

Task Force Members in Attendance:

Vice-Chair Margo Lalich	Marian Blankenship (phone)	Catie Thiesen for ONA (phone)
Maureen Hinman	Jeremiah Rigsby	Soren Metzger
Chair Nina Fekaris	Mitch Kruska	Rhonda J Busek (phone)
Rebecca Austen	Representative Whisnant (phone)	

Task Force Members Not in Attendance:

Senator Monnes Anderson	Yousef Awwad	

Support Staff in Attendance:

Jamie Smith – OHA	Jessica Duke – OHA	Gretchen Koch - OSBN
Mariana Turnbull - ODE	Jeston Black - OHA	

Meeting Summary:

Welcome/Introduction of Task Force Members

Chair Fekaris led with introductions.

Housekeeping

Approve 7/8/16 meeting minutes:

- Chair Fekaris motioned to approve the July meeting minutes. The Task Force approved the 7/8/16 meeting minutes by unanimous vote.

Review of Recommendations from July meeting with discussion/clarification

- Jamie Smith presented a summary of recommendations from the July meeting and survey results to Task Force members for their review.
 - Clarification provided that Rep Whisnant’s idea of using federal poverty money was erroneously omitted from the survey but should be included in today’s discussion.
- Discussion ensued regarding recommendations to include in Task Force report:
 - Charity care clarification requested by Rebecca:
 - Same as hospital charity care
 - Public health is looking at these funds to address CHIP identified needs

- Will be a culture shift for hospitals
- Vice-chair Lalich commented that she has not seen school nursing as a consideration for charity care up to this point
- Vice-chair Lalich asked for clarification between shorter funding and other categories from the summary documents
 - Staff provided feedback that ‘immediate’ items were thought to be attainable in 16/17 school year; shorter term within 2-5 years; and longer term greater than 5 years
 - Specific to Medicaid – while the availability is immediate, it would take some time to get districts trained and the capacity built for support
- Mitch expressed wariness of too much in one piece of legislation
 - Likes matching fund concept
 - Would like requirements phased-in with a timeline in any legislation
- Jamie Smith provided clarification that the Task Force purpose today is to submit a report, not write legislation.
- Jeston Black provided advice on one-part vs multi-part recommendations
 - Simple and specific is best
- Mitch shared that ODE recognizes the need to get the ball rolling on school nursing through legislative concepts – with or without Task Force recommendations
- Jeremiah provided a historical perspective that he hasn’t seen any bill drafts specifically from task force recommendations
 - Recognizes urgent need to support Medicaid billing, support for school nursing, and support for continuing Task Force efforts
- Vice-chair Lalich added that continuing to rehash the same conversations over and over again just perpetuates the siloed system that exists, and that it is evident where the resources are going.
 - We need to change the narrative to talking about a health system within the education system.
 - Resources exist to support children’s health, but are currently siloed.
 - An advisory group can continue discussions about long-term sustainability.
 - Many groups are going after the same pot of money when looking at the list of suggestions.
- Mitch asked a clarifying question whether there is money earmarked for this work that would be easy to get?
- Vice-chair Lalich replied with the following:
 - Medicaid reimbursement is available now.
 - Future conversations can be had regarding alternative payment methodologies (APMs).
 - There is a need to scrutinize the data to determine the best use of the money.
 - Future explorations could include funding formulas that are currently used for SBHCs and Public Health modernization.



- We have decades of issues that need a focus on asks and resources of what we know exists.
- Maureen added that the Task Force doesn't need to suggest where the money will come from, just demonstrate the need for money.
- Jeremiah added that we have some concrete recommendations that can likely have success to provide a foundation to work with.
- Mitch – to get to our recommended (and required) ratios, an infrastructure needs to be built for support.
- Vice-chair Lalich – increase state school fund with specific allocation for school nursing. After the infrastructure development gets started, the stakeholder advisory group can continue to look at additional funding options.
- Jeremiah added that the stakeholder group could continue to explore the tougher questions around what model is best.
- Chair Fekaris brought up the continued need to break down the HIPAA/FERPA barriers to coordinated care and the need for technology to help us break down some of those barriers.
- Vice-chair Lalich asked about childhood data and the need to look collectively to inform how to best allocate resources;
 - Where to site SBHCs?
 - Where do we need more robust school nursing services?
 - Where do we need less robust school nursing services?
- Jeremiah expressed optimism about the stakeholder advisory group advising on how to best look at data for answers.
- Mitch talked about the need for a governor's mandate related to getting through the separate state agency bureaucracy.
- Chair Fekaris brought up efforts by NASN working with AAP on having PCP ask about school attendance as part of a well-child exam.
- Chair Fekaris – to summarize, we understand there is an emergency now. We need more school nurses so kids can be safe which leads to our first potential recommendation for a grant program for underserved districts.
- Maureen thinks that the source of funding is more of a legislative conversation rather than a Task Force discussion.
 - Mitch agreed.
- Mitch brought up the issue of avoiding a mandate to hire a school nurse without the corresponding funding. Otherwise it becomes a matter of eliminating another position to absorb the new cost.
- Chair Fekaris would like have districts required to participate in the community-level health improvement process.
 - Maureen commented about how the stakeholder advisory committee could address this topic.
- Vice-Chair Lalich brought us ESSA as something to explore in the future.

- Mitch discussed the need to develop a menu of options for districts. This would allow the individual districts to choose based on their community identified needs.
- Maureen summarized that we had landed on three things:
 - Immediate funding for underserved schools – with sustainability addressed.
 - Infrastructure to support Medicaid billing.
 - Continue the conversation/work in some fashion.

 - Other things can be part of the future work
- Chair Fekaris suggested that infrastructure to support school health should be added to Maureen's summary. This could include dedicated staff at OHA/ODE to support school health.
- Mitch suggested that Medicaid reimbursement may pay for more than school nursing. There may be a need to establish guidelines to use that money to address school and community health and require communities to develop a plan.
- Soren reminded members of the multiple stories that demonstrate the crisis situation that Oregon is in and that we are lucky nothing drastic has happened yet.
- Vice-chair Lalich brought up Oregon's delegation rules and that there are a lot of 'fires' every day that limited nurses have to extinguish.
- In regards to the grant program for underserved districts, Vice-chair Lalich requested a definition of underserved.
 - Jamie Smith offered data that 79 districts are reporting no nursing services and many more are not meeting the required ratios – these would be the underserved districts that the group is referring to.
- Mitch and others discussed the concept of a Governor's executive order as a vehicle to get work done by a specific deadline.
- Maureen shared that the HKLB coalition has been advocating for coordinated school health for a long time.

Consensus Recommendations

- After much deliberation, the Task Force unanimously chose the following recommendations to include in the report:
 - Crisis funding for underserved districts
 - Ratio-based
 - Sustainability
 - Allocating dollars for supporting infrastructure for school health and Medicaid billing
 - Mandated and funded work/advisory group to have these goals met:
 - Provide integrated and coordinated health care for kids.
 - Explore technology and data needs for school nursing/health.
 - HIPAA/FERPA – explore ways to minimize the barriers to providing efficient and effective childhood healthcare.

- Explore blended funding mechanisms.
- Coordination of services delivered in the education setting.

Future topics for consideration

- Longer term funding options:
 - Continue to explore how to tap into private insurance as a funding source.
 - Explore the use of hospital community benefit funds to support school nursing.
 - Continue to explore how CCOs could be a partner in supporting the delivery of nursing services in the school setting.

Review of DRAFT report

- Feedback requested - Jamie will send it out electronically, with the intent to submit it next Wednesday.
- Comments
- Edits

Public Comment

- There was no public comment.

Next Meeting – Friday, September 9th, 2016 in Portland

Meeting adjourned