



Conference of Local Health Officials March 20, 2008 Meeting 10:00am-12:30pm *DRAFT Minutes*

Agencies Represented:

Tom Eversole, Vice Chair (*Benton*); Marti Franc (*Clackamas*); Joell Archibald (*Clatsop*); Frances Smith, At Large (*Coos*); Muriel de la Vergne-Brown (*Crook*); Georganne Greene, PHAO Rep (*Curry*); Peggy Kennerly (*Douglas*); Ellen Larsen (*Hood River*); Mike McNickle (*Jefferson*); Diane Seyl (*Jefferson*); Belle Shepherd (*Josephine*); Paula Sampson, At-Large (*Lincoln*); Anne Peltier (*Linn*); Rick Sherman, CLEHS Rep (*Marion*); Dave Houghton, Chair (*Multnomah*); Gary Oxman, Health Officers Caucus Rep (*Multnomah*); Genni Lehnert, Treasurer/Secretary (*Umatilla*); Mark Kubin (*Union*); Lynette Benjamin (*Wasco Sherman*); Kathleen O'Leary (*Washington*); Morgan Cowling (*Association of Oregon Counties*); Gordon Fultz (*Association of Oregon Counties*), Linda Fleming (*Coalition Executive Director*)

PHD: Mike Skeels, Interim Public Health Division Director; Tom Engle, PHD/HS Liaison; William Coulombe, Public Health Deputy Director

Guest(s):

Fariborz Pakeresht, Project Lead, Oregon DHS Transformation Initiative; Rob Jenks, DHS; Jesse Grittner, DHS
Trish Baxter, Administrator, DHS Office of Payment Accuracy and Recovery
Mary Alexander, DHS – Finance and Policy Analysis

County Roll Call:

Eighteen Oregon counties were represented at the March 20, 2008 meeting of the Conference of Local Health Officials: Benton, Clackamas, Clatsop, Coos, Crook, Curry, Douglas, Hood River, Jefferson, Josephine, Lincoln, Linn, Marion, Multnomah, Umatilla, Union, Wasco Sherman and Washington. *This established a quorum of counties.*

Convene:

Dave Houghton, Chair convened the March 2008 meeting of the Conference of Local Health Officials at 10am.

Minutes:

Action: Joell Archibald moved and Genni Lehnert seconded the approval of the minutes from the February 21, 2008 meeting of the Conference of Local Health Officials.

Motion approved unanimously with no discussion.

DHS Transformation Initiative Survey:

The Transformation Initiative was launched last year as a joint effort of DHS and McKinsey and Company (Transformation Team), a global consulting firm; the initiative is in Phase 1, a three-part approach including assessment, identifying best practices and using the information gathered in the first two steps to write a development/business plan. The ultimate goal of the project is, in 2-3 years time, to strengthen and grow DHS, transforming it into as a world-class organization. The first step in the assessment is an analysis of the workload of Child Welfare caseworkers, project coordinators stressed



the inclusion of public health as an important piece of the puzzle; public health services are being examined, in terms of administration/overhead, to determine if there are areas that needs improvement as the goal of the survey is to use results to form a plan to help streamline service delivery. Kathleen O'Leary commented that she was surprised to see one area of the survey focused on FTE (the percentage of administration in all FTE); adding it appeared the focus was on the hierarchy as opposed to the system. Jesse Gritner responded this survey was crafted in the 'spirit of partnership', explaining those analyzing the survey results cannot fully grasp the big picture without first knowing what services are performed. He continued that in drafting the survey, project leads went to LPHDs asking to determine which staff would be appropriate to offer input. Diane Seyl commented in a small county, some of the survey language is not defining, i.e. it is hard to know what percentage of FTE does work in specific categories. Rob Jenks responded those coordinating the project are aware the survey asks for information in specific categories and encouraged those taking the survey to estimate as best they can. Mike Skeels added responses are important and will be taken seriously, as the survey results will be used to assist in developing key initiatives which will be more useful and meaningful with local input. Linda Fleming asked if the survey was drafted per input from a public health workgroup/team, Rob Jenks responded the workgroup consulted is comprised of heads of ph programs at the state level adding the group would have liked local input, but couldn't pursue it due to a pressed timeline.

Tom Eversole explained his concern that the data collection is clinical and medical, which would perpetuate the myth that public health is 'public medicine'. For example, questions soliciting information about areas like community relationships, environmental health and information sharing are not included but should be. Kathleen O'Leary stressed the importance of asking the right questions, adding the data collection is essentially insignificant unless in response to the 'right questions'. Linda Fleming added the survey seems to look for quantity vs. quality. Jesse Gritner responded it is easier to make a case for inadequacies with quantitative data. Gordon Fultz commented inadequate data collection, based on the survey not asking the right questions, could have a potentially negative impact on the upcoming legislative session.

Dave Houghton summarized the discussion and feedback from CLHO members, stating *CLHO strongly supports the DHS Transformation Initiative, however as key stakeholders, we were not significantly included until the end. With the current draft of the survey being disseminated, there is a chance that the data will negatively impact legislative priorities in the upcoming session because it is not seeking the appropriate information.*

Jesse Gritner asked who would be an appropriate person(s) to connect with to draft an addendum to the survey eliciting the 'appropriate' information in terms of public health services; Linda suggested she, Tom Eversole and Kathleen O'Leary would connect electronically and follow up with Rob Jenks and Jesse Gritner.

Anyone with further questions about the content of the survey is encouraged to use the contact information found on the survey.

Medicaid Audit:

Trisha Baxter, of the DHS office of Payment Accuracy and Recovery, reported CMS launched the Medicaid Payment Error Rate Measurement (PERM) initiative to identify errors in Medicaid claim payment. Every state must undergo a detailed examination of paid claims, capitation payments, reimbursement/premium policies and coding among other processes. This data will be examined by



contractors to identify errors, once identified, a corrective action individualized to each state's need will be offered. This process is being conducted in waves of seventeen states per year and Oregon is in the third wave. Anything paid by Medicaid or SCHIP funding is subject to review. The Office of Payment Accuracy and Recovery wants to work closely with providers to help with documentation submission. Trisha added her office will continue to report updates, as they come in from CMS and add to the FAQ on <http://www.oregon.gov/DHS/admin/recovery/perm/faq.shtml>; anyone interested in further information is encouraged to visit the site. If answers cannot be found in the FAQs, please contact Trisha Baxter directly at 503/378.3661 or via email, Patricia.e.baxter@state.or.us

Medicaid Leveraging:

Mary Alexander reported a recent analysis of cost limit provisions revealed a provider cannot be reimbursed over the cost of a service; those who weren't reimbursed at full cost of service must absorb the loss. Her Office will continue the IGT process, ensuring they are getting matches prior to reimbursement and are working to identify contacts in DHS, by program area, to determine if local match is being paid before or after reimbursement.

Mary stated she would be willing to schedule a meeting with the appropriate staff in a LHD, i.e. in accounting, to answer any questions that are based on the specific payment system of the LHD.

Funding Formula Committee (FFC):

Diane Seyl, Chair of the FFC, requested input on the process the FFC was charged with, the exploration of grants with bases to look at funding based on county v. health department (as it is currently designed) to determine the impact of a change in the current funding design. Linda reminded members this charge came out of looking at Wasco Sherman as two separate counties, but only one health department and therefore receiving only one base. Adding joint programming will be deterred if counties engaging in it won't receive multiple bases. **Anyone with input is encouraged to contact Diane.**

Public Health Advisory Board (PHAB):

Tom Eversole reported he attended the most recent PHAB:

- PHAB is working on variety of issues, including provider credentialing;
- There is a strategic planning interest, in PHAB, in the outcome of creating a robust ph system in Oregon; and
- PHAB wants to advocate in concert with local health departments, adding the Board is interested in learning more about the needs of LHDs.

Consent Agenda:

Tom Eversole moved and Anne Peltier seconded the adoption of the consent agenda as submitted.

Action: Motion approved unanimously.

Other:

Dave Houghton reported all federal PanFlu funding will cease in August and national base funding will decrease by 4%; members of the Public Health Emergency Preparedness Leadership Team (PHEPLT) have meet twice and came up with several guiding principles to lead a discussion. In a parallel process, a sub-group will be looking at the strategic effort behind policy, trying to go from reactive to proactive. Jessica Guernsey is coming to the April 2008 Conference of Local Health Officials meeting to give a more in-depth update.



Dave Houghton formally appointed Muriel de la Vergne-Brown to the PHEPLT and Tatiana Dierwechter to the Chronic Disease Committee, explaining she will take Tom Eversole's place on that committee.

Mike Skeels reported with the loss of timber revenue comes the potential of LPHAs relinquishing their ph authority; he continued he contacted Shannon O'Fallon to gain clarity on:

- Whether the State has the authority to take away a county-level ph authority; and
- If a county voluntarily relinquishes ph authority, what would the state's financial and other responsibilities be?

The next Timber Task Force meeting will be held on March 27, 2008.

Meeting was adjourned at 12:10pm.