

Rural Health Coordinating Council

Minutes | October 28, 2022

Virtual Meeting via Webex and Telephone

Call to Order

Kim Lovato, Chair, called to order the October, 2022, meeting of the Rural Health Coordinating Council (RHCC) at 9:07 am.

Roll Call

RHCC Members present

- John Begert
- Kim Lovato
- Eric Wiser
- Jennifer Little

Oregon Office of Rural Health (ORH) Staff

Robert Duehmig, Interim Director; Laura Potter, Administrative Manager; Khaye Rausa, Administrative Coordinator

- I. Call to order – Kim Lovato, Chair 9:07
 - a. Roll call, introductions

- II. ORH Updates 9.10
 - a. Staffing Changes

Robert introduced Khaye Chia Rausa, our new Administrative Coordinator.

b. Workforce Updates

We reviewed changes at OHA, which has a new lead person for us, Leah Festa. The person who will be working with her at OHA is interviewing next week.

Provider incentives: the SLRP program has been funded by the federal government with a state match in most States, but not Oregon; we have had sites match. The new grant has no matching requirement. Because there is no match, more states applied for the funding, so we

got less, \$425,000 instead of \$500,000+. We had \$350,000 in carryover, and got no cost extension, so we can move the \$350,000 forward, but OHA is requiring a state match on that \$350,000 so no one will want those funds. Traditionally, we have used a first come, first served system, but are changing our approach, and using the AUHCN report. We are going to reach out to facilities located in the lowest quartile and see how we can help them retain a provider, then go up to next quartile, with no-match funds.

Also with 2023 legislative session, there is a question whether OHA will keep or modify funding and processes. The law does not provide for public health to be part of incentive programs. Behavioral health went back to OHA, and OHA is finally getting money out the door, but we have concerns about how that is working – they are not verifying site eligibility.

The tax credit program is not up for renewal, but in 2025- 27 when it comes up for renewal again, it may be difficult, if the economic slowdown continues.

c. OHA Partnership Updates

ORH is getting an extension for clinic based IGAs. There will be all new leadership at OHA in the next few months, after gubernatorial race is decided. The new governor will put together her budget by 2/1/23.

d. Grant Updates

ORH has submitted many of our grant reports for the year, and have one carryover via SORH. Most funds carried over because of staffing and travel that did not happen because of COVID-19, which we hope to resume. If there is a flu outbreak, traveling and events may be limited again.

e. Communications/Opportunity Knocks

ORH is focusing on the positives of health care in rural, so that “older, sicker, poorer” are not the first words out of our mouths. We will send the RHCC members the videos we used at conference, and the AHEC video created to educate legislature on its activities. After the first of the year, we will have lots of new legislators coming in, so we will reach out to them then.

Jennifer Little has a wonderful potential champion for funding in rural, in Klamath Falls, who would love to talk to legislators.

f. National Rural Health Day. November 17th

Proclamation going out next week; ORH has not heard of anything specific going on in Oregon, and members are asked to let us know if they hear of anything special.

III. Rural Health Conference 9:37

ORH was very pleased with conference in terms of its quality and the appreciation shown by attendees, partners, and speakers. The student poster presentation component was especially popular and is very useful for the students whose posters were included. Costs were very high, especially for food, so we hope to expand our partnerships to keep the registration price as low as we can. Jennifer says Energy Trust of Oregon is interested in partnering with us.

IV. Legislature/Policy update 9:52

a. Elections - 3 candidates, interesting election for Oregon – no postage required, and must be postmarked by Election Day rather than received by Election Day, so knowledge of outcome may be delayed.

Ask of RHCC: get us your top priorities so we can include those in our conversations with legislators.

V. RHCC member reports 10:04

Kim Lovato: HB 3036 passed and is in effect.

John Begert: Investigation into PBMs, Pharmacy Benefit Managers, and found that prices charged to pharmacies and organizations were significantly inflated, causing some pharmacies to close.

Eric Wiser: For first time in AHEC history, very prescriptive about which health professions are included, with prior approval required. OT and PT programs not approved yet; had to provide needs assessment on top of grant application.

AHEC clinical education is new term because preceptor means different things to different people. AHEC applied for supplemental grant for simulation grant, awarded this past June, applied for no cost extension, Oregon Pacific partnering with Chemeketa for CPR mannequins, Shelley is doing CPR courses in next two weeks. NEOAHEC is getting up to date equipment for Simulation Center in La Grande; and then last one is Cascades East, plan is Sim center at COCC Madras, and starting next year, training center, first year in Pdx, years 2 and 3 in Madras.

Trips with AHEC Scholars to rural or urban underserved. There was a Black Panther Clinic that Legacy bought and turned into a parking lot. Working with historical society to see what eminent domain does to a community. SDoH and historical racial trauma field trips.

VI. Old Business - 10:36
a. By-law review

VII. New business/public input

Will send email to everyone with proposed dates for 2023

And will try to have summer meeting in person again, potentially with another joint ORHA meeting, and mabe other boards – CLHO, for instance? Or invite officers from different boards. Rural summit, as twere.

VIII. Adjourn 10:38