

**Rural Health Coordinating Council
Draft Minutes
April 18, 2025**

I. Call to order – Kim Lovato, Chair

A. Roll call and introductions at 9:02

John Begert, Oregon Board of Pharmacy
Kim Lovato, Oregon Society of Physician Associates
Jennifer Little, Coalition of Local Public Health Officials
Chuck Wardle, Oregon Optometry Assn
Jamie Daugherty, Oregon Association for Home Care
Eric Wiser, Oregon AHEC at OHSU
Brooke Pace,
Ray Hino, Hospital Assn of Oregon
Nigel Jagoo joined at 11:00

ORH Staff

Robert Duehmig
Laura Potter
Sarah Andersen

B. Approval of agenda, and January Agenda and Minutes - unanimously approved

II. ORH Updates

A. Annual Report has had a good reception. Linked on the landing page of the ORH website, www.ohsu.edu/orh

B. Staff Retreat and strategic planning meeting next week

C. Communications

Year-end report coming out soon. All OHSU year-end reports now required to correspond to OHSU's fiscal year, which is not how we have done year-end reports historically; we may be updating the year-end report for OHSU and the provost in the fall.

D. Events

- i. Quality Workshop – Seaside, May 21-22, 2025
- ii. Forum on Rural Population Health & Health Equity, Seaside, May 19 – 21, 2025
- iii. Rural Health Conference- October 1-3, 2025
- iv. Community Conversations; January, legislative updates, this year, we are doing policy updates every two weeks, and these meetings have been well attended. We have had speakers from the Hospital Association and the OMA as well as Senators Patterson and Reynolds. Recent federal level policy updates are always on the agenda.
- v. Reports are coming soon for the Listening Tour and our intern's behavioral health project with RHCs and Public Health agencies.

E. Grant Updates and Impact of Federal Changes

Clawbacks have been impeded by the courts for now. OHSU has always done a full drawdown of all funds, rather than receiving it incrementally. We hope that will help with the availability of funds. We expect to be feeling the effect of Continuing

Resolutions and disparities in the coming fiscal years. We are feeling confident that SORH funds will come in (3:1 match, non-federal funds:federal funds).

SLRP – We have been awaiting the new application and finally heard that it is in its final review.

CLHO grant expiring; we applied for funds to keep some of the work going. That work is currently on hold pending litigation. There are 13 CHW students in the program and 17 more are awaiting approval. The Roundhouse Foundation stepped in to provide additional funding.

We are writing noncompetitive FLEX grant app now.

F. Grants.gov is now run by DOGE.

III. **Legislature & Policy update**

A. Federal Updates

Federal cuts: The budget will continue the tax cuts and include funding for the White House's immigration policies. The demand has been to cut \$850B from the budget, which has to mean cuts to Medicaid, which will have a profound impact on rural health care systems.

As to the 2026 budget and information about the administration's plans, omnibus bills are how we have been funding the government, with CRs that continue funding at previously appropriated levels. Usually, just before the State of the Union address, the President releases budget. Then Ways and Means makes their own budget, using President's as a guideline. No budget from the White House has been released yet, and one may not come. A leaked memo appeared yesterday. HRSA would go away and be replaced by AHA, Admin for a Healthy America. FORP and all its programs would be under the AHA.

B. Republican representatives and senators used to stand up for rural health care, but have not come through this year.

C. NHRA advocacy campaign is a good source for useful information.

<https://www.ruralhealth.us/advocacy/advocacy-campaigns?vvsrc=%2fcampaigns%2f124960%2frespond>

D. ORH will be doing some town halls with Merkley's office in rural Oregon; we are trying to get Bentz to do one with us. Bentz has been talking with Gov. Kitzhaber, wants to save the CCOs. Maybe Bentz would do one with hospital CEOs.

E. Jennifer: Merkley came to Klamath for a town hall recently; Wyden appearing next week. Not many people come, because of the demographics. Yelling at Merkley was about the postal service, one was about his constitutional scorecard and how he is doing a bad job.

<https://www.americanprogress.org/article/doge-cuts-by-city-state-and-congressional-district/>

F. Hospital Tax: providers contribute to it because it helps the state meet matches and it comes back to the hospitals in support.

G. Ask of the RHCC; Please let us know from where you stand what is the best way to communicate to your orgs about the importance of our programs and what happens if they get cut.

- H. We are in Region E; had regional meetings over the summers, as required by the feds. Now, have to have them all in Rockville, MD, because federal staff cannot travel. Agendas have to be signed off by political employees.
- I. State level policy update
- J. On May 5, we will get the next revenue forecast. Previous one, in February, was pretty strong. Our tax system makes it difficult to recover from economic downturns, because we have no consumption taxes.
- K. Our office may be direct recipient of grant funds, rather than OHA, and then we do the work via our IGA. Not great. Grants for community paramedicine, mobile integrated health, PH pieces – then we work with CLHO on it. Three dollar amounts potentially at risk: \$7M for Behavioral Health Loan Repayment. We have an IGA with OHA that supports the work; we do the work and OHA owns the contracts. SLRP
- L. OHSU and our budget: 56% has been the indirect which gets added on to the top for NIH grants; Trump administration tried to immediately reduce it to 15%. Courts enjoined it, but that change could be imposed legislatively.

IV. **RHCC member reports**

- A. Jamie Daugherty: Oregon Association for Home Care updates: State legislative proposals with Oregon Home Health and Hospice: the Oregon Nurses Association drafted legislation that would affect rural hospitals (SB 1168) by limiting pay per visit by therapists, and includes language that defines productivity as pay per visit. The implication would be that nurses cannot hold productivity standards to clinicians, and would not be able to set up clinical schedules, and restrict ability to admit to hospitals. Oregon Assn for Home Care is the only org opposing it. (Ask Jamie to write a short paragraph on this? Hard to follow.) Needs help opposing this litigation because there are counties that have only one home health care organization
- B. Jennifer Little: Bob and Sarah covered the CHLO updates.
- C. Eric Wiser: AHEC is applying for grants and will find out at the end of June; they got a Pathway grant from OHA for scholarships for high school students. AHEC is holding a symposium Saturday, September 14, 2025, for AHEC scholars. It is ECHO season; the topics are diabetes and dental. There will be a clinical educational ECHO in the fall. Jamie Montgomery is the replacement for Shelley Dougherty. Funding for ORCA-FM, family medicine consortium, funded last cycle, going well so far.
- D. Kim Lovato: OSPA and Academy of Family Physicians have been working on letting PA's cross state lines without getting a license in other states, and help people via telemedicine. They are trying to help people in health shortage areas.

V. **Links shared during the meeting**

<https://www.hhs.gov/press-room/hhs-restructuring-doge.html>

<https://www.hhs.gov/press-room/hhs-restructuring-doge-fact-sheet.html>

<https://static1.squarespace.com/static/606e6778226e5b3b32094244/t/68000a2cf27d5a766022e993/1744833090217/HHS+FY26+Budget+Proposal.pdf>

VI. **Old Business**

VII. **New business**

VIII. **Announcements**

Next meeting is July 18, 2025

IX. **Adjourn**

11:50 PM

DRAFT