

Health Policy and Analytics Division

# Membership of the Oregon Pain Management Commission

DRAFT for public comment 6/27/2024 through 8 a.m. 7/22/2024



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# MEMBERSHIP OF THE OREGON PAIN MANAGEMENT COMMISSION

The primary responsibility of the Oregon Pain Commission (Commission) is to develop a one-hour training in pain management (ORS 413.572), which must be updated biennially and be completed by a variety of Oregon licensed healthcare professionals to obtain or renew their licenses. In addition, the Commission has authority to develop pain management recommendations, ways to improve pain management services and represent the concerns of patients in Oregon to the Governor and Legislative Assembly (ORS 413.572).

Per Senate Bill 607 (2023), “The Oregon Health Authority shall study the membership of the Pain Management Commission. The authority shall submit a report in the manner provided by ORS 192.245, and may include recommendations for legislative changes to the membership of the Pain Management Commission to the interim committees of the Legislative Assembly related to health no later than September 15, 2024.” This report meets this requirement.

## Membership requirements

ORS 413.574 specifies that there are 19 members of the Oregon Pain Management Commission (Commission). Seventeen are appointed by the director of the Oregon Health Authority (OHA), who is required to “request and consider recommendations from individuals and public and private agencies and organizations with experience or a demonstrated interest in pain management issues.” The statute does not require any qualification for membership, but lists potential qualifications as follows:

- Physicians licensed under ORS chapter 677 or organizations representing physicians;
- Nurses licensed under ORS chapter 678 or organizations representing nurses;
- Psychologists licensed under ORS 675.010 to 675.150 or organizations representing psychologists;
- Physician assistants licensed under ORS chapter 677 or organizations representing physician assistants;
- Chiropractic physicians licensed under ORS chapter 684 or organizations representing chiropractic physicians;
- Naturopaths licensed under ORS chapter 685 or organizations representing naturopaths;
- Clinical social workers licensed under ORS 675.530 or organizations representing clinical social workers;

- Acupuncturists licensed under ORS 677.759;
- Pharmacists licensed under ORS chapter 689;
- Palliative care professionals or organizations representing palliative care professionals;
- Mental health professionals or organizations representing mental health professionals;
- Health care consumers or organizations representing health care consumers;
- Hospitals and health plans or organizations representing hospitals and health plans;
- Patients or advocacy groups representing patients;
- Dentists licensed under ORS chapter 679;
- Occupational therapists licensed under ORS 675.210 to 675.340;
- Physical therapists licensed under ORS 688.010 to 688.201; and
- Members of the public.

Note that there is no requirement for any specific number of members to be selected from any of these categories, and the “member of the public” category does not specify any specific qualifications for members.

The remaining two seats are reserved for Legislative Committee Members appointed by the President of the Senate and Speaker of the House of Representatives, respectively.

Members serve four-year terms and are eligible for re-appointment. Past practice has been for members to be limited to two four-year terms.

## Current membership

As of June 25, 2024, the Commission has 13 members [membership numbers to be updated before this report is sent to the legislature] who were appointed based on recommendations from staff and Commission leadership. Members are recruited through an open public application process. The remaining four seats are currently under recruitment. Twelve of these members have one of the professional licenses specified in statute; the other member is a longtime peer support specialist who lives with chronic pain and works as a consultant on pain-related topics. A full listing of current members, with brief biographical descriptions is available on the Commission [in Appendix A](#) and on the Commission [website](#).

## Recruiting practices

When a vacancy occurs, OHA advertises the vacancy using the Commission’s Listserv, which had 8,647 members as of June 25, 2024 [numbers to be updated prior to sending to the legislature]. Vacancies are also announced to Commission members and in the

Commission's public meetings and are open for at least four weeks. Information from an application survey <https://www.surveymonkey.com/r/OPMC-Application>, which collects information from each applicant about their qualifications, motivation and the perspective they bring to pain management, is used by Committee staff and the Chair and Vice-Chair to evaluate candidates. The application also collects REALD/SOGI<sup>1</sup> data. Members are also required to submit a letter of recommendation from a third party.

Members are scored on a spreadsheet by the Commission's chair and vice chair as well as the Commission staff. The spreadsheet captures the applicant's name, professional licensure (if any) and offers a scoring rubric on four factors:

- Geographic diversity (1-Portland-Metro, 3 Valley, Central, 4 Coast/Eastern. \_1 point for small town/rural)
- Clinical experience (for licensed professionals) or non-profit or government representation experience (for applicants who are not licensed)(1-No experience ,2-1-4 years, 3 5 years, 4 6-9 years, 5 >10 years)
- Adds diversity of perspective to current Commission membership, including lived experience (1-No additional perspective, 3-Adds to the mix, 5-Fills important gap)
- Commitment to improving pain management in Oregon, consistent with research and evidence base (1-Not evidence, 2-Interest, 3-Training or strong focus, 4-Strong professional/advocacy focus, 5-Primary professional/advocacy focus)

There are two additional columns: "Notes on scored columns" (e.g. unique perspectives, groups or perspectives represented) from application materials and "Other factors for consideration" (collaboration, ethics, notable accomplishments, professionalism, approach to conflict, etc.) from application materials and other available information to inform this column

High-level race and ethnicity categories are included on the spreadsheet for applicants who provide this information but are not formally scored or weighted.

Candidates are recommended considering the scoring, qualitative factors, and to seek Commission member balance in areas such as license types, geographic regions, identities and experiences.

Candidates recommended by Commission leadership and the Pain Management Coordinator are then reviewed by at least three layers of management prior to appointment by the OHA Director.

## Statute changes for consideration

There is no urgent need to change ORS 413.574, which lists membership requirements.

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<sup>1</sup> REALD is Race Ethnicity, Language and Disability; SOGI is Sexual Orientation and Gender Identity

However, following are three changes for the legislature to consider:

- 1) The statute could specify that a certain number of members meet selected membership criteria. This change would provide OHA with more direction on the Commission's composition.
- 2) The membership category "member of the public" is vague and could be made more specific. Staff have always sought to include two members who are not licensed providers, but who have lived experience with pain. One option for consideration is that the legislature could require that at least three members of the Commission have lived experience with significant pain. Another option would be to add traditional health worker (such as a community health worker) to the list of possible membership qualifications.

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# Appendix A: Members

## **Zachary Corbett, LAc, Chair**

Zachary has been in practice as a licensed acupuncturist since 2001. He originally practiced in California as an acupuncturist, herbalist and massage therapist. His previous career was in molecular biology at a drug research facility at the Veteran's Administration / UCLA. He was a lecturer and faculty member at the Santa Barbara College of Oriental Medicine. He gave his first acupuncture treatments in 1999 and has practiced in Oregon since 2005.

## **Russell Wimmer, PA-C, Vice Chair**

Russell is a physician assistant in Lebanon, OR and currently practices at Samaritan Family Medicine Resident Clinic. He comes to the commission with a variety of experiences across multiple disciplines including management, academic research, emergency services, primary and specialty medical care. His current focus is on improving pain management in the primary care setting and serving as an active member of the Oregon Pain Alliance. He received his Masters of Physician Assistant Studies from Heritage University.

## **Carolyn Concia, NP**

Carolyn brings 32 years of nursing practice to the work of the commission. Her background includes providing in-home medical care to seniors and disabled individuals who are homebound. She has served as a U.S.A.F. Reserve Flight Nurse in the 446th Aero-medical Evacuation Squadron at Joint Base Lewis McChord in Tacoma, WA. Ms. Concia received her MS in Nursing from St. Louis University and is board certified as an ANCC Gerontological Nurse Practitioner.

## **Lina Dorfmeister, CRNA NSPM-c**

Lina is an Oregon Association of Nurse Anesthetist board member practicing in North Bend, Oregon. She provides pain management services for Coquille Valley Hospital and is the Chief Lead Nurse Anesthetist at North Bend Medical Center. Lina completed an advanced fellowship training in acute and chronic pain management at the University of South Florida and received a Masters degree in Nursing from the University of Buffalo, New York. She is committed to providing specialized healthcare services to rural communities facing a shortage of healthcare providers.

## **Shinta Imnasjah, Pharm D**

Dr. Imnasjah serves as a Chief Pharmacist at NARA Northwest. The Native American Rehabilitation Association of the Northwest, Inc. (NARA) provides education, physical and mental health services and substance abuse treatment that is culturally appropriate to Native Americans, Alaska Natives and other vulnerable people in the greater Portland, Oregon area. She has a longstanding interest in pain management and worked with the Navajo and White Earth Reservations. Controlled substance diversion and addiction have been a specialized area of practice and one of her passions after witnessing first-

hand how these issues were affecting the families within Native American communities.

### **Terrance Manning II, ND, RMSK, MA**

Dr. Manning is a naturopathic physician who received multi-year post residency training with an interventional radiologist. He currently practices in an integrative setting (i.e. Interventional radiology, primary care sports medicine, and physiatry) providing interventional pain management. Terrance is familiar with naturopathic approaches, conventional and interventional approaches, as well as emerging treatments to address persistent pain. He hopes to use his clinical experience, unconventional approach and empathy for those suffering with persistent pain syndromes to serve the state as a member of OPMC.

### **Michelle Marikos, Public Member**

Michelle serves as a public member of the commission and has experience working as a Peer Support Specialist living with chronic pain. She also works as a consultant for OHSU Project ECHO, Center for Disease Control Steering Committee, and Oregon Pain Guidance Group Trainings.

### **Christine Martin, MD**

Dr. Martin serves as a physician faculty member at Oregon Health & Science University (OHSU). She has been involved in providing clinical pain management care of patients throughout Oregon for many years and holds a leadership role as the director of Acute Pain Management at OHSU Doernbecher Children's Hospital. Christine is part of a team that provides care for pediatric patients through OHSU's Comprehensive Pediatric Pain Clinic and strives to develop guidance for safe opioid prescribing for younger patients. As part of OPMC, she is interested in working to expand clinical knowledge and advocacy to improve pain management for children throughout Oregon.

### **Scott Pengelly, Ph.D.**

Scott is a licensed Clinical Psychologist and received his doctoral degree from the University of Oregon. He has advanced clinical training in biofeedback, behavioral medicine and EMDR. Dr. Pengelly is dedicated to helping relieve suffering due to chronic pain and implements strategies to help improve quality of life & mood, reduce pain frequency, and lower the intensity and duration of pain flares. Dr. Pengelly wishes to continue working towards these efforts combined with educating patients and colleagues about behavioral pain care. He is a veteran of the US Navy, having served two tours in the Middle East, and regularly volunteers his time to treat vets with chronic pain and PTSD.

### **Stuart Rosenblum, MD, Ph.D.**

Dr. Rosenblum has worked as an interventional pain specialist for over 30 years and brings a diverse clinical background in the management of pain to the work of the commission. He earned his M.S. in Neurophysiology, Ph.D. in Medical Psychology and MD through OHSU. Stuart has experience in teaching, research and direct clinical care in pediatrics, adults, & geriatrics. Dr. Rosenblum believes in a multidisciplinary and team



based approach to care. His philosophy is to partner with the patient and is interested in advancing education in the field of pain management.

**Andrew Suchocki MD, MPH**

Dr. Suchocki is a Family Physician with a focus on preventative medicine and currently serves as the Medical Director for Clackamas Community Health Centers, Oregon. He specializes and consults on system change in primary care around opiate prescribing, MAT system design and capacity growth in primary care. Dr. Suchocki received his Doctorate degree in Medicine from Ohio State University and a Masters in Public Health from Johns Hopkins University.

**Cody Traweck, Pharm D**

Dr. Traweck practices as a Clinical Pharmacist for Providence Health Plan of Oregon. She has worked in a variety of clinical settings seeing patients by appointment managing pharmacy related services including pain, diabetes, anticoagulation, and general chronic conditions. She earned her Doctor of Pharmacy from Pacific University and additionally received a Masters degree of Healthcare Administration degree. Her professional interests include ambulatory care, infectious disease, women's health, substance abuse, global health, healthcare management, pharmacy law and policy. She is a member of the American Society of Health-System Pharmacists, American Pharmacist Association, Oregon Society of Health system Pharmacists, Oregon State Pharmacy Association and the Phi Lambda Sigma Leadership Society.

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## Appendix B: Application questions

Question 1: The information you submit in this survey will be used by OHA staff and OPMC leadership to evaluate candidates' applications for membership and submittal to the OHA Director for review and appointment. This information will also be used to promote diverse representation on OPMC. In addition, aggregate summary data for all those who respond may be reported publicly. Because of the small size of the OPMC applicant pool, it may be possible to identify how individual applicants have answered the survey from this aggregate information. While you are not required to answer any questions about personal identities or health conditions, we encourage you to include information you are comfortable sharing to aid in our efforts to improve representation, with the understanding that this information may be disclosed (with personal information redacted according to the law) in the event of a public records request. If you require additional information about the confidentiality of this information, please email us at [pmc.info@odhsoha.oregon.gov](mailto:pmc.info@odhsoha.oregon.gov) so we can address any questions before you fill out the survey.

Question 2: Please upload your resume or curriculum vitae. Acceptable formats include PDF, DOC, and DOCX. If you are having trouble, please email [pmc.info@odhsoha.oregon.gov](mailto:pmc.info@odhsoha.oregon.gov) for help.

Question 3: Please upload a letter of recommendation. Acceptable formats include PDF, DOC, and DOCX. If you are having trouble, please email [pmc.info@odhsoha.oregon.gov](mailto:pmc.info@odhsoha.oregon.gov) for help.

Question 4: Full Name

Question 5: Pronouns (optional)

Question 6: Email Address

Question 7: Phone Number

Question 8: Principal occupation or advocacy role (if any)

Question 9: Professional license type (enter NA if you are not a licensed healthcare provider)

Question 10: Other relevant memberships/affiliations (for example, board memberships, professional or service organizations)

Question 11: Please briefly explain why you are interested in serving on OPMC, and why you would be a good candidate for membership

Question 12: What region of Oregon do you reside in?

- Central (Crook, Deschutes, Hood River, Jefferson, Sherman, Wasco)
- Coast (Clatsop, Columbia, Coos, Lincoln, Tillamook)

- Eastern (Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Umatilla, Union, Wallowa, Wheeler)
- Portland Metro (Clackamas, Multnomah, Washington)
- Southern (Curry, Douglas, Jackson, Josephine, Klamath)
- Willamette Valley (Benton, Lane, Linn, Marion, Polk, Yamhill)
- I do not reside in Oregon (to be appointed to OPMC, you must be an Oregon resident and taxpayer)
- Additional information (if you lived for a significant time in another region please describe)

Question 13: If you have a professional role in healthcare (including but not limited to patient care), in what parts of Oregon do those you serve live? (Check all that apply)

- Central (Crook, Deschutes, Hood River, Jefferson, Sherman, Wasco)
- Coast (Clatsop, Columbia, Coos, Lincoln, Tillamook)
- Eastern (Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Umatilla, Union, Wallowa, Wheeler)
- Portland Metro (Clackamas, Multnomah, Washington)
- Southern (Curry, Douglas, Jackson, Josephine, Klamath)
- Willamette Valley (Benton, Lane, Linn, Marion, Polk, Yamhill)
- I do not reside in Oregon (to be appointed to OPMC, you must be an Oregon resident and taxpayer)
- Additional information (if you lived for a significant time in another region please describe)

Question 14: If you have a professional role in healthcare (including but not limited to patient care), in what parts of Oregon do those you serve live? (Check all that apply)

- Suburban/exurban
- Small town/rural
- Remote or sparsely populated areas
- Other (please specify)

Question 15: Please identify any relevant sector that you work in. Check any which apply:

- Consumer/community member
- Advocate/consumer or community representative
- Tribal Nations or other Tribal representative
- Community-based organization (such as a social service provider)
- Provider, hospital or clinic
- Public health agency
- Payer--Commercial health insurer, coordinated care organization (CCO), dental care organization (DCO), other

- Health insurance broker
- Health care association
- Employers/businesses not in the health care or social services sectors (private, nonprofit, etc.)
- Labor union
- State or local governmental agency (county or city) -- not including public health
- Research/academic (including students)
- Medical device/technology sector
- Other (please describe below)

Please describe how experience in the sector(s) above will inform your work with OPMC.

Question 16: Please describe any experience, knowledge, awareness, and/or skills you have with health equity, specifically with racial equity, and how it might help OPMC and OHA staff better understand and advance health equity.

Question 17: Do you identify as a person "with lived experience" with health inequity (meaning someone who has personal knowledge about the world gained through direct, first-hand involvement in everyday events such as racism, homelessness, mental illness, etc.)?

- YES
- NO

Question 18: What is your current age? (Leave blank if you prefer not to answer)

Question 19: How do you identify your race, ethnicity, tribal affiliation, country of origin, or ancestry?

Question 20: Which of the following describes your racial or ethnic identity? Please check ALL that apply.

- Hispanic and Latino/a/x - Central American
- Hispanic and Latino/a/x - Mexican
- Hispanic and Latino/a/x - South American
- Hispanic and Latino/a/x - Other
- Native Hawaiian and Pacific Islander - Chamoru (Chamorro)
- Native Hawaiian and Pacific Islander - Marshallese
- Native Hawaiian and Pacific Islander - Communities of the Micronesian Region
- Native Hawaiian and Pacific Islander - Native Hawaiian
- Native Hawaiian and Pacific Islander - Samoan
- Native Hawaiian and Pacific Islander - Other
- White - Eastern European
- White - Slavic
- White - Western European

- White - Other
- American Indian and Alaska Native - American Indian
- American Indian and Alaska Native - Alaska Native
- American Indian and Alaska Native - Canadian Inuit, Metis, or First Nation
- American Indian and Alaska Native - Indigenous Mexican, Central American, or South American
- Black and African American - African American
- Black and African American - Afro-Caribbean
- Black and African American - Ethiopian
- Black and African American - Somali
- Black and African American - Other African (Black)
- Middle Eastern/Northern African - Middle Eastern
- Middle Eastern/Northern African - Northern African
- Asian - Asian Indian
- Asian - Cambodian
- Asian - Chinese
- Asian - Communities of Myanmar
- Asian - Filipino/a
- Asian - Hmong
- Asian - Japanese
- Asian - Korean
- Asian - Laotian
- Asian - South Asian
- Asian - Vietnamese
- Asian - Other
- Other - Don't know/Unknown
- Other - Don't want to answer
- Other (please specify)

Question 21: If you checked more than one category above, is there one you think of as your primary racial or ethnic identity?

- No. I identify as Biracial or Multiracial
- N/A. I only checked one category above
- Don't know/unknown
- Don't want to answer/Decline
- Yes, it is: \_\_\_\_\_

Question 22: What language or languages do you use at home? (Answer this question, then skip to question 28 if you use only English)

Question 23: What language would you prefer to use when communicating (in person, phone, virtually) with someone outside the home about important matters such as medical, legal or health information?

Question 24: What language would you prefer to use to read important written information such as medical, legal or health information?

Question 25: (Please skip this question if you do not use a language other than English or sign language) How well do you speak English?

- Very well
- Well
- Not well
- Not at all
- Don't know
- Don't want to answer

Question 26: Are you deaf or do you have serious difficulty hearing?

- Yes
- No
- Don't know
- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 27: Are you blind or do you have serious difficulty seeing, even when wearing glasses?

- Yes
- No
- Don't know
- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 28: Do you have serious difficulty walking or climbing stairs?

- Yes
- No
- Don't know
- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 29: Because of a physical, mental or emotional condition, do you have serious difficulty concentrating, remembering or making decisions?

- Yes
- No
- Don't know
- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 30: Do you have difficulty dressing or bathing?

- Yes
- No
- Don't know
- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 31: Do you have serious difficulty learning how to do things most people your age can learn?

- Yes
- No
- Don't know
- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 32: Using your usual (customary) language, do you have serious difficulty communicating (for example, understanding or being understood by others)?

- Yes
- No
- Don't know
- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 33: Because of a physical, mental or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

- Yes
- No
- Don't know

- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 34: Do you have serious difficulty with the following: mood, intense feelings, controlling your behavior, or experiencing delusions or hallucinations?

- Yes
- No
- Don't know
- Don't want to answer
- Don't know what this question is asking
- If yes, at what age did this condition begin?

Question 35: Please describe your gender in any way you prefer (You may leave this question blank if you prefer not to answer.)

Question 36: Please describe your sexual orientation/identity in any way you prefer. (You may leave this question blank if you'd prefer not to answer.)

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# Appendix C: Evaluation form

Oregon Pain Management Commission: Recruitment Matrix Template																																								
Candidate Name	MD/DO	Naturopath	Psych	PT	Pharm	Nursing	PA	LCSW	OT	Acu	Public	Region (PDX, Valley, Coast, Central, Eastern)	Geographic Diversity	Score 1 Portland Metro	Score 3 Valley, Central	Score 4 Coast/Eastern Oregon	+1 small town/rural	1 No experience	2 1-4 yrs	3 5 years	4 6-9 yrs	5 >10 years	+1 or +2 significant focus chronic pain	1 No additional perspective	3 Adds to the mix	5 Fills an important gap	1 Not evident	2 Interest	3 Training or strong focus	4 Strong professional/advocacy focus	5 Primary professional/advocacy focus	From application materials and other available information to inform this column	Race / Ethnicity Rubric (x for each that applies)						Submitted for appointment (Y/N)	
														Membership (licensure or public member) (place x in appropriate box(es))															Consider makeup of Commission (not included in score)											
														Clinical experience / Community group, Non-Profit, or government representation 1/	Adds diversity of perspective to current Commission membership, including lived experience related to chronic pain	Commitment to improving pain management in Oregon, consistent with research and evidence base.	Total score	Notes on scored columns (e.g., unique perspectives, groups or perspectives represented)	Other factors for consideration (collaboration, ethics, notable accomplishments, professionalism, approach to conflict etc.)	African American/Black	American Indian/Alaska Native	Asian	Caucasian/White	Hispanic/Latino/a/x	Multiracial/Other	Native Hawaiian / Pacific Islander														
														0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								

1/ Scoring for Clinical Experience / Community group,.... column: Use Clinical Experience for professional candidates and Community group, Non-Profit, or government representation for public member candidates.

