

Wednesday, May 3, 2017



Chair Williamson, Vice-Chairs McLane and Rayfield, and Members of the Committee:

Lane County has examined both HB 2122A and the proposed –A14 amendment and finds that it cannot support the A engrossed version of this measure nor the proposed amendment.

We predict that the outcome of this measure, if amended to include the –A14 amendments, will negatively impact the functionality of the CCO serving Lane County. These impacts will only serve to increase costs and limit the flexibility we have seen continue to evolve under current law. Specifically:

- The proposed amendment maintains language requiring CCO compliance with public meetings laws. As written, this requirement exposes the CCO to challenges with respect to public records, and is certain to result in the need for additional administrative and legal staff based on our experience as a public body. We are cognizant of the challenge in finding a balance between transparency and privacy, but a blanket requirement that CCO's are subject to ORS 192.610 to 192.690 has not been vetted enough and will lead to unintended consequences. We believe there are better ways to ensure transparency, and support suggestions already made by the CCO's themselves with respect to increasing access to, and information provided from, Community Advisory Councils.
- The provisions within HB 2122A (Section 4) with respect to diverting earnings into services designed to address social determinants of health is too restrictive. In addition to potentially violating the requirements of the Section 1115 federal CMS waiver, this language would have precluded investments the CCO serving Lane County has made in our community through and because of the attendance to needs specific to our community. That is, the CCO invested in the establishment of two new community health clinics that became part of our Federally Qualified Health Clinic umbrella and allowed us to attract new primary care and behavioral health professionals to our region. While the –A14 amendment softens to some extent this requirement, the new language at section 5 represents a huge challenge for the Oregon Health Authority to succeed at a rulemaking that recognizes the variability of Oregon's health care landscape. Indeed, this is exactly why the system was formed to give local authority for establishing CCO's. Lane County's transformation went smoothly, and the services and resources provided by the existing CCO are functional, flexible, and collaborative under existing law. The language proposed by the –A14 amendment may well change our existing trajectory, community planning, and county resource expenditures in ways that are no longer functional for our communities.
- Lane County supports the proposed language in HB 2122A and the –A14 amendment which eventually move Oregon's CCO's to achieve a greater use of alternative payment methodologies.

We do not find that the Committee has thus far found the correct language for this measure to advance for consideration on the floor of the House. We believe that Trillium Community Health Plan and Lane

County are making progress towards achieving the triple aim and at this juncture, HB 2122A is an impediment to our shared vision for the future.

Respectfully,

A handwritten signature in blue ink that reads "Karen Gaffney". The signature is written in a cursive, flowing style.

Karen Gaffney, Assistant Director

Lane County Health & Human Services