services. Having over 30 years experience working with adults and children born with or currently living with intellectual delays and developmental disabilities population and having personal experience with my only sibling who was born with down syndrome, I thought I would make a good candidate for the advisory panel that OHA was creating.

"I am currently a personal support worker and a former Special Education Paraeducator and mostly wanted to join out of curiosity with the hope of making life better and easier for those who are non-verbal, who cannot speak for themselves—I wanted to be a voice and advocate for them.

"Since becoming a LEAP member, I've learned so much more than I had originally expected. Mostly about the many bureaucratic issues Open Card members are struggling to navigate just to receive the services they require. Over the past year I have discovered via personal testimonials the struggles and challenges Open Card patient face a ranging from prescription coverage to long term health care.

"I have also been made aware of the tragic inequalities of Open Card billing. I now understand that doctors accepting Open Card receive less for Open Card services and will deny Open Card patients services because the doctors want to make a fair wage just like everybody else. And sometimes people, including physicians, look down on

Open Card members. This whole game of inequality and denial really irks me in the wrong and unethical way.

"One of the main ideas I came up with to improve Open Card would be to develop an online application (app) that makes it easier for Open Card members to find services and providers. The app would be something more visual for Open Card members that have difficulty reading. The Open Card app would help patients do things like find eyeglasses, figure out how to get hearing aides, and locate mental health professionals to talk to when needed.

"We might be a small group right now, but I believe we can make a big difference with LEAP. I think we can make some serious changes and serious improvements for Open Card members across Oregon.

Member 2

"I'm a LEAP member because of a legislative bill I challenged. I gave feedback on Open Card not covering services that I had. The reason I am here is to make Open Card better. I wanted to understand my situation and what happened, what role I played, and how I could have navigated the Open Card system better. I work in a nonprofit. I'm always a resource for a lot of people, helping simplify things for people as part of my job and that's what I want to do here.

"Working with government as a LEAP member, I've learned that it takes a long time to get things done. So you have to be patient, but there are people that are invested. I feel like we're making a difference."

Member 3

"I am a retired dentist, and during my first four years out of dental school I saw mainly Oregon Health Plan (Medicaid) patients. It can be a frustrating process for a number of reasons; few people in the dental and medical health care systems really understand how Medicaid works, and there are patient management practices in place that have a negative impact on Medicaid recipients.

"As far as compensating the process, there is a miniscule amount paid out for each patient. This leads practices to do everything they can to minimize the work they do on Medicaid patients, which I found unpalatable. For the patients that need significant

amounts of work, dental offices do things like schedule one filling every three months for patients. This dragging the process out to maximize the compensation for the business at the health expense of the patients.

"During my career as a dentist, I developed Parkinson's disease. Forced to retire, I was put on Open Card for a brief time before I was assigned to a Coordinated Care Organization (CCO). I experienced first-hand being treated differently as an Open Card recipient. It took a 6 month wait to get in to see a dentist myself. I've been at both ends of the spectrum as an Open Card provider and recipient, and there are issues on both ends that could be improved.

"You often feel like you're out on your own when you're trying to navigate the Open Card system. I became a LEAP member to help improve Open Card, ideally so it's not so frustrating for both doctors and patients. I love the fact that so many people are trying to improve the system, and I've realized an important part of our work is to smooth out the path for people to find help. It is a very rewarding thing to feel like we are doing something meaningful to help people."

Member 4

"Nobody understands services better than the people that use them. Being a member of LEAP provides a way to share positive experiences as well as program parts that need improvement and know the group has the power to get change ideas to those that can make them.

"Helping to remove barriers for people who use "open card" is a positive way to help you 'give back' while making sure these vital services are easier to use so people use them to get or stay healthier.

"I've found serving as a member of LEAP, an opportunity to use my personal and professional knowledge and skills to work for needed changes and bring forth creative, common-sense ideas as well as meet other Open Card users and learn about their needs, frustrations, and barriers in other parts of the state.

"We all have experiences in life trying to get the information, products, services or help we need with little to no success. That can be very frustrating and defeating, often feeling alone and not knowing where to turn. This is especially true when dealing with something like medical services that you or a loved one needs desperately.

"LEAP can't solve all of those situations, but my vision is that with people having more information, knowledge of who and where to call and realizing they're not alone, it can and as it grows, will make a difference."

Member 5

"I first learned about Open Card after the birth of my first child. He was on OHP, and for the first six weeks of his life, he had Open Card coverage. While I appreciated having access to this kind of support as we figured out what plans would best serve our family, it quickly became clear how complex and confusing the system could be—especially for new parents.

"Our baby's early diagnoses meant we needed to seek out specialized care right away. But instead of finding help, we ran into roadblock after roadblock—bureaucratic red tape, endless phone calls (and long hold times), and constant miscommunication between providers and insurance systems. I was in the middle of healing from a difficult birth and trying to adjust to new motherhood, and yet I found myself spending hours trying to fight for my son's right to care—care he *deserved*, and more importantly, *needed*.

"That experience shook me. It was overwhelming, but it also lit a fire in me. I realized that if I was going to be the kind of advocate my child might need for the long haul, I had to become fluent not just in his care needs, but in the language and systems of healthcare. Thankfully, his prognosis eventually turned out to be less serious than we initially feared—but I knew from that moment forward that I had to be part of the solution for families like mine.

"When I heard about the LEAP program, I knew I had to apply. They say necessity is the mother of invention, but I think the *mother of invention is a mother*. The love I have for problem-solving, for finding creative and compassionate solutions to complex issues—that's what fuels my work here.

"This first year with LEAP has been foundational. We've laid the groundwork for something big, and now we're beginning to see just how powerful this work can be. We're not just offering feedback—we're shaping policy. We're creating real, innovative solutions for real-life problems. It's an honor to work alongside people who are equally invested in transforming Open Card, and I truly believe we're just getting started.

LEAP feedback processes and themes

LEAP exists to engage Open Card members' experience and ideas to advise OHA on how to improve Open Card services. LEAP members shared feedback about their lived experiences with Open Card and their ideas on how to improve Open Card services.

To support this work, OHA staff created multiple ways to share feedback, including:

- A LEAP Member Survey in May 2024.
- A "Bike Rack" document to track and revisit feedback shared during monthly meetings.
- One-on-one conversations, offered periodically to hear deeper insights or specific concerns.

The themes below reflect what LEAP members have shared across all these channels. They highlight the five most common focus areas:

- 1. Impact of LEAP
- 2. Quality of Care
- 3. Member Rights and System Accountability
- 4. Access to Services,
- 5. Access to Information.

These themes are summarized in Table 2 and include key questions, challenges, and ideas raised by members. LEAP members use the themes to shape recommendations, and to inform collaborative projects with OHA designed to improve the Open Card system.

Table 2: LEAP feedback themes (approved by panel in August 2024)

Impact of the LEAP

- LEAP's impact is determined by their ability to ensure that the Open Card members are heard and included in the Open Card decision-making process.
- The relationship and trust building between LEAP and OHA serves as the foundation for the ideas, actions, and causes prioritized by LEAP.
- Commitment to an effective feedback loop between OHA and LEAP. LEAP wants to be a valued partner consulted in emerging Open Card policy changes and improving Open Card system processes within OHA.

Common LEAP Themes			
Quality of Care	Member Rights and	Access to Services	Access to Information
	System Accountability		
Questions about	Questions raised about	Questions about	Requests for:
access to providers	how to hold providers	additional Open Card	 A published list of
and an extended range	accountable for issues	member	places that take
of services including:	including:	reimbursement for	Open Card
 Why is there not 	 Denying coverage 	using Uber or Lyft for	 Improving access
better access to	or delaying	medical appointment	to the Open Card
Open Card	appointments as a	transportation	Provider Directory
providers in rural	means to deny	 Requests for support 	and keeping it
and remote areas?	coverage	from OHA for reviewing	properly updated
 Can Open Card 	 Improper billing 	OHA Open Card	 The development
coverage be	practices		of an app like

System extended for new of	r Rights and Accountability Provider verbal denials without	Access to Services enrollment/ CCO	Access to Information MyChart for Open
extended for new o I	Provider verbal denials without		MyChart for Open
	denials without		MyChart for Open
 Access to alternative care (acupuncture, massage, pelvic floor physical therapy) and alternative medicines Questions about provider quality including: Why are there a limited number of Open Card providers? Why are Open Card providers paid Questions about open Card providers paid 	documentation estions raised about to advocate for en Card members uding: How are complaints received and processed by OHA? Who advocates for Open Card members who are misled by providers who are not forthright about accepting Open Card? How do you access	 disenrollment process Why aren't there more Open Card Providers? Understanding Open Card and OHP Choices Request for more information about what Open Card is and how to use Questions raised about whether there is a benefit to choosing to stay on Open Card if it's an option? 	Card members Interest in more demographic information on Open Card members as well as the temporary disenrollment process. LEAP interest in reviewing and contributing to Open Card member materials, such as the Member Handbook

Quality of Care	Member Rights and	Access to Services	Access to Information
-	System Accountability		
than CCO			
providers?			
Actions taken:	Actions taken:	Actions taken:	Actions taken:
 OHP and Open Card 	OHA Ombuds Program	Client Services Unit	Open Card Member
Overview presentation	- information on the	presentation (June	Handbook has been
by Medicaid staff	OHA grievance system	2024)	published in 2024,
(March 2024)	and your rights (May		available in English
	2024)		and Spanish with
	 OHA Hearings Team- 		additional languages to
	information on		come.
	Hearings and the new		 Health Policy and
	Appeals process for		Analytics- LEAP
	Open Card (September		presentation (July
	2024)		2024)

Looking forward: LEAP goals 2025-2026

LEAP's main goal for 2025-2026 is to develop policy recommendations and lead projects that improve Open Card services based on member experience and insight. After completing the 2025 new member recruitment and onboarding process in June 2025, LEAP will launch the LEAP Advisory Proposal Process. This new structure for collaboration between LEAP members and OHA staff will guide LEAP's work.

LEAP Advisory Proposal Process

The LEAP Advisory Proposal process will launch in summer 2025, creating a structured way for LEAP members and OHA staff to co-develop, review and approve projects designed to improve Open Card. Through outreach, proposal support, collaborative review, and shared decision-making, LEAP members will lead the development of a work plan that outlines policy recommendation steps for Medicaid leadership by March 2026. Simultaneously, LEAP is available for consultation with OHA on emerging issues requiring resolution or unplanned program changes where the proven lived experiences lead to improved outcomes.

Reporting progress

LEAP is excited to continue building strong partnerships with OHA in 2025-2026 to ensure the voices of members with lived experience consistently demonstrate their value in reaching mutual goals for Oregon's Open Card program. To keep Medicaid leadership and staff informed about progress on LEAP's Work Plan, the LEAP Coordinator will provide progress reports through:

- Quarterly Progress Report: Submitted by the last day of the month after each quarter. The first report will be provided by Jan. 31, 2026, reflecting Work Plan progress in Quarter 4 of 2025. These reports will track implementation of approved proposals and highlight emerging themes, successes, and next steps.
- Annual Report: Submitted by March 31 each year. This report will include LEAP's formal recommendations to improve Open Card's policies and services.

Appendix A: LEAP Group Agreements (April 2024)

What are group agreements?

- A consensus of what every person in our group needs and commits to each other to feel safe, supported, open, productive, and trusting.
- Helps us do our best work, achieve our common vision and serve our communities well.

Group agreements

- Be present, be intentional, be grounded
- Manage your technology
- Move up, move back (understanding the space you are in the group, how much space you take up, allowing others to speak up and then allow others to move up into that space)
- Create a space for multiple truths
- Notice and attend to power dynamics
- Assume best intentions
- Center learning and growth
- Recognize that intent is different from impact. Be accountable to impact.
- Check in about impact and ask permission
- Share gratitude for feedback
- Be authentic self and allow others the same
- Support different styles of communication
- Take care of yourself take time to check in with yourself

Appendix B: OHP Open Card Lived Experience Advisory Panel (LEAP) Charter

(Approved by Panel in August 2024, last updated in May 2025)

Background

The Oregon Health Plan (OHP) is Oregon's Medicaid and Children's Health Insurance Program. OHP provides health care for over 1.4 million Oregonians. As of March 2025, about 92.8% (Medicaid Enrollment Report) of OHP members are enrolled in a coordinated care organization (CCO) that is active in their region and helps members find physical, behavioral, and dental services. About 7.5% of OHP members receive their benefits through Open Card (or Fee-for-Service, or FFS). Open Card allows members to get all or part of their healthcare services (including physical, behavioral and dental) statewide, outside of the coordinated care model.

Leadership at OHA is committed to listening to Oregonians who use OHP, and engage with community to make policy, program, funding, and resource decisions based on their lived experience(s). One way OHA does this is by requiring CCOs to establish Community Advisory Councils (CACs). Members of these CACs include consumers (51%), representatives of local government and people experiencing health disparities in the CCO's service area. The OHP Open Card Lived Experience Advisory Panel (LEAP) is Open Card's first community advisory group. LEAP members include past or present Open Card members and their families, and people who help members and their families engage with and navigate the Open Card system - such as certified OHP assisters, OHP member advocates and community health workers.

Purpose

- Leverage the lived experience of OHP Open Card members and those who support them to catalyze a systemic change at OHA that meaningfully integrates the voices of the people we serve into policy, program, funding, and resource decisions.
- Strengthen communication between OHA and the community by providing the opportunity for two-way communication to discuss and address issues of interest or concern and to obtain constructive advice and feedback from the community.

 Advance a mutual sense of trust, respect and responsibility between OHP Open Card members and OHA by working collaboratively to improve services and outcomes for OHP Open Card.

Scope

Using an equity-focused approach and framework, the LEAP works with OHA to steer components of health care, health delivery, policy development, review, adoption and/or implementation for the OHP Open Card system. OHA will balance the recommendations of the LEAP with inputs from other sources, such as legislative and regulatory partners, within OHA and the State of Oregon and will be transparent about parameters. Related activities include, but are not limited to:

- 1. Provide input or guidance on new and existing Open Card policies being considered by OHA.
- 2. Advise OHA on Open Card transformation efforts.
- 3. Assist with OHP Open Card and legislative policy development.
- 4. Provide recommendations to support Oregon Administrative Rules (OARs) process improvements.
- 5. Build relationships with community partners. Solicit input from Open Card users and their families regarding their lived experiences and suggestions for needed changes.
- 6. Identify best practices to reduce/eliminate inequities in OHP Open Card.
- 7. Provide feedback on OHP Open Card metrics, monitoring and evaluation strategies and outcomes.
- 8. Receive and analyze reports from OHA related to OHP Open Card (i.e. Ombuds, Oregon Health Policy Board, etc.).
- 9. Provide feedback on identified gaps and make recommendations

Membership, Roles and Responsibilities

- 1. **Number** of members: 18³
- 2. **Terms** of appointment: A term is two full years. Members may serve up to two consecutive 2-year terms. Terms will end on a staggered basis. Members may be appointed to serve a partial term to finish the remainder of an unexpired vacated term.
- 3. Member recruitment, selection, and representation: LEAP new member Recruitment will open annually. Staff and LEAP members will recruit, review, and select applicants to ensure the LEAP is representative of communities experiencing health disparities, racially and ethnically diverse populations, linguistically diverse populations, populations that span across the entire state of Oregon, including rural and remote areas, immigrant and refugee populations, LGBTQIA2S+ populations, youth and aging populations, as well as individuals with professional experience helping the populations listed above in navigating the OHP Open Card system. The LEAP will prioritize lived experience as a requirement for membership. LEAP members may participate in a selection committee that will convene to review and make recommendations on final appointment of new members.
- 4. Resignations and replacement appointment: If a member needs to resign from the LEAP, they are encouraged to connect with a LEAP staff member as soon as possible. If membership drops to a point that is unsustainable, OHA may open additional recruitment to ensure diverse representation.
- 5. **Regular attendance** is vital to the work of the team. Members accept the responsibility and obligation to attend meetings and will provide as much notice as possible in advance of a meeting if they are unable to attend.

³ Number of LEAP members may change as appropriate, not to exceed a maximum of 20. Two seats are being held for appointed Tribal representation, unless or until it is recommended by Tribal leaders that we should proceed with standard recruitment or another mode of participation.

Deliverables

- Hold monthly LEAP meetings.
- Meeting materials in English and Spanish.
- Annual report based on LEAP member feedback and recommendations to Open Card and OHA leadership (the report, including all recommendations, will be approved by LEAP membership prior to distribution to Open Card/OHA Leadership).

Meeting Schedule, Meeting Support

For people who speak or use a language other than English, people with disabilities or people who need additional support, we can provide free help. Some examples are:

- Sign language and spoken language interpreters.
- Written materials in other languages or transcript.
- Braille.
- Real-time captioning (CART).
- · Large print.
- Virtual platform change.
- Audio and other formats.

This meeting will be a 2-hour, virtual-only meeting hosted on the Zoom platform. This meeting will screen share and may use document, PDF or PowerPoint presentation. We may use collaborative or whiteboard software.

Please contact Spencer Delbridge at 971-304-6454 (voice or text), Medicaid.engagement@oha.oregon.gov to request an accommodation. We will make every effort to provide services to requests. We accept all relay calls. If you need an accommodation, please contact us right away. The earlier you make a request the more likely we can meet the need.

Compensation for LEAP participation is available for members who qualify.

Meeting Schedule, Meeting Support

- Meeting agendas and supporting materials will be provided to members via email (or in an alternatively requested format) no later than three business days before the monthly meetings.
- Acentra will provide, upon request, a Chromebook and setup/technical assistance to members in need of a device to participate in LEAP activities.
- Acentra will be available prior to, during and after monthly meetings to ensure members have what they need to participate and troubleshoot any technology issues.

Being in Community Together

LEAP will create and use Group Agreements as opposed to rules. Rules are mandated and enforced by some authority and do not necessarily reflect the will of the group. Group agreements are an aspiration, or collective vision of who we want to be in relationship with one another. They are developed and enforced by the group.

LEAP will use multiple communication styles, interaction activities and thoughtful reflection in recognition of LEAP members diverse and varied life experiences and communication preferences.

Decision Making

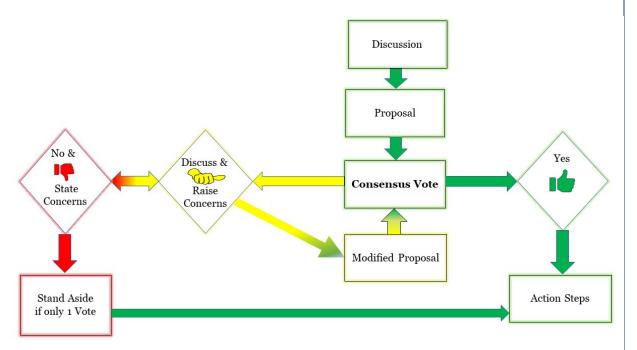
LEAP will use a consensus minus one decision making model. After the group discusses an issue, a proposal will be made. Then a consensus vote will happen. The consensus vote will use a thumbs up, thumbs down, or thumbs to the side process.

If there are all "Yes" votes (thumbs up), the group will have achieved consensus and agreed to the proposal. If there are "Raise Concerns" votes (thumbs to the side) votes, LEAP members will be asked to share their concerns or reservations with the group. Based on those concerns, modifications may be made to the proposal in order for another consensus vote to occur. If there are "No" votes (thumbs down), LEAP members will be asked to state their concerns, which can lead to:

Decision Making

- A) Further discussion and a modified proposal
- B) Multiple LEAP members opposing the proposal, meaning the proposal will need to be discussed further to gain greater understanding before another consensus vote can occur, or
- C)One opposing LEAP member will stand aside (consensus minus one model) and is welcome to share their concerns while the proposal moves forward.

Please see the diagram below for more information:



When voting, quorum will be required. Quorum will be defined as half the number (50%) of active participants. Inactive participants, defined as having missed more than 3 consecutive meetings since becoming a LEAP member without advanced notification provided, will be factored out of the formula to determine quorum.

Voting will occur during scheduled LEAP monthly meetings. LEAP members unable to attend a meeting may cast a vote before the scheduled meeting and/or submit a statement related to the LEAP decision, which will be read out to LEAP members before the vote occurs. Special circumstances may be considered if active LEAP members are unable to attend a meeting.

Charter Review and Modification

The charter will be reviewed and adopted annually, and as needed.

Executive Sponsors:

- Shawna McDermott Medicaid Services and Engagement Deputy Director
- Holly Heiberg Medicaid Policy and FFS Operations Director
- Jessica Deas Medicaid OHP Community Engagement Director

LEAP Staff:

- Spencer Delbridge Senior Medicaid Community Engagement Analyst/LEAP Coordinator
- Shanaè Joyce-Stringer Public Affairs Specialist/ LEAP Co-facilitator
- Co-facilitation of LEAP meetings Strategic Spark Consulting
- Administrative and Technical Support Acentra Health

Approved: August 19, 2024

Revisions:

- September 2024
- May 2025

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Open Card LEAP team at

medicaid.engagement@oha.oregon.gov or (971)-304-6454. We accept all relay calls.

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