

## PD&E Committee Meeting Summary

<b>Attendees</b>	Chair Debbie Diaz, Helen Bellanca, Chunhuei Chi, Cherryl Ramirez, Rosemarie Hemmings, Angela Michalek, Antonio Germann, Betsy Boyd-Flynn, Brian Frank, Christine Zinter, Eve Gray, Gabriel Andeen, James McGee, Jamie Osborn, Julianne Horner, Max Kaiser, Mike Durbin, Peter Addy, Peter Merrit, Robert Fisette, Tashrique Rahman Staff: Morgan Cowling, Katy DeLuca, Jessica Merino, Danielle Ross
<b>Absent</b>	Melissa Brewster
<b>Date/Time</b>	Thursday, November 7, 2024 @ 1 p.m.
<b><a href="#">Meeting Video Recording</a></b>	
<b>Meeting Purpose</b>	<p>The purpose of today’s meeting is to begin laying a strong foundation for committee members for the work ahead. The committee will be reviewing membership administration, the committee’s workplan and charter, the UHPGB’s values and principles and hear a presentation from Joint Task Force member, Cherryl Ramirez, on the plan recommendations put forth by the task force.</p> <p>Committee Administration <a href="#">00:37:31</a>  Workplan Review <a href="#">00:45:30</a>  Committee Charter, Process and Timeline <a href="#">01:12:34</a>  Review UHPGB Values and Principles <a href="#">01:36:11</a>  Joint Task Force on Universal Health Care Plan Design Recommendations <a href="#">01:43:33</a>  Committee Member Reflections and Next Steps <a href="#">02:36:48</a></p>
<b>Committee Member Questions/Next Steps</b>	
<b>Joint Task Force on Universal Health Care Recommendations:</b>	<ul style="list-style-type: none"> <li>• Why was PEBB benefits chosen over OEGB benefits?</li> <li>• Will incarcerated people be included in this plan?</li> <li>• Simplicity and transparency should be stated goals in this process</li> <li>• In the estimations for the administrative savings to be had, was job loss considered for those who are currently handling those duties and how that will be addressed?</li> <li>• Within this plan structure, primary care is being requested to cover things that are within the purview of public health, (e.g. – housing as a social determinant of health.) How will the plan stay within the lane of health care coverage and let the public health system own things like housing? If things won’t be covered by the universal health plan, there has to be a plan on how those items will be covered.</li> <li>• The boundary of <i>what, how</i> and <i>where</i> social determinants of health need to be set (pertaining to what the plan will cover.)</li> </ul>

	<ul style="list-style-type: none"> <li>• Outside of financial incentives, how will the health plan recruit diverse providers to participate in the plan? That seems like something outside the scope of a health plan.</li> <li>• Is the point of this plan to shift the financing model or is it to transform the health care system for Oregon (i.e. providing access to housing, parks, healthy food, etc.)</li> <li>• What is the risk of losing federal dollars for Medicaid as we are looking at a universal health plan that has equal coverage for all?</li> </ul>
<p><b>General Feedback/ Suggestions:</b></p>	<ul style="list-style-type: none"> <li>• The Oregon Health Policy Board hosts “Educational Webinars”, for public and board/committee member viewing, to assist in communication and transparency for the board/committees.</li> <li>• In rural areas where patients have less access to providers, they do have access to pharmacies. This committee should consider the role of pharmacists and the part they play in the community. How can their skills, knowledge and education be used to provide access to healthcare to Oregonians?</li> <li>• As it relates to workforce, the committee should tap into existing infrastructure, such as Oregon Area Health Education Centers</li> <li>• Need to identify the difference between Long Term Care and Long Term Supports and Services? (Usually this definition is measured by how many days of hospitalization/institutionalization the plan will cover and beyond that is considered long term care.)</li> <li>• How will auto insurance (and any other specific insurance plans that cover health care needs) fit within the system? (liability)</li> <li>• How will the fiduciary responsibility of this plan work?</li> <li>• How will ERISA be addressed?</li> <li>• For committee support: if any committee members have any questions in between meetings, please email <a href="mailto:uhpgeb.info@dcbs.oregon.gov">uhpgeb.info@dcbs.oregon.gov</a></li> </ul>
<p><b>Additional Resources Suggested:</b></p>	<ul style="list-style-type: none"> <li>• CA has a program called the Song Brown program, which supports workforce and pipeline for trainees who stay and work in the places they were trained. This could be something to learn from.</li> <li>• Can we receive a presentation on the differences between PEBB, OEBC, and OHP and why PEBB was chosen?</li> <li>• Can we receive a presentation on the Medicaid and Medicare benefits and their distinctions and what criteria we need to meet for a waiver?</li> </ul>
<p><b>Items to be Discussed with Other Committees</b></p>	<ul style="list-style-type: none"> <li>• For F&amp;R Committee: Ensure that auto insurance with liability coverage is being considered in the financial plan. That should be a cost savings because those auto insurance companies would continue to cover those health care needs for their subscribers.</li> </ul>

**Upcoming Meetings:**

Thursday, December 5, 2024, 1-4 p.m. [Register Here](#)

Thursday January 2, 2024, 1-4 p.m. [Register Here](#)