



Community Advisory Council (CAC) Meeting  
Minutes  
April 4, 2024, 12 pm

Time	Agenda Item	Action	Discussion Leader
12:00 pm	<b>Welcome</b>		<b>David</b>
	<p><b>Council Business</b></p> <ul style="list-style-type: none"> <li>• Roll call</li> </ul> <p>Attendance: David Rupkalvis, Anna Marie Slate, Kathy Abbott, Lisa DeSalvio, Laura Fitouri, Robert and Brenda Hall, Avery Horton, Jeanifer Imbruglia, Sara Stephens, Stefanie Vaughn, Kristy Martindale, Corey Wampler, Coreen lee.</p> <ul style="list-style-type: none"> <li>• March 7, 2024 minutes</li> </ul> <p>Motion to approve minutes made by Kathy Abbott and Second by Anna Marie. All in favor none opposed. Motion carries</p> <ul style="list-style-type: none"> <li>• Approve Agenda</li> </ul> <p>Motion to approve Agenda made by Anna Marie and seconded by Kathy Abbott all in favor none opposed motion carries.</p> <ul style="list-style-type: none"> <li>• New CAC Member Kristy Martindale</li> </ul> <p>Welcome Kristy!</p> <ul style="list-style-type: none"> <li>• Suggestion Box</li> </ul> <p><a href="https://forms.office.com/r/B9NTwd9Mte">https://forms.office.com/r/B9NTwd9Mte</a></p> <p>Nothing new in the suggestion box</p> <ul style="list-style-type: none"> <li>• Recommendations tracker.</li> </ul> <p>Added looking into options for supplements not approved by FDA to be not approved at the pharmacy. Sam had a discussion with the team and is waiting to hear back.</p>	Approval	<b>David</b>
	<p><b>Open Floor/feedback loop voting CAC Representatives-</b></p> <ul style="list-style-type: none"> <li>• <b>Consumer Representatives</b> <ul style="list-style-type: none"> <li>○ Problems and Areas/Opportunities for Improvement</li> </ul> </li> </ul> <p>CAC members shared concern about accountability for CAC members and accountability for Advanced Health.</p> <p>Feedback from another CAC member: We hold these meetings more than we have too. We hold them every month and are only required to have 4 per year. Perhaps this is something we can address when it is time for our new charter.</p> <p>Feedback from other CAC members regarding how the need to</p>	Discussion / Action	

grow the ICC team was brought to the board and two new hires have been made as a result. One was a replacement for an open position, and one was a new position.

CAC member provides concern that we are not seeing results. For example, Stephanie has been requesting to get more local dietitians hired for years and it has not happened. Perhaps we need to focus out grant money on these kinds of solutions. We could come up with an ongoing list and present a budget to the board was recommended by another CAC member.

CAC member shares progress with mileage reimbursement grievance. There was a significant amount added to her travel card and it took a lot of micromanagement and advocacy to make happen. It continues to be a bigger systems issue. She will continue to work on trying to make this process easier for other members who may not be able to advocate for themselves.

Question Is there any update on changing the phone message people hear while on hold?

Answer: Yes this is under the works and we will be changing it soon and are working on scripts for the messages and getting it installed.

- Things that are going well.

- **Community Partner Representatives**

SCESD: Lisa DeSalvio is retiring, and Kayla Crook is going to be her replacement. She will come back for 1 year to be a community liaison and will continue to attend this group and participate.

SCREL: They are currently working with OHA to host some listening session related the HRSN benefit to identify potential needs and barriers with folks trying to access these benefits. If you are interested in participating, please reach out to Charolotte Carver.

Coos Health and Wellness Older Adults: Doing a living well class. We had one CAC member is enrolled and it's a 6-week class.

FNG: We are focusing this year on the sweetened beverage campaign. The kickoff was being done at the schools and has been rolled out in several schools in the region. Stephanie is including articles in her newsletter to also reach adults even though the campaign is mostly focused on kids. Each month we add 5-6 more pamphlets translated to Spanish. The NBMC food site (Heartbeat Food Pantry) opened this month and can

	<p>now be utilized. The food of the monthly for healthy bites is chilies. Green Chilis are very high in Vitamin C. There are some health presentations available and are being advertised in the FNG newsletter. Newsletter and fliers attached.</p> <p>ODHS: Friendly reminder that we are still trying to recruit for a disability advisory council. There is an informational meeting May 15<sup>th</sup> 2-4PM at the APD office in North Bend if you are interested in attending, please email Shannon Hunter <a href="mailto:Shannon.Hunter@odhs.gov">Shannon.Hunter@odhs.gov</a> Meetings are virtual. You can fill out an application after attending the information session. We now have 3 members and have only held 3 meetings so far.</p>		
	<p><b>OHA update</b> Attached to minutes</p>		<b>Bevin</b>
	<p><b>OSHU student interview results</b> Presentation attached to minutes. CAC member feedback: There is clearly a gap being shown here that providers do not know who to refer people too for their needs. Perhaps we can help educate the providers.</p>	Discussion	<b>Renee Menkens</b>
	<p><b>2024 CHIP update</b> We completed our first data walk for our CHIP at the North Bend Library. We had good attendance. If you attended the one in North Bend you do not need to attend the one happening in Coos Bay as it is the same activity. It will be held April 18<sup>th</sup> from 2PM-4PM. We will also be holding a virtual session for those that cannot attend in person. It will be held 4/16 from 5:30PM-7PM.</p>		<b>Sam</b>
	<p><b>Charter training –</b> - Prepare for next month's charter review. Sam sent out a copy of the charter by email and have hard copies available by request. Next month we will be reviewing the charter. Here is a chance for you to talk about things that need to be changed. Please be prepared to make those suggestions for discussion during the May meeting.</p>		<b>Sam</b>
	<p><b>Open Floor – Public comment</b> The friend of public health holds the superstar awards. Advanced Health has partnered to provide the CCO Advocate of the year. It is April 18<sup>th</sup> at 11:30am at the Black-Market Gourmet and Renee Menkens is receiving the award!</p>		<b>David</b>
	<b>Adjourn</b>	Action	<b>David</b>
<b>Next Meeting</b>	<b>Thursday, May 2, 2024 12PM</b>		

# OHA Update – April 2024 – Advanced Health Coos County Community Advisory Council

## OHA Reproductive Health Program launches *Abortion Access* website

PORTLAND, Ore. — The Reproductive Health Program at Oregon Health Authority (OHA) has launched a new website that makes it easier for people to seek abortion care information and services.

The [Abortion Access in Oregon](https://oregon.gov/abortion) website, viewable at [oregon.gov/abortion](https://oregon.gov/abortion), includes webpages and links with current and accurate information about accessing abortion services in Oregon, including:

- [Information About Abortion](#) – Describes different types of abortion services, including some frequently asked questions.
- [Legal Rights and Privacy](#) – Explains people’s legal and privacy rights to abortion in Oregon.
- [Where to Get an Abortion](#) – Includes a list of abortion providers in Oregon, as well as resources for accessing abortion services outside of Oregon.
- [Paying for an Abortion](#) – Provides information about different options to help cover the cost of abortion services.
- [Abortion Access Plan](#) – Describes OHA’s program to cover abortion services for people who have health insurance through Providence, or whose religious employers provide insurance that does not cover abortion.
- [Abortion Support](#) – Includes resources for travel and other related support, as well as resources related to emotional support before, during and after an abortion.

“The new *Abortion Access in Oregon* website helps us reaffirm to people in Oregon that abortion remains legal and protected in our state, and that anyone who comes to our state for an abortion, regardless of immigration status, has the legal and protected right to that abortion service, not just Oregon residents,” Governor Tina Kotek said.

“As challenges to women's reproductive freedom mount across the country, OHA remains staunchly committed to protecting access to the full range of reproductive health care -- including and especially abortion, fertility services, and contraception -- for all those who live in and visit our state,” said OHA Director Dr. Sejal Hathi. “The foundation of access is knowledge: of your rights, of available services, of the nuts and bolts of obtaining care. This

website takes us one step closer to sharing that knowledge, and enabling greater access to protected care.”

The *Abortion Access in Oregon* website was created in collaboration with community, clinical and state partners to ensure the information it contains is relevant to, and accessible for, people seeking abortion care in Oregon.

OHA’s Reproductive Health Program, based at the state Public Health Division, has asked community, clinical and state partners to share the website link with their colleagues and staffs, as well as with community members and patients they serve.



## With most medical renewals complete, Oregon among top states keeping people covered

With more than 88 percent of the state’s 1.5 million renewals complete, more than 4 out of 5 Oregonians are keeping their Oregon Health Plan (OHP) or other Medicaid benefits.

At this point in the unwinding process, most of the initially planned 10 waves of renewals are complete.

- Under 4,800 members, about 0.3 percent, still need to respond to renewals from those initial waves.
- About 2.9 percent of members have responded to their renewal but are awaiting state action on the response.
- The remaining renewals, about 8.6 percent of the total, will occur over the summer.

Oregon’s 82.6 percent renewal rate continues to one of the [three highest in a national comparison of state renewal rates by KFF](#), a nonpartisan health policy organization.

[Read the Oregon Health Authority news release for details about total renewals completed this month](#)

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## Change to newsletter schedule; next full issue in April 2024

Starting in April, Oregon Department of Human Services (ODHS) and Oregon Health Authority (OHA) will publish "Keep Covered" every other month. You can expect to see the next full issue April 25.

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## Resources



**Communications  
Toolkits**



**Data Dashboards**



**All Partner  
Resources**

[Email your questions, comments and concerns about the COVID-19 PHE:  
We will use your feedback to help improve our services.](#)



## About this newsletter

During the COVID-19 PHE, the federal government provided regulatory flexibilities and temporary benefits. Some of these flexibilities and temporary benefits are ending.

The **Keep Covered** newsletter shares the latest information about changes coming for people with OHP and other benefits, including services and supports for people with disabilities and older adults, and food benefits.



## OHA endorses CDC's new respiratory virus guidance

***Staying home when sick among recommended steps for preventing COVID-19, flu, RSV, other respiratory viruses***

PORTLAND, Ore. — Oregon health officials are endorsing new Centers for Disease Control and Prevention (CDC) guidance that codifies recent recommendations for limiting the spread of respiratory viruses, including COVID-19, influenza and respiratory syncytial virus, or RSV.

Epidemiologists with the Acute and Communicable Disease Prevention Section at OHA's Public Health Division distributed a statewide Health Alert Network (HAN) advisory to remind clinicians, preparedness staff, laboratories and public health agencies about the new [Respiratory Virus Guidance](#). The CDC launched the guidance March 1.

“This updated guidance represents a milestone in bringing a range of respiratory viruses under a single set of recommendations for preventing transmission in communities, and it aligns with changes made in Oregon in May 2023,” said Dean Sidelinger, M.D., M.S.Ed.,

health officer and state epidemiologist at OHA. “Oregon fully supports this approach for lowering health risks posed by these viruses. While many are ready to move on from any discussion of COVID-19, respiratory viruses are still impacting many of us. If we all take these steps, we can help to keep our loved ones healthy.”

The updated guidance advises people with respiratory symptoms to stay home until they have been fever-free for 24 hours without the use of fever-reducing medications, and their symptoms are improving. They also urge people to protect those around them – older adults, young children and people with weakened immune systems, with disabilities or who are pregnant – by taking additional precautions for the next five days to curb disease spread, including:

1. Wearing a well-fitting mask.
2. Taking steps for cleaner air, such as by opening windows, using air purifiers and gathering outdoors.
3. Keeping a distance from others.
4. Enhancing hygiene practices, such as covering cough and sneezes, and washing hands.
5. Getting tested to inform your actions to prevent spread to others.

The updated guidance also recommends people stay up to date with [immunizations](#), which are available for COVID-19, influenza and RSV.

The isolation recommendations outlined above are intended for people in most settings across Oregon, but not in health care settings. Recommendations regarding COVID-19 in health care settings are available [here](#).

More information about updated federal guidance is available on a [Background for CDC’s Updated Respiratory Virus Guidance](#) page, and on an [FAQ](#) page. CDC guidance regarding COVID-19 in health care settings is available [here](#).

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## **New climate-related resources available to some OHP members**

Oregon Health Plan (OHP/Medicaid) members with a medical need and who are facing certain life changes may now qualify for [new climate-related benefits](#).

These benefits include devices that promote healthy temperatures and clean air such as air conditioners, heaters and air filters, as well as mini refrigeration units for storing medications. Portable power supplies to operate medical equipment (i.e., ventilators during power outages) may also be available as a new benefit.



Eligible members are experiencing life transitions and often face social injustices, including but not limited to those currently or previously involved in the child welfare system, homeless or at risk of becoming homeless, or released from incarceration within the last year.

“People with lower incomes and chronic conditions are among those most likely to experience heat exhaustion, heat stroke or complications of other health conditions related to extreme climate events,” said Dave Baden, deputy director of OHA. “By connecting wrap-around health benefits to traditional Medicaid coverage, Oregon is recognizing that non-medical factors influence health outcomes. Access to these services will reduce health disparities and offer life-saving resources to people in Oregon.”

The new climate-related benefits are part of Oregon’s federally funded expansion of OHP coverage to include [health-related social needs](#) (HRSN) services, which can help maintain health and well-being but aren’t traditionally thought of as medical services.

OHP members interested in receiving climate devices should [contact their coordinated care organization](#) (CCO) to learn more.

[Read for more](#)

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## CDC recommends another COVID-19 vaccine dose for people 65+

Oregonians ages 65 and older are now advised to get an additional dose of the 2023–2024 updated COVID-19 vaccine released last fall, as recommended by the Centers for Disease Control and Prevention (CDC).

“Vaccine-induced immunity can wane over time, but a second dose restores that protection, which can help keep people in this particularly vulnerable group from being hospitalized or even dying,” said Dr. Paul Cieslak, medical director for communicable diseases and immunizations at OHA. The additional dose of the 2023–2024 vaccine should be given at **least four months after the first dose.**



People who are [immunocompromised](#) are already eligible for additional doses of the 2023–

2024 updated COVID-19 vaccine, **at least two months after their most recent dose.**

While the state has seen a [steady decline](#) in COVID-19-related hospitalizations and percentage of positive COVID-19 tests since late December, the virus is still circulating briskly across Oregon. OHA continues to recommend anyone who has not received the 2023–2024 updated COVID-19 vaccine to get it as soon as they can, as vaccination remains the best way for people to protect themselves against the virus.

Additionally, the CDC recently updated its [isolation guidelines](#) to prevent the spread of respiratory viruses, including COVID-19, which align with Oregon’s guidelines.

[Read for more](#)



## Register for the Upcoming 1115 Medicaid Waiver All Come and Para Todos Webinars

[¡Oprima aquí para la invitación en Español!](#)

# Wednesday, April 17, 2024

10:00 AM - 11:00 AM PST (All Come)

2:00 PM – 3:00 PM PST (Para Todos)

[ALL COME](#)  
[Register Here](#)

[PARA TODOS](#)  
[Regístrese Aquí](#)

## Audience:

Community Partners, Coordinated Care Organizations, Health and Human Services Providers, Medical Providers, Local Government, Members, and more!

**Please Note:** These sessions will be recorded and will be accessible post-webinar.

## Resources

**Community Capacity Building Funds Two-Pager:**

<https://www.oregon.gov/oha/HSD/Medicaid-Policy/Documents/CCBF-Two-Pager.pdf>

**Frequently Asked Questions (FAQ) – CCBF:**

<https://www.oregon.gov/oha/HSD/Medicaid-Policy/Documents/CCBF-FAQ.pdf>



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## Stay Connected

For additional updates and information, check our website:

[www.oregon.gov/1115waiverrenewal](http://www.oregon.gov/1115waiverrenewal)

Subscribe to updates that will be sent out in the coming months:

<https://public.govdelivery.com/accounts/ORHA/signup/37696>

FAQ:

<https://www.oregon.gov/oha/HSD/Medicaid-Policy/Documents/2022-2027-Waiver-FAQ.pdf>

Email us:

[1115Waiver.Renewal@odhsoha.oregon.gov](mailto:1115Waiver.Renewal@odhsoha.oregon.gov)



programs and services. Some examples of the free help we can provide include sign language and spoken language services. For more information, please [contact us](#).

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[https://www.oregon.gov/oha/HSD/Medicaid-Policy/Documents/2022-2027-Waiver-FAQ.pdf](#)

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## Telehealth service to receive COVID-19 medication ending soon

The Color Health telehealth service in Oregon to receive low- or no-cost COVID-19 antiviral medication such as Paxlovid is ending after **March 31**. Additionally, the last day to receive this medication through Color Health's home delivery option was, March 8. After that and through March 31, the only option will be pharmacy pickup.

Outside of [Color Health](#), there are a few ways for eligible people to get COVID-19 antiviral medication.

- If you are uninsured or have Medicare or Medicaid (OHP), *and* you have a prescription for Paxlovid, you can receive Paxlovid at no cost through Pfizer’s patient assistance program, PAXCESS, regardless of income, insurance or immigration status. Overnight home delivery of Paxlovid is possible upon request. Enroll online for PAXCESS [here](#). Call **877-219-7225** to learn more.
- If you have private insurance and become sick, contact your health care provider or go to an in-network urgent care facility to get a prescription. Most private insurance plans will cover COVID-19 antiviral medication with possible co-pays. Those with private insurance can also enroll in the [PAXCESS](#) co-pay program for help paying for Paxlovid.
- Check with your pharmacy to see if they will prescribe Paxlovid directly to you, without a doctor’s prescription. State-licensed pharmacists may prescribe Paxlovid to people [under certain conditions](#).

COVID-19 antiviral medication cannot be prescribed in advance, *in case* someone gets sick. It must also be taken within five days of symptom onset. Learn more about COVID-19 treatments, including Paxlovid, [here](#). For questions related to COVID-19 treatment options, contact the Oregon Immunization Program Help Desk, Monday through Friday, 9 a.m. to 4 p.m., at 1-800-980-9431 or [alertiis@odhsoha.oregon.gov](mailto:alertiis@odhsoha.oregon.gov).

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# OHP Bridge — Draft Rules and Community Input

Oregon Health Authority (OHA) would like your help building Oregon's upcoming expansion of health care coverage, Oregon Health Plan (OHP) Bridge. OHP Bridge:

- Is a new category of OHP benefits that will cover more adults with higher incomes, launching in July 2024.
- Will offer OHP coverage through coordinated care organizations, with no enrollee costs.
- Will serve adults aged 19-64 in Oregon who have incomes between 138 and 200 percent of the Federal Poverty Level, have [eligible immigration status](#), and do not have access to another form of [affordable coverage](#).

OHA is currently drafting rules for OHP Bridge and is now accepting community input for the draft rules.

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## Public review and comments

The public and community partners are invited to give written feedback on the draft OHP Bridge Rules through April 21, 2024. Community input is due **April 21, 2024, 11:59 p.m. Pacific Time**.

### How to send written feedback:

- By email to [ohpbridge@oha.oregon.gov](mailto:ohpbridge@oha.oregon.gov)
- By regular mail to the address below:

Health Policy and Analytics OHP Bridge Team  
Attn: Jordin Heath  
421 SW Oak St, Suite 875  
Portland, OR 97204

## Formal comment period for draft rules

You can also provide feedback during the formal comment period for the draft rules:

- From **April 1 through April 21, 2024**, for Chapter 410 (Medical Assistance Program) rules, and

- From **March 1 through April 18, 2024**, for Chapter 309 (Behavioral Health Services) rules.

## Notices of Proposed Rulemaking

These contain the draft rules, as well as information about the formal comment period and hearings.

[Notice of Proposed Rulemaking for Chapter 410 rules](#)

[Notice of Proposed Rulemaking for Chapter 309 rules](#)

## Public hearing information:

For those who prefer to provide verbal public comment, OHA will also host virtual public hearings for the Chapter 410 and Chapter 309 rules.

The hearing for Chapter 309 rules is **March 18, 2024, from 1 to 2:30 p.m. Pacific Time.**

[Join ZoomGov Meeting for the Chapter 309 rules \(Meeting ID: 161 252 2091, Passcode: 798116\)](#)

The hearing for Chapter 410 rules is **April 15, 2024, from 1 to 2 p.m. Pacific Time.**

[Join the Microsoft Teams meeting for the Chapter 410 rules \(Phone number: 971-277-2343 Conference ID: 673593129\)](#)

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## Document accessibility:

For individuals with disabilities or individuals who speak a language other than English, OHA can provide information in alternate formats such as translations, large print or braille. Contact the Community Partner Outreach



Program at [community.outreach@oha.oregon.gov](mailto:community.outreach@oha.oregon.gov) or by calling 1-833-647-3678. We accept all relay calls or you can dial 711.

## Questions or comments?

Please email [ohpbridge@oha.oregon.gov](mailto:ohpbridge@oha.oregon.gov).

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# Help ensure families access the new Oregon Kids Credit.

Learn more about the new Oregon Kids Credit, EITC, the Oregon EIC, and the Working Family Household and Dependent Care Credit at and [free tax filing help](#) at the Oregon Department of Revenue "[tax benefits for families](#)" webpage including support from CASH Oregon at Metropolitan Family Services, <https://cashoregon.org/>. Here are tools to support outreach:

- [Printable flyers in 17 languages;](#)

OHSU presentation

## Coos County

**Youth serving organizations, including schools, appear to be effectively supporting student safety and success.**

Improvements in the rates of feeling safe at school and safe with peers are impressive. Improvements in the 4-year graduation rate, while still significantly higher than the state rate, should be considered along with academic indicators prior to the senior year in high school. 3<sup>rd</sup> grade reading proficiency has worsened, as has the rate of 9<sup>th</sup> graders who are "on track to graduate". On track to graduate means that, by the end of 9<sup>th</sup> grade, students have earned at least 25% of credits needed to graduate from high school. Reading and other academic challenges logically increase the need for the community to focus on keeping young people engaged and connected with opportunity. Coos County appears to be doing that well.

Improvement in 5-year graduation rate coupled with a reduction in the rate of disconnected youth indicate youth-serving adults are effective in knowing, engaging, supporting teens and young adults.

Disconnected youth are teens and young adults ages 16-19 who are neither working nor in school. Teen pregnancy rates in Coos County among youth ages 10-17 and 15-19 have been improving, mirroring the state trend.

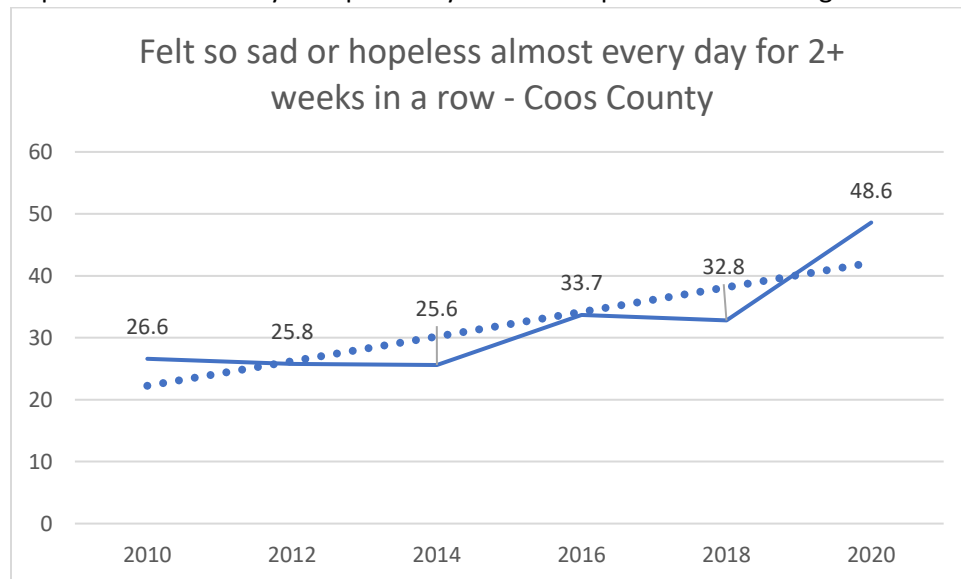
**Adverse Childhood Experience and the effect of that adversity are alarming for all ages of children.**

Adverse Childhood Experience is evident in both youth reports and child welfare data for Coos County. Youth reports indicate high rates of living with a household member with mental illness and living with a household member with a substance use disorder. Crime data shows an increasing trend in domestic violence victimization. Trends for both 6<sup>th</sup> and 8<sup>th</sup> grade youth reporting they have no one to protect them are worsening. The trend in child abuse and neglect victims served by the child welfare system has worsened and is nearly double the state rate, which is consistent with youth reports about their lives.

**6<sup>th</sup> grade suicide ideation trends have been worsening following the state trend.** Youth reports of depression affirm risk (see below). However, youth suicide attempt rates have not risen as steeply in Coos County as compared with the state trend. In 2018, the percentage of youth in 6<sup>th</sup> grade reporting at least one suicide attempt in the year prior to the survey was 7.4%.

**Considering each cohort of youth growing into adulthood can provide insight into the needs and vulnerabilities of young parents in Coos County.** Following a steady increase in 8<sup>th</sup> grade suicide attempt to a high of 15.5% in 2016. Those individuals, if they stayed in Coos County after high school, would now be in their early 20's – of parenting age. 67% of ever attempting suicide is attributable to ACEs. So, this group of young adults may benefit from extra support to prevent ACE transmission to their children.

From 2010 to the present Oregon youth surveys have included a composite measure of physical, mental, and emotional health, connectedness, and resilience. For Coos County youth in both 6<sup>th</sup> and 8<sup>th</sup> grade, the trend in positive youth development has been worsening since 2014. The only exception is in 8<sup>th</sup> grade reports in 2022, which could reflect post-pandemic youth survey participation and not a big improvement in total youth positive youth development. Local dialogue could illuminate the pattern.



### Suicide Attempt In Past Year Among 8th Graders in Coos County

