

OREGON HEALTH FUND BOARD – Benefits Committee Meeting

March 13, 2008
9:30 a.m.

Oregon Medical Association
Portland, Oregon

MEMBERS PRESENT: Susan King, RN, Chair
Somnath Saha, MD, Vice Chair
Tom Eversole
Bob Joondeph
Kevin Wilson, ND
Leda Garside, RN
Hugh Sowers, Jr.
Kathryn Weit
Lisa Dodson, MD
Susan Pozdena
Gary Allen, DMD

MEMBERS ABSENT: Jim Lussier
Betty Johnson
Nina Stratton, Vice Chair

OTHERS ATTENDING: Kelly Harms, Office of Private Health Partnerships
Tracy Rutten, Oregon Physical Therapy Association
Laura Sisulak, Oregon Primary Care Association
Kim Wirtz, Regence
Tina Kitchin, Department of Human Services
Jen Lewis, Oregon Medical Association
Lisa Trussel, Health Net
Bruce Bishop, Harrang Long Gary Rudnick

STAFF PRESENT: Darren Coffman, Health Services Commission Director
Ariel Smits, MD, MPH, Health Services Comm. Medical Director
Jeanene Smith, MD, MPH, Oregon Health Policy & Research
(OHPR) Administrator
Brandon Repp, Research Analyst
Nate Hierlmaier, Policy Analyst

ISSUES HEARD:

- Call to Order/Approval of Agenda and 02/28/08 Meeting Minutes/Review of Revised Work Plan
- Update on Oregon Health Fund Board/Committee Activities
- Discussion on Process for Rating Services in Essential Services Matrix
- Entering Ratings of Essentiality to Essential Services Matrix
- Public Testimony
- Next Steps

Chair King **I. Call to Order**

- Meeting called to order at 9:43 a.m. There is a quorum.

Chair **II. Approval of Agenda/February 28, 2008 Meeting Minutes**

- Review of February 28 meeting minutes

Motion to approve the minutes as submitted is seconded. **Motion passed unanimously.**

Jeanene Smith

III. Update on Oregon Health Fund Board (OHFB)/Committee Activities

- Dr. Smith reported that the Health Fund Board meeting on the March 20th is moved to Airport Sheridan and will focus on cost containment and other delivery system issues.
- There is a new email service allowing individual to receive notices for OHFB/OHPR groups that interest them. Please sign up at: <http://www.oregon.gov/OHPPR/HFB/govdelivery.shtml>
- Review the [March Newsletter](#) for updates on other Committees.

Chair King,
Vice Chair Saha

IV. Discussion on Process for Rating Services in Essential Services Matrix Services

- Staff overviewed the process for rating services in the Essential Services Matrix. The vertical axis represents categories of care for the Prioritized List; horizontal axis, types and places of services.
- Exercise undertaken to prioritize the category of care where most of the care should take place, from 1 to 5.
 - Example: Maternity/Newborn Care: most care to be received in a primary care (Integrated Health Home Services) or specialty care setting and would be scored as 1.
 - Scoring will incorporate essential services within the categories (rows) as:
 - 1 = Most optimal/beneficial place to receive these types of services
 - 2 = Next most optimal/beneficial place, depending on circumstances
 - 3
 - 4
 - 5 = Least optimal/beneficial
 - The members worked through the category 'Chronic Disease Management - Moderate Health Impact' by way of another example:
 - Integrated Health Home Services - 1
 - Specialty Care - 2
 - In-Home & Community-Based Care - 3
 - Skilled Nursing Care - 4
 - Acute Hospital-Based Care - 5
 - Possible alternative gradation scale of 1 to 10, representing most to least essential across entire matrix.
- Members will meet with their staff review panels (Diagnostic and Ancillary & Enabling) to determine appropriate handling of these services and will discuss their findings at the next Benefits Committee meeting.
- Suggestions were made by members to default to using a re-tooled version of the Prioritized List.
- After a break it was suggested that this discussion be tabled until a smaller group can provide more insight.

Chair King

V. Discussion of Previously Unaddressed Issues

References to the "List" refer to OHP Plus, rather than OHP Standard.

- There should be a robust primary care workforce for Oregon.
 - Rural Oregon has little access to primary care.
 - Special populations must be considered.
- What are the exact pieces of information that this group needs to provide for actuarial analysis?
 - Suggested: the Prioritized List of Health Services from lines 1 – 503, with vision and dental services included.
 - Creating levels of varying co-payments (e.g., three-tiered as commonly done for Rx) based on income and level of essential service.

Chair

VI. Public Testimony

- No public testimony was offered at this time.

Chair

VII. Next Steps

- A smaller group will look at different options for developing a benefit package.
 - Establish the Alternative Methodologies Staff Review Panel
 - Volunteers: Chair King, Dr. Saha, others
 - Short time frame – Two meetings before next Benefits Committee.
- The Health Fund Board will be developing their recommendations based on all Committee's work in May and June.
- Keep April 2 open for a potential Benefits Committee meeting or one of the staff review panels.

Chair

VIII. Adjourn

The Chair adjourned the meeting at 1:30 p.m.

Submitted By:
Dorothy Allen

Reviewed By:
Darren Coffman

Next meeting is Tuesday, April 15, 2008.