

Open Card Lived Experience Advisory Panel Charter

Background

The Oregon Health Plan (OHP) is Oregon's Medicaid and Children's Health Insurance Program. OHP provides health care for over 1 million Oregonians. About 90% 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 10% 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 & Responsibilities

- 1. Number of members: 18¹
- 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.

¹ 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 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

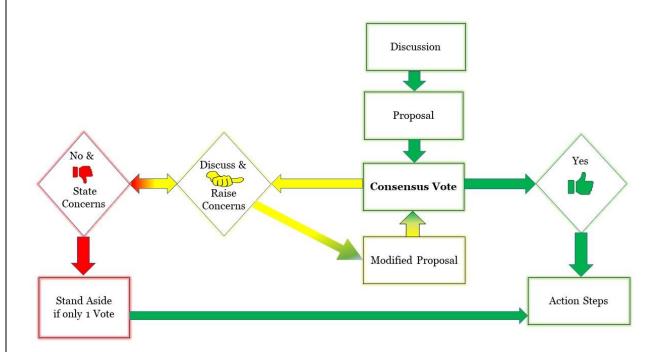
LEAP will use a consensus minus one decision making model. After the group discusses an issue, a proposal will be made. Then a consensus vote will happen. The consensus vote will use a thumbs up, thumbs down, or thumbs to the side process.

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:

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 & Modification The charter will be reviewed and adopted annually, and as needed. **Executive Sponsors:** Vivian Levy – Deputy Medicaid Director • Holly Heiberg - Medicaid Policy and FFS Operations Director **LEAP Staff:** • Jessica Deas – Medicaid Community Engagement Manager/Co-facilitator • Spencer Delbridge - Senior Medicaid Community Engagement Analyst/LEAP Coordinator & Co-facilitator • Miriam Friedman – Facilitation/Strategic Spark Consulting/Co-facilitator • Jessica Pinkerton & Beatris Delgado - Acentra/Administrative and **Technical Support** Approved: Revisions

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact Spencer Delbridge at Medicaid.engagement@oha.oregon.gov or 971-304-6454 (voice/text). We accept all relay calls.