Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process. Being from a rural area we need to make sure that our patients have the best care possible and access to care is there and the same as living in a non-rural arear right now the access to MH in our area is horrible and I hope we can get this fixed ASAP.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Michelle Aguirre Community Health Worker Eastern OR IPA 1100 Southgate suite 13 Pendleton OR 97801

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together with continued collaboration and excellent communication we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely

David Brehaut District Manager, D9-D12 Aging and People with Disabilities

1555 Southgate Pl, Pendleton Or, 97801



May 13, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

By developing a strong supportive patient centered relationship with EOCCO, Asher Community Health Center has been able to provide the quality care our patients deserve, while maintaining continuity of care with community partners in the geographical setting to which our patients are accustomed.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Susan L Moore Chief Operations Officer Asher Community Health Center

Community Connection



Of Baker County

Community Connection of Northeast Oregon Inc.

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301 Community Action Agency
Area Agency on Aging (Dist. 13)
Community Housing Development Organization
Youth and Inter-generational Program Agency

"Helping People. Changing Lives."

May 6, 2019

Greetings Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Community Connection of Baker County appreciates the fine work of the EOCCO and we look forward to continuing this collaboration, with local delivery systems and community partners. As the provider of senior services in Baker County, we work together with EOCCO and will continue to advance healthcare transformation, improving the quality of care delivered in Eastern Oregon.

Sincerely,

Joe Hayes, Baker County Manager Community Connection of Northeast Oregon 2810 Cedar St. Baker City, OR 97814

(541) 523-6591

joe@ccno.org



May 13, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

The Baker County Local Community Advisory Council would like to express their appreciation for the investments the EOCCO has made in the local communities they serve. We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely.

Baker Coverty Local Community Advisory Council



170 Ford Road, John Day, OR 97845 BlueMountainHospital.org

May 6, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Blue Mountain Hospital District has greatly benefited from Eastern Oregon CCO's (EOCCO) support in all of these areas. To mention a few highlights: the implementation of Community Health Workers has enhanced and improved our clinic's service and care to our patients; our Medical Home has increased to tier 4; we have achieved vast improvements with our quality scores and clinical metrics; community collaboration has increased and improved with Community Health Needs Assessment Committees, LCAC Committee involvement, and expanded partnership with Community Counseling Solutions, our behavioral health organization.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Derek Daly, CEO

Blue Mountain Hospital District

170 Ford Road

John Day, OR 97845

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Jeanine Conboy Executive Director, Condon Child Care PO Box 401 Condon, OR 97823 541-384-4737



Domestic Violence Services, Inc.

Serving Umatilla and Morrow Counties since 1977

P.O. Box 152, Pendleton, OR 97801

541-276-3322 • fax 541-276-8958

May 10, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

Domestic Violence Servicer, Inc. supports Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is partly due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Examples include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include using Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to working with EOCCO, in partnership with local delivery systems and community partners. We will continue to advance healthcare transformation, improving the quality of care delivered in Eastern Oregon.

Sincerely,

Kathryn Chaney Executive Director



Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Christopher

Christopher L Zadeh, MBA, CMPE, CLSSGB

CEO Eastern Oregon IPA 1100 Southgate Suite 13 Pendleton, OR 97801

Elgin Health Center, LLC 720 Albany Street/PO Box 908 Elgin, OR 97827 (541)437-0239

May 6, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Our clinic became PCPCH certified as Tier 3 on 12/20/2018 and my office manager, Gina Montgomery is a CHW and has been able to help not only our patient population but others in our community as well.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely, Harrell AP

Tempie Bartell, FNP-C, owner

Elgin Health Center

207 NE Park Street

Enterprise, Oregon 97828 Phone 541-426-9411

Fax 541-426-3414

May 14, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

As the Director of Building Healthy Families, I am writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Building Healthy Families continues to benefit from the work and funding of the EOCCO. Through this partnership we have been able to design and implement Adolescent Health Fairs, support car seat distribution, raise awareness around helmet safety (and provide helmets for summer and winter recreation), provide water safety/life jackets, support programs to engage youth, support mental health and educate families with children o-18. We have also been able to train several staff as Community Health Workers and provide local coordination for community based service groups.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon. Please feel free to contact me with any questions.

Sincerely,

Executive Director

Building Healthy Families



Morrow County Health Department

110 N. Court St. P.O. Box 799 Heppner, Oregon 97836

Tel. (541) 676-5421 Fax (541) 676-5652

May 10, 2019

Sheree Smith, R.N. Public Health Director Morrow Co CAC Chair

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express the strong support of the Morrow County CAC for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation through significant financial investments at the local level for all twelve of the counties used to address social determinants of health and other issues identified in their respective community health improvement plans. Other initiatives include the use of Community Health Workers, and reimbursement for their services.

EOCCO grant funding has been utilized to address the Health of students within the schools though the CARE program representing a truly transformational wellness approach including Nurses, Care Coordinators, Mental Health, Dental Health and SROs. EOCCO funds allowed the creation of SPURS, utilizing peers to provide mental health supports, provide Adolescent Well Child Care Visits and Colorectal Cancer Screening. EOCCO has also invested in technology to collect, aggregate and report clinical data to address the challenges associated with multiple EHR systems and met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO as together we will continue to advance healthcare transformation improving the quality of care in Eastern Oregon.

Sincerely,

Sheree Smith LCAC Chair

Morrow Co Public Health Director



Morrow County Health Department 110 N. Court St. P.O. Box 799 Heppner, Oregon 97836

Tel. (541) 676-5421 Fax (541) 676-5652 Sheree Smith, R.N. Public Health Director

May 10, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing to express my strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners.

Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO transformational health include grant funding for community partners and providers, through the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Grant funding provided at the local level has been used to address Adolescent Well Care Visits, Colorectal Cancer Screening and programs to address Mental Health concerns particularly for Youth and Prenatal and Postpartum women. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services.

I look forward to continuing this valuable work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Sheree Smith, RN

Morrow County Public Health Director



Oregon Rural Practice-based Research Network

Mail code: L222 3181 S.W. Sam Jackson Park Road Portland, OR 97239-3098 tel 503 494-0361 fax 503 494-1513 www.ohsu.edu/orprn May 10, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that comprise EOCCO.

The Oregon Rural Practice-based Research Network (ORPRN) is an organization committed to improving health outcomes and equity for Oregonians through community partnerships, research, coaching, and education. ORPRN has a strong relationship with EOCCO and supports its collaborative work with community partners. EOCCO's success is in large part due to its work to continuously evolve its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include significant financial investments in primary care and patient centered primary care homes (PCPCHs), payments to PCPCHs that provide behavioral health services, and the implementation of value based payment models including shared savings and payments for quality. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

ORPRN is beginning its fourth year of partnership with EOCCO to administer its Community Benefit Initiative Reinvestment program, a community grant program focused on supporting Community Health Improvement Plan goals, addressing social determinants of health, and improving incentive measure performance and other health outcomes for EOCCO members. EOCCO's CBIR program has reinforced partnerships throughout the region and between a variety of organizations who receive funding, including public health departments, clinics, and Local Community Advisory Councils working together to achieve better health outcomes for EOCCO members. These stakeholders regularly express high regard for the EOCCO staff who work directly with them on quality improvement, understanding performance, and building relationships within their communities. ORPRN provides administrative oversight, technical assistance, and rigorous evaluation to monitor the CBIR program's outcomes. Our work on the CBIR program is bolstered by EOCCO's high level of direct community engagement and close working relationship with our staff.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Anni E. Fig

Anne King, Director of Healthcare Initiatives Oregon Rural Practice-based Research Network Oregon Health & Science University Mail Code: L222 3181 S.W. Sam Jackson Park Road Portland, OR 97239

Sankirtana Danner, Senior Project Manager Oregon Rural Practice-based Research Network Oregon Health & Science University Mail Code: L222

3181 S.W. Sam Jackson Park Road Portland, OR 97239

Sankisan al Danner





Harney County Senior and Community Services Center

Office of Angela Lamborn

17 S. Alder ~ P.O. Box 728 Burns, OR 97720 Phone: 541-573-6024 Fax: 541-573-6025

Email address: angela.lamborn@co.harney.or.us Website: www.co.harney.or.us/seniorcenter.html

July 19, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

As a social service organization we appreciate EOCCO's awareness and focus on social determinants of health. We believe that the partnership we have worked to create helps our community by treating individuals. By addressing social determinants of health, housing for example, we are making a healthier and stronger community while affectively cutting costs and increasing benefit to the individual. We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Angela Lamborn Executive Director Harney County Senior and Community Services Center 17 S Alder Ave Burns OR 97720



"We will help people in our communities achieve and maintain emotional well-being."

May 8, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Tim Hoekstra, CEO Lifeways, Inc.

INTEGRITY * COMPETENCY * COMPASSION * RESPECTFULNESS * COLLABORATIVE * STRENGTH FOCUSED * INNOVATIVE

F) 208-466-9598

F) 541-889-5102



May 3, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

As a contracted dental plan, Advantage has administered the Oregon Health Plan dental benefit for assigned EOCCO members since 2014. From the onset of our partnership, EOCCO has consistently and intentionally advocated for oral health access, integration and care coordination, which supports Advantage's mission to improve the oral health of all.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Kevin Boie

Chief Operating Officer

Advantage Dental from DentaQuest



May 9, 2019

MAY 1 4 2019 Be

Lake District Hospital

Lake Health Clinic

Specialty Clinic

Home Health & Hospice

Behavioral Health & Prevention

Lake County Public Health

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing to express Lake Health District's strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing essential service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO has been largely successful due to their unique approach in collaborating with local health and community partners. EOCCO's model focuses on payer/provider partnerships, community collaboration, and grant opportunities to support ongoing healthcare transformation and quality improvement. Grant funding is an invaluable resource for filling budgetary gaps in our rural and frontier county.

Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to primary care that provide behavioral health services, the implementation of value-based payment models including shared savings and payments for quality, funding for the twelve local community advisory councils to address social determinants of health issues and grant funding for community partners and providers. EOCCO's grant funding also supports our Community Health Improvement Partnership as it collaborates with agencies and organizations across Lake County on programs that improve our quality of life and encourage people to actively pursue health.

Other initiatives include the use of Community Health Workers and reimbursement to the Health District for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process and specifically allowed us to reach many of our targets but more importantly, improve our internal systems.

I look forward to continuing our work with EOCCO, in partnership with community partners. Together we will continue to advance healthcare transformation by improving the quality of care delivered in Eastern Oregon.

Sincerely,

Charles B. Tveit

CEO

Lake Health District

Lake Health District



May 3, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

The EOCCO also established a new nonprofit organization, Eastern Oregon Healthy Living Alliance, as part of a regional collaborative effort to raise resources to better address regional health priorities identified with the EOCCO's regional plan. To that extent, since 2016, EOHLA has raised over \$650K toward impacting children's oral health, mental health, early childhood health, and chronic disease within the 12 county Eastern Oregon region. These dollars help to provide resources and programming to not only the EOCCO population but to the broader community as well.

Tel: 541.219.0907

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

John Adams

John V. Adams, Executive Director

Eastern Oregon Healthy Living Alliance

Po BO 1230 Lakeview, OR 97630

PO Box 1230 Lakeview, OR 97630

jadams@gobhi.net

Tel: 541.219.0907

Dear Director Allen,

I am writing to express my strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

I look forward to continuing my work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Amy Nation, Juvenile Director Gilliam County PO Box 427 Condon, OR. 97823



May 10, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) response to Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO. Having contracted with the Oregon Health Authority as a Mental Health Organization for more that 20 years, I can assure you that the EOCCO provides support to whole person care which is second to none. Also, having partnered in two other CCO's, I can assure that our level of community ownership and voice in the management of the CCO is excellent. We have demonstrated that a CCO in the most rural counties of Oregon can prosper when these qualities are followed through with actions and not just words on a page.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest primary care practices and Community Mental Health Programs, in all Counties (except Sherman), in order to address the challenges associated with multiple EHR systems and to assure whole person care at each of these clinics. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Kevin M. Campbell, CEO



May 6, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem, OR 97301

Re: Letter of Support - Eastern Oregon CCO (EOCCO) Application for Continuing CCO Services

Dear Director Allen,

Please accept this letter as our endorsement and provision of strong support for Eastern Oregon CCO's (EOCCO) Request/Application to continue services to the Medicaid population in the twelve rural counties that make-up EOCCO's service area.

We feel the partners, of which EOCCO is comprised, have done a superb job in serving the needs of this large geographical area. EOCCO has become very adept at addressing needs and managing a diverse population that expands an extremely large service area.

We believe EOCCO's performance in addressing quality and safety metrics, as well as its sensitivity to patient and stakeholder needs, has been excellent. EOCCO compares very favorably to other state CCOs and has performed very well on financial metrics – especially considering the added costs of an expansive rural geography. GSHCS has found EOCCO to be responsive and easy to work with.

We look forward to continuing to work with EOCCO, in partnership with local delivery systems and community partners. We feel we have made a difference and, if permitted, EOCCO will continue to advance healthcare transformation and improve the quality of care delivered in Eastern Oregon.

Please don't hesitate to contact me at (541) 667-3409 or at <u>dennisb@gshealth.org</u> should you have any questions. Thank you.

Sincerely

Dennis E. Burke, President & CEO

DB/slm

N:\Exec Asst\Burke\LOS for EOCCO 05-2019.docx

May 8, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing on behalf of Grande Ronde Hospital, Inc. to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers (CHW), and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

In addition to our PCPCH and CHW programs, the EOCCO has been instrumental in guiding the success of our Children and Recovering Mothers program (CHARM), a new and unique endeavor of which you may not be aware. Initiated in 2017, the proven, best-practice program is a non-punitive healthcare collaborative program dedicated to delivering healthy babies. The success we have already seen in improving this most vulnerable population is a testimony to the EOCCO's vision of partnership for rural communities like ours.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Jeremy Davis, MHA President and CEO

Grande Ronde Hospital, Inc.

Dear Director Allen.

Grant County Community Advisory Council (CAC) are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Grant County CAC members are comprised of a broad representation of local community health care providers, social service agencies, early learning providers, K-12 educators, DHS staff, CASA, business owners, EOCCO members and additional organizations that serve Oregon Health Plan members and county residents. We appreciate the opportunity to focus on shared goals through funded projects that support community health improvement, including social determinates of health, with funds provided through the EOCCO Community Benefit Initiative Reinvestment Program.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Tracey Blood Chairperson

Hacey Blood

Grant County Community Advisory Council

Traceyblood2019@gmail.com

Dear Director Allen,

I am writing to express my strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Sitting on the LCAC, I see much of the work being done in Grant County by the EOCCO. It is certainly a breath of fresh air to see EOCCO sitting at the table as a partner, not simply a funding agency dictating the strings attached to any monies distributed to Grant County. Through the support of EOCCO, our local CAC is able to support and prioritize projects that directly benefit the consumers of Medicaid. We are also able to provide input and target funds locally that support the initiatives and metrics important to the region as a whole. We certainly appreciate the flexibility and support provided by EOCCO.

I look forward to continuing to work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely.

Robert Waltenburg, Superintendent

Grant County ESD 835A S. Canyon Blvd. John Day, OR 97845



Department of Human Services

809 West Jackson Suite 500 Burns OR 97720 Phone: 541.573.3740 kathy.rementeria@state.or.us

May 8, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301 Oregon Department of Human Services

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

In addition, EOCCO's long association with local providers and community partners, and the relationships and trust that has been nurtured, will allow the work to move forward without transitional challenges.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Respectfully,

Kathy Rementeria – Community Development Coordinator

Oregon Department of Human Services



Harney County Local Community Advisory Council

May 8, 2019

Pat Allen, Director

Oregon Health Authority

5003 Summer Street NE

Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.



Harney County Local Community Advisory Council

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Jolene Cawlfield, FNP

EOCCO LCAC chair



May 3, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

EOCCO has been a great partner and demonstrated a willingness to include us in discussions, board meetings and other decisions, even though we are not one of the owners. We have a great relationship with them and fully support providing them with a new contract. We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Dan Grigg, CEO

Harney County Health District

557 W. Washington Burns, OR 97720

HERMISTON FAMILY MEDICINE AND URGENT CARE 236 E NEWPORT AVE HERMISTON, OR 97838 541-567-1137

May 3, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Bruce Carlson, MD





May 8, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Johne Camfield, FMF

Jolene Cawlfield, FNP

Director Harney County Health Department

To whom it may concern,

I am writing to express some of my experience over nearly a decade of working with GOBHI on the Consumer Caucus and other committees inside of GOBHI.

In 2010 I had just been diagnosed with a mental disorder. I was unemployed, confused, very disillusioned with my life, and had no idea how I would live from that point on. A clinician at Wallowa Valley Center for Wellness suggested I go to a Peer Support training, sponsored by GOBHI. It changed my life because it introduced me to a new way of looking at my life and disability, and helped make sense of many of the troubles I had found myself in over the years of living with an undiagnosed problem. It also showed me how I could be of service in the world going forward.

I was invited to contribute to GOBHI committees by attending and providing input based on my lived experience. I was like a fish out of water at first, but the folks on staff and clinicians and clinical directors helped me learn and get up to speed. They treated me like a valued member of a team. They always interacted with me in a way that showed how deeply interested they were in my success working with the committees.

Over the years, as I spent more time on the committees and then as a member of the Consumer Caucus I met most of the management folks at GOBHI. I greatly appreciated the kind way in which they made me feel a part of things, asked how I felt about what I saw going on, and asked for my input both formally and informally about programs and guidelines. I was always treated like a member of the group, never looked down at or regarded oddly in any way. I learned they truly cared about me as a member of a kind of extended family, and were very supportive as I recovered.

GOBHI has always had a unique culture dedicated to involvement of consumers no matter how large it has become over the years. What has impressed me the most is the consistent integrity of their interactions with all parties. I have heard a lot of rhetoric over the years from individuals and organizations who claim to be "client centered" or "trauma Informed". GOBHI folks at all levels have acted just as they speak by wholeheartedly supporting client-centered initiatives such as Dual Diagnosis Anonymous, the David Romprey Warmline, Senior Warmline, and countless peer delivered service trainings over the years. For many years they have sent a contingent of GOBHI peer service leaders to the Alternatives conference to acquire skills and bring them back to their home agencies and counties. They believed deeply in my potential and were instrumental in my success as a provider with lived experience.

As a result of the invaluable help and support I received from the kind folks at GOBHI I have advanced and excelled in my work. I am now a Certified Recovery Mentor, Peer Support Specialist, and QMHA at an agency in NW Oregon, and have been involved in this work for nearly 10 years now. I love helping people and learned much about how to do that through my experiences with GOBHI.

I am happy to express my hope that GOBHI and its unique way of helping people can be brought to a wider part of the Oregon mental health community.

Sincerely,		



51600 Huntington Rd. P.O. Box 3300 / La Pine, OR 97739 p: (541) 536-3435 / f: (541) 536-1040

May 9, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered to the patients we treat at our health center in Christmas Valley.

Sincerely,

Marie Manes, COO

La Pine Community Health Center

PO Box 3300

La Pine, OR 97739

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

EOCCO has been instrumental in providing assistance and support for the Community Mental Health Program in Lake County. EOCCO has assisted in collaboration between Lake District Hospital and Lake District Wellness/Recovery Center in increasing meeting the needs of community members and coordination of care need. We are very appreciative for EOCCO's constant aid and encouragement.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Trace Wonser, M.S., QMHP Executive Director, Lake District Wellness Center



May 7, 2019

Dear Director Allen,

I am writing to express my strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the 12 rural counties that make up EOCCO.

Lake District Hospital Lake Health Clinic

Lake Health Specialty Clinic Home Health & Hospice Lake County Public Health

Lake District Wellness Center & Prevention

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCHs, payments to PCPCHs that provide behavioral health services, the implementation of value-based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the 12 local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate-setting process.

Thanks to funding through EOCCO, Lake County Public Health has been able to participate in projects such as the Outback Strong Teen Health Fair, where our office provides immunizations and information about reproductive health to sixth- through 12th-grade youth across Lake County. We offer packages of diapers to encourage parents to bring in their infants and toddlers for provider-reviewed developmental screenings. We have been able to work more closely with Lake County primary care clinics to ensure pregnant women receive timely prenatal care. All of these are funded through EOCCO grant dollars.

Public Health works closely with EOCCO members across the county to ensure those who are eligible sign up for Oregon Health Plan coverage and those already enrolled renew their insurance to avoid lapses in coverage. We have found EOCCO to be a valuable partner in ensuring Lake County's vulnerable, low-income population receives appropriate care from the right provider at the right place and the right time.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Judy Clarke, director Lake County Public Health

iclarke@lakehealthdistrict.org

541-947-6045

May 8, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301



Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Spencer Masterson

Statewide Network Manager

sencer Master



Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

At risk juveniles and their families are a needy population and they rely heavily on the services provided in our community. Without EOCCO efforts, many would not be able to overcome the barriers they are faced with. We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Susan Gregory, Director

Malheur County Juvenile Department 251 B St West, Ste 11, Vale OR 97918

Malheur County Community Advisory Council



May 10, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

The Malheur County Community Advisory Council strongly supports the application by Eastern Oregon Coordinated Care Organization (EOCCO) in response to OHA's CCO 2.0 Request for Applications. We understand that EOCCO intends to continue providing excellent service to the Medicaid population in our twelve rural county region.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

In Malheur County, EOCCO funding and technical support has enabled us to increase the availability of Community Health Worker services, ensure that local needs have been thoroughly assessed, and we have conducted a series of annual "Spring Into Wellness" health fairs to reach out to our most remote and frontier communities.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Karina Carbajal, Chairperson

Malheur County Community Advisory Council



MALHEUR COUNTY

COUNTY COURT

251 B Street West #5, Vale, Oregon 97918 Phone (541) 473-5124 Fax (541) 473-5576

May 8, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen:

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

MALHEUR COUNTY COURT

Dan P. Joyce, County Judge

Don Hodge, County Commissioner

Mark Redmond Superintendent Angie Arriola Director of Curriculum and

Teresa Jones



363 A Street West Vale, OR 97918

541.473.3138 FAX 541.473.3915

Stephanie Navarrete Director of EI/ECSE

May 6, 2019

Pat Allen, Director **Oregon Health Authority** 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

On behalf of the Eastern Oregon Early Learning Hub (EO Hub), I am honored to submit this letter in support Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO. The EO Hub welcomes the opportunity to collaborate, coordinate, and network where appropriate to maximize the impact of services for high-need, isolated and low-income populations.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

EO Hub core values include (1) community based, with services and system management resting within a supportive, adaptive infrastructure of structures, processes, and relationships at the community level; and (2) culturally and linguistically competent, with agencies, programs, and services that reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve to facilitate access to and utilization of appropriate services and supports and to eliminate disparities in care. In alignment with our mission, vision, and core values, we hope to continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Respectfully,

Kelly Poe

Director of Community Based Services



Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Susan Watson, Clinic Manager Malheur Memorial Health Center 410 Main St., Nyssa, OR 97913

MID-COLUMBIA CENTER FOR LIVING



Providing Mental Health, Developmental Disabilities & Alcohol and Drug Services to Wasco, Hood River, and Sherman Counties

BUSINESS OFFICE, THE DALLES Wasco County Courthouse, Annex A 419 E. 7th Street, Room 207 The Dalles, OR 97058 Tel (541) 296-5452 Fax (541) 296-9418

HOOD RIVER OFFICE 1610 Woods Court Hood River, OR 97031 Tel (541) 386-2620 Fax (541) 386-6075

May 7, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Executive Director

Mid-Columbia Center for Living Community Mental Health Program

Sherman County



PO BOX 9 Heppner OR 97836 Tel: 541-676-9133

Toll Free: 1-800-737-4113

www.morrowcountyhealthdistrict.org

May 1, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Morrow County Health District looks forward to continuing our work with EOCCO, in partnership with our local health delivery system and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

TDD - (541) 676-2908

Robert Houser, CEO, FACHE Morrow County Health District

Heppner, OR 97836

Pioneer Memorial **Morrow County** Pioneer Memorial Pioneer Memorial Irrigon Medical **Ione Community** Clinic Clinic Clinic **Ambulance Hospital & Nursing** Home Health & Facility Hospice P-(541) 676-5504 P - (541) 422-7128 P-(541) 676-9133 P - (541) 676-9133 P - (541) 676-2946 P-(541) 922-5880 F - (541) 676-9025 F - (541) 422-7145 F - (541) 676-2901 F - (541) 676-2901 F - (541) 676-9017 F - (541) 922-5881

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process. The EOCCO has been a great partner for Morrow County Health Department, Morrow County residents, Public Health, and Eastern Oregon by providing resources through community benefit initiatives reinvestment grants and commitment to our county and region's shared health goals. Some local examples of EOCCO's grant funding are the Public Health RN Case Manager as part of the multi-disciplinary community Morrow County CARE Team using Community Health Workers to bridge gaps in health care access and help develop formal and informal pathways to increase resources for the social determinants of health for residents while broadening partnerships with the at large health community and advocating for the pooling of resources to work towards greater overall health in our rural populations. EOCCO has provided \$500,000 as a collaboration Fund with EOCCO Public Health Departments and the Public Health Directors are looking at transformational technologies to reach rural populations targeting maternal depression, data collection, and increased access to health and social resources. I strongly support EOCCO's application as an EOCCO Board member representing Public Health for the 12 EOCCO Counties and Morrow County residents.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Diane Kilkenny RN BSN

Morrow County CARE Team

Morrow County Health Department

EOCCO Board Member

110 N. Court Street, PO Box 799

Heppner, Oregon 97836

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Murray's Drug pharmacies located in Heppner, Condon and Boardman Oregon count EOCCO as a very valuable partner in providing healthcare to our mutual patients in Morrow, Gilliam and Wheeler counties. We know that we can count on their cooperation and aid to help patients most in need. It takes a real dedication to provide service in these literal thousands of miles of rural and frontier areas of eastern Oregon, EOCCO has done a great job and we hope to continue working together into the future. I can personally attest that their work has saved many lives.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,
John Murray, RPh, President
Murray's Drug Inc. Heppner, Condon, Boardman



April 5, 2019

CCO Review Team Oregon Health Authority 500 Summer St. NE Salem, OR 97301-1097

Dear Review Team Members:

The National Alliance on Mental Illness of Oregon wishes to express its support for the efforts of Greater Oregon Behavioral Health Inc. (GOHBI) in its collaboration with Moda to form two separate Coordinated Care Organizations serving Eastern Oregon and portions of the Oregon Coast, including Clatsop, Tillamook, and Columbia counties.

We believe that GOBHI has a proven track record for responding to the needs of Oregon's rural communities in its current role as a Coordinated Care Organization partner and administrator. We have been impressed with its vision for system reform within the behavioral health system, and we are eager to see what GOHBI can continue to accomplished by facilitating integrated services in traditionally underserved and underresourced communities.

NAMI Oregon anticipates finding multiple ways to partner with GOBHI as it broadens its commitment to serving rural communities. As an advocacy organization representing individuals and families affected by mental illness, we hope to be vested in GOBHI's success and to provide what assistance we can to GOBHI's community-based mission.

Best wishes,

Chris Bouneff
Executive Director



May 8, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Northeast Oregon Area Health Education Center (NEOAHEC) serves a comparable geographic region to the EOCCO. NEOAHEC and the EOCCO have successfully collaborated on a number of projects to increase healthcare workforce and add health profession student expertise to community based projects for the eastern Oregon region. The synergy created between NEOAHEC and the EOCCO has been invaluable.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Meredith Lair

Executive Director Northeast Oregon AHEH

mlair@neoahec.org

Northeast Oregon Area Health Education Center
Eastern Oregon University • One University Blvd. • La Grande, OR 97850
541.962.3422 • FAX 541.962.3416
neoahec@eou.edu • www.eou.edu/neoahec



Migrant Head Start – Migrant Child Care & Migrant Education

Local Offices: Serving Umatilla & Morrow County Program Director: Pat Consoliver pat.consoliver@ocdc.net

May 6, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Oregon Child Development Coalition (OCDC) primarily serves children and families from the migrant community. In Umatilla and Morrow counties, our clients rely heavily on the services provided by the state and facilitated through our partnership with EOCCO. We view EOCCO as one of our most vital partnerships. They play a key role in our ability to fulfill our commitment to families.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely.

Pat Consoliver, Program Director



May 13, 2019

Pat Allen, Director **Oregon Health Authority** 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

ODS Community Dental strongly supports the Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

ODS Community Dental has provided dental services to EOCCO members since 2014. In addition to the collative case management and dental services we have provided, we have also expanded our provider network to provide more access to EOCCO members.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Teri Barichello

Vice President, Chief Dental Officer

Tes Bel



May 6, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

As President of the Oregon Infant Mental Health Association, I aam writing to express strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

The Oregon Infant Mental Health Association is a statewide nonprofit organization representing cross-sector early childhood professionals and families. Our mission is to support the emotional health and well-being of all Oregon's infants, toddlers, and their families in communities throughout the state (www.orimha.org). Our goals include building Oregon's capacity to support emotional health and well-being through interaction, study, early childhood system collaboration, and advocacy. We are nearly 500 members strong, spanning physical health, early care and education, mental health, child welfare, and more. Abiding by infant mental health principles, our work embraces a focus on equity, assuring that infants and toddlers thrive, and enter kindergarten with the social and emotional skills that best assure academic success and lifelong health and productivity.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. We share a deep understanding of the importance of the early years of healthy brain development as an investment opportunity that can make the greatest positive impact on health and carries forward throughout the lifespan. We recognize the need for culturally sensitive and responsive parenting and early childhood developmental information that supports parents of all cultures to have the tools to be the best parent to which they aspire to be for their young child. As we discover these touch points, intersections, and common goals, we are committed to working together, act upon these shared values, and implementing strategies in an equitable way that assures the best outcomes for young children and their families in communities.

The Oregon Infant Mental Health Association is pleased that EOCCO shares our commitment to assuring that all young children thrive in healthy relationships and looks forward to working together to achieve these common goals.

Sincerely,

President

Oregon Infant Mental Health Association

PO Box 12712

Salem, OR 97309

There of



Extension Service Lake County

103 South E Street Lakeview, OR 97630

P 541-947-6054 | **F** 541-947-6055 extension.oregonstate.edu/lake

May 14, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Jamie M. Davis

Oregon State University, Lake County Extension Agent 4-H Youth Development & Family Community Health School of Social and Behavioral Health Sciences College of Public Health and Human Sciences

Agricultural Sciences & Natural Resources, Family and Community Health, 4-H Youth, Forestry & Natural Resources, Extension Sea Grant, Open Campus, and Outdoor School programs. Oregon State University, United States Department of Agriculture, and Oregon counties cooperating. The Extension Service offers its programs and materials equally to all people.



Extension Service Lake County

103 South E Street Lakeview, OR 97630

P 541-947-6054 | **F** 541-947-6055 extension.oregonstate.edu/lake

May 14, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Jamie M. Davis

Oregon State University, Lake County Extension Agent 4-H Youth Development & Family Community Health School of Social and Behavioral Health Sciences College of Public Health and Human Sciences

Agricultural Sciences & Natural Resources, Family and Community Health, 4-H Youth, Forestry & Natural Resources, Extension Sea Grant, Open Campus, and Outdoor School programs. Oregon State University, United States Department of Agriculture, and Oregon counties cooperating. The Extension Service offers its programs and materials equally to all people.



College of Public Health and Human Sciences

Hallie E. Ford Center, #255 2631 SW Campus Way Corvallis, Oregon 97331

C 919-593-5822 health.oregonstate.edu/ochi

5/9/2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Oregon State University's College of Public Health and Human Sciences shares with EOCCO goals to fully prepare Oregon's health and social care workforce as we transform our health care system towards statewide CCO 2.0 goals of (1) improving the behavioral health system, (2) increasing value, and paying for performance, (3) focusing on the social determinants of health and health equity, and (4) maintaining sustainable cost growth. Since 2015, we have been working with EOCCO to develop and deliver our Community Health Worker Training Program, consisting of both entry-level and continuing-education courses. Our 85-hour hybrid entry-level course has been well-received; it has been delivered 12 times at various locations across the state, thus far. Throughout this time, EOCCO has been a very good partner! We are particularly impressed by their collaborative nature, their support for community health workers, and their leadership around health transformation more broadly.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Allison E. Myers, PhD, MPH

Director, OSU Center for Health Innovation

College of Public Health & Human Sciences, Oregon State University

ann Custer

Ann L. Custer, MPH, OTR/L, CHES Manager of Workforce Development OSU Center for Health Innovation College of Public Health and Human Sciences Oregon State University

PASSPORT TO LANGUAGES INC.



May 8, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Passport To Languages Inc. has provided language access to the limited English speaking community of Eastern Oregon for over a decade. In this time span, we have evolved with EOCCCO, and have innovated in ways that serve to provide meaningful language access to their LEP members. This symbiotic partnership has helped to contribute towards better health outcomes, health equity in the market space, and provide continuity of care for its members. By aligning our efforts with EOCCO, we have been able to strategically define demographics in the various counties that EOCCO serves; which has helped to determine emerging language trends, and has also served to align our coverage in ways that meet and exceed language access needs, critical for its membership. We also work in tandem with EOCCO to connect with key providers;

PASSPORT TO LANGUAGES INC.



educating them on best practices for accessing services, and optimally engaging with healthcare interpreters. We were also even able to provide video remote interpreting to certain providers!

It is our strong desire to maintain a relationship with EOCCO and the provider network that it supports for its membership. Our long-term plans include hosting seminars in certain Eastern Oregon cities/towns. These efforts will serve to educate the community on how to best access language services, and how to work with healthcare interpreters. We also anticipate using these opportunities for active interpreter recruitment, discussing possible ways to embed interpreters in active areas, and to provide direct Q and A interaction with providers. Ultimately this partnership with the EOCCO provider network will assist in the pursuit of comprehensive, vertical language access training. In the training, we intend to address provider scheduling for LEP patients, working with on-site interpreters rather than family members, knowing when to offer OPI and VRI-especially with in-home visits, and brainstorming with leadership to provide access for locally hosted (OHA accredited) seminars- that will help emerging interpreters become qualified or certified. We also plan on doing further independent marketing/outreach to known providers in the network to uncover any possible language access gaps in the network. We are also working together on providing updated marketing collateral that will create broader awareness of the services we provide. This effort will further galvanize our alignment with EOCCO, and to assist in promoting these benefits to their membership. Our ultimate goal for the future is to create wider awareness for all members- specifically that qualified and certified healthcare interpreters are available for them in the market space at any time, to ensure their equity as it pertains to receiving optimal healthcare.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Erik Lawson

Passport To Languages Inc. Director, Business Development 6443 SW Beaverton-Hillsdale Hwy Ste 390 Portland, OR 97221

503-467-2180

Pediatric Specialists of Pendleton, LLC

Board Certified Pediatricians

Sara S. Rickman, MD, FAAP Rhonda L. Wyland, MD, FAAP

Family Nurse Practitioners

Lynn Lieuallen, RN, FNP Teri Rosselle, RN, FNP

2461 S.W. Perkins Ave. Pendleton, OR 97801-4301 Phone (541) 276-0250 Fax (541) 276-0253

May 13, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make up EOCCO.

EOCCO's success is, in large part, due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models (including shared savings and payments for quality), grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate, and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

The EOCCO has been central to our office's ability to provide continuously improving quality of care to our area's Medicaid population. They have provided reimbursement for quality improvement measures as well as counseling and assistance toward meeting our clinic's quality goals. EOCCO has been extremely helpful when it comes to improving vaccination rates, increasing the number of preventative screenings performed, and increasing the clinic's number of adolescent well visits—a population who is generally not seen by a provider as frequently as younger children. They have provided a valuable resource in the CHW program which allows our patients who need extra care to be seen between visits.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation, improving the quality of care delivered in Eastern Oregon.

Sincerely,

Erin Blair Office Manager

Guin Blair

PENDLETON PRIMARY CARE CLINIC 1100 SOUTHGATE STE 9 PENDLETON, OR 97801 541-966-6916

May 3, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include; significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sillotoly,

Bruce Carlson, MD



May 6, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We write you today to express our support for Eastern Oregon CCO's request for application. This will ensure that Medicaid beneficiaries in Oregon's rural communities will continue receiving the services that they have become accustomed to thanks to EOCCO's diligent work in providing care to a population in need.

As an organization with multiple facilities in rural Oregon we understand the impact that EOCCO has had across the board when it comes to advancing care, increasing quality and cutting costs to the system as a whole. Our organization has benefited greatly from PCPCH thanks to EOCCO's support and incentives. EOCCO has provided a large number of grant opportunities that otherwise would not have been available to our communities. EOCCO's impact expands far beyond what even our clinics see and experience therefore we sincerely support their request for application and appreciate your consideration on this matter.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

McKenzie Kennedy

Praxis Medical Group

PO Box 1517

Pendleton, OR 97801



May 3, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen.

I am writing on behalf of the Saint Alphonsus Health System in both Malheur and Baker counties to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Kenneth R. Hart, CPA

President, Saint Alphonsus Medical Center Ontario Saint Alphonsus Health System EOCCO Representative



Extension Service - Sherman County

Oregon State University 66365 Lonerock Road Moro, Oregon, 97039

P 541-565-3230 | **F** 541-565-3330 extension.oregonstate.edu/sherman

May 9, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

Writing to you from rural Sherman County. Our one medical facility is the Sherman County Medical Clinic in Moro. Otherwise, residents drive to The Dalles, Portland, Goldendale, Yakima, Hermiston, Portland, Redmond or Bend for health care. I am writing to state my on-going support for Eastern Oregon CCO's (EOCCO) Request for Application as the provider/overseer of health service to the Medicaid population in our county as well as the 12 rural counties that EOCCO serves.

I have served on our county's Local Community Advisory Committee and the Eastern Oregon Healthy Living Alliance. Both of these groups work to expand health care and better serve the Medicaid population in eastern Oregon. One of the things I have noticed over the years is that EOCCO is constantly changing and adapting to serve the needs of its providers and community partners. For example, Sherman County has used its EOCCO "Transformation Grant" monies to implement a Veggie Rx program to "prescribe" fresh (and now frozen) produce to clients meeting food insecurity screening. At first, this seemed to be a strange use of funds to the EOCCO...but now...in our third year, the EOCCO is now addressing food insecurity as a health issue! This is a great example of community collaboration and local investments by the EOCCO into these communities to address specific health issues as well as boost local economic growth by funneling health dollars into local grocery stores and farmers markets.

I look forward to continuing our work with EOCCO, especially as they always participate in our Sherman County Local Community Advisory meetings. As they say, "Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon."

Cindy K Brown

4-H Youth Development and Healthy Living

May 14, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Sherman County has greatly benefitted from EOCCO's presence through their commitment and support of early childhood programing, including the Four River's Early Learning Hub and partnering for our Parenting Education/Family Care Coordinator position. EOCCO has consistently shown a respect and understanding of frontier communities and the relational way we operate. Our families are our biggest commodity and they understand the connection between early intervention and social determinants of health, as well as how they all play into overall wellness of our community.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Amber DeGrange

Sherman County Juvenile Director 500 Court St Moro Oregon 97039

Olmber DeChange



Sherman County Local Community Advisory Council

May 14, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

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We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Hayli Sharp

Sherman County LCAC Chair

North Central Public Health District

Snake River

PEDIATRICS

Infants, Children, & Adolescents

840 SW 4th Ave, Suite 105 • Ontario, OR 97914 • (541) 216-6556 • Fax (541)216-6557

Matthew Berria, PhD, PA-C • Sage Benintendi Stringer, MPAS, PA-C • Michelle DeVoe, DO, FAAP

Mary James, MPAS, PA-C • Chelsie Lewis, FNP-C • Kailey Meskill, MPAS, PA-C • Marisue Susman, CPNP

May 6, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Snake River Pediatrics works very closely with the EOCCO and strives to be a top clinic within the EOCCO. We are a certified Rural Health Clinic and a Tier 4 PCPCH. We have a care coordinator that has gone through the training to become a Community Health Worker, which

Snake River PEDIATRICS

Infants, Children, & Adolescents

840 SW 4th Ave, Suite 105 • Ontario, OR 97914 • (541) 216-6556 • Fax (541)216-6557

Matthew Berria, PhD, PA-C • Sage Benintendi Stringer, MPAS, PA-C • Michelle DeVoe, DO, FAAP
Mary James, MPAS, PA-C • Chelsie Lewis, FNP-C • Kailey Meskill, MPAS, PA-C • Marisue Susman, CPNP

has allowed her to be involved with several schools and community organizations to improve healthcare for children in Eastern Oregon. We are heavily populated with Medicaid participants and partnering with the EOCCO has allowed us to grow tremendously as a clinic. We have grown significantly since opening in 2014 and the support of the EOCCO has helped us with our growth and transformation as a clinic. We will be adding behavioral health services to our clinic in the next two months, allowing us to offer even more services to our patients and families. In 2014 we opened with 6 providers and a staff of 12 to support them. We now have over 25 employees; with 2 additional mid-level providers and we are continuously looking to add another Pediatrician to our group. We will have 2 LCSW's start in July and a behavioral health coordinator to assist with growing mental healthcare in our clinic. Because of our partnership with the EOCCO we have been able to grow tremendously as a clinic and look forward to continue to grow and working closely with the EOCCO.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Chelsey Bidwell, Office Manager

Chelsey bidner

Snake River Pediatrics, PC

840 SW 4th Ave, Ste 105, Ontario OR 97914



Extension Service - Umatilla County Hermiston Agricultural Research and Extension Center

Oregon State University 2121 South 1st Street Hermiston, Oregon, 97838

P 541-567-8321 | **F** 541-567-2240 oregonstate.edu/dept/hermiston

May 10, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing to express strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is a result of its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Since the inception of the CCO model, I have witnessed improvements in health care coverage for consumers, particularly with regard to preventative care services. Delivering upstream care to promote better health outcomes is vitally important for consumers. EOCCO is very supportive of local efforts to address these issues. I look forward to continued work with EOCCO, local delivery systems and community partners. Together, we will continue to improve the quality of care delivered in Eastern Oregon.

Sincerely,

Angie Treadwell, RD, LD, SNAP-ED Coordinator

Oregon State University Extension, Umatilla and Morrow Counties

College of Public Health and Human Sciences

E-mail: angie.treadwell@oregonstate.edu

Agricultural Sciences & Natural Resources, Family and Community Health, 4-H Youth, Forestry & Natural Resources, Extension Sea Grant, and Open Campus programs. Oregon State University, United States Department of Agriculture, and Oregon counties cooperating. The Extension Service offers its programs and materials equally to all people.

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Amanda Waterland, CHW – Case Management St Anthony Hospital 2801 St Anthony Way Pendleton, OR 97801

2801 St. Anthony Way Pendleton, OR 97801 P 541.276.5121 www.sahpendleton.org

Imagine better health.[™] May 7, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen:

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

St. Anthony highly values the unique model that is EOCCO: An insurance carrier, providers, and communities addressing health care for the common good.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Harold Geller, President St. Anthony Hospital 2801 St. Anthony Way Pendleton, OR 97801 We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Ned Ratterman, Sr. Practice Manager

St. Luke's/Eastern Oregon Medical Associates 3950 17th Street Baker City, OR 97814 932 W. Idaho Ave., Suite 100 PO BOX J Ontario, Oregon 97914 Jody Stark, DNP, FNP, PMHNP Mary Stark, DNP, FNP

Phone:(541) 889-2244 Fax: (541) 889-2626

May 10, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I want to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

Without the support and funding provided by the Oregon Health Authority and EOCCO, critical services to our rural community members could not be provided. We look forward to continuing our work with the EOCCO. Together we will continue to improve the quality of care delivered in Eastern Oregon.

Sincerely,

Brenda Stark, B.S.

Office Manager

Stark Medical Group, PC

932 W. Idaho Ave, Ontario, OR 97914



May 1, 2019

348 W. Adams Burns, OR 97720 (541) 573-8376

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

EOCCO's strongest statement about what it has accomplished is that it has stayed true to the original intent what CCO's were supposed to accomplish. This is that by managing a system of healthcare within a global budget, costs have stayed down while the quality of the care has gone up. The services are tailored to the communities and there is ownership at a local level that produces "buy in" from both consumers and providers. Symmetry Care Inc. as part of Greater Oregon Behavioral Health has operated under these principals since the inception of the Oregon Health Plan in the 90's.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Chris Siegner, Director Symmetry Care Inc.

348 West Adams, Burns Oregon

TILLAMOOK FAMILY COUNSELING CENTER



A Drug Free Workplace

906 Main Avenue Tillamook, OR 97141 Telephone: (503) 842-8201 (800) 962-2851 Fax: (503) 815-1870

May 9, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing to express my strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

As a CMHP agency Director and GOBHI Board officer, I look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely, Mark Hang-Will

Frank Hanna-Williams, LCSW

Director

Tillamook Family Counseling Center

906 Main Ave

Tillamook OR97141



Lake District Hospital
Lake Health Clinic
Specialty Clinic
Home Health & Hospice
Behavioral Health & Prevention
Lake County Public Health

May 9, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing to express Lake Health District's strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing essential service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO has been largely successful due to their unique approach in collaborating with local health and community partners. EOCCO's model focuses on payer/provider partnerships, community collaboration, and grant opportunities to support ongoing healthcare transformation and quality improvement. Grant funding is an invaluable resource for filling budgetary gaps in our rural and frontier county.

Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to primary care that provide behavioral health services, the implementation of value-based payment models including shared savings and payments for quality, funding for the twelve local community advisory councils to address social determinants of health issues and grant funding for community partners and providers. EOCCO's grant funding also supports our Community Health Improvement Partnership as it collaborates with agencies and organizations across Lake County on programs that improve our quality of life and encourage people to actively pursue health.

Other initiatives include the use of Community Health Workers and reimbursement to the Health District for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process and specifically allowed us to reach many of our targets but more importantly, improve our internal systems.

I look forward to continuing our work with EOCCO, in partnership with community partners. Together we will continue to advance healthcare transformation by improving the quality of care delivered in Eastern Oregon.

Sincerely,

Charles B. Tveit

CEO

Lake Health District

Lake Health District



Umatilla County Public Health

200 SE 3rd St., Pendleton, OR 97801 Pendleton: 541-278-5432 Fax: 541-278-5433

Hermiston: 541-567-3113 Fax: 541-567-3112 www.ucohealth.net E-Mail - Health@umatillacounty.net



May 14, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing to express support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

UCo Health is constantly striving to improve the health of our community through prevention activities. It is well documented that investments in prevention activities reduce the financial impact of chronic diseases on healthcare facilities. We look forward to broadening our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to Promote, Protect, and Preserve the health of our communities.

Sincerely,

Joseph P. Fiumara Jr., MSEH, REHS

Public Health Director

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

As CARE (Community Assess for Resource Effectiveness) Resource Coordinators our job is to assist at risk students and their families find and access local resources, services, and programs. The partnerships that are created between CARE and many of the EOCCO partners, agencies, and organizations make it possible to provide an extra layer of support and a more in depth understanding of the resources offered to CARE families. We are fortunate to have the opportunity to engage and partner with a robust EOCCO, which focuses on community collaboration for the betterment of all, not just a select population who are entitled to Medicaid and Medicare.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Sheryln Roberts and Lenore Case, CARE Resource Coordinators Union County CARE Program 1106 K Ave La Grande OR 97850



Healthy Families. Strong Communities.

Executive Team 1441 N.E. 10th Ave. Payette, ID 83661 Tel: (208) 642-7364 Fax (208) 642-4565

Health Centers P.O. Box 429 207 E. 12th St. Emmett, ID 83617

Tel: (208) 365-1065 Fax (208) 365-1068

2327 S.W. 4th Ave. Ontario, OR 97914 Tel: (541) 889-2340 Fax (541) 889-2593

17 S. 3rd Nyssa, OR 97913 Tel: (541) 372-5738 Fax (541) 372-5732

789 Washington W. Vale, OR 97918 Tel: (541) 473-2101 Fax (541) 473-2668

P.O. Box 349 300 N. Plymouth New Plymouth, ID 83655 Tel: (208) 278-3335 Fax (208) 278-3337

1441 N.E. 10th Ave. Payette, ID 83661 Tel: (208) 642-9376 Fax (208) 642-9279

Treasure Valley Pediatric Clinic 1219 S.W. 4th Ave., Suite 1 Ontario, OR 97914 Tel: (541) 889-2668 Fax (541) 889-2997

Treasure Valley Women & Family Medicine Clinic 1219 S.W. 4th Ave., Suite 2 Ontario, OR 97914 Tel: (541) 881-2800 Fax (541) 881-2825

Dental Clinics 17 N. 6th St. Nyssa, OR 97913 Tel: (541) 372-2606 Fax (541) 372-3855

2327 S.W. 4th Ave. Ontario, OR 97914 Tel: (541) 889-0052 Fax (541) 889-0990

1501 N.E. 10th Ave. Payette, ID 83661 Tel: (208) 642-9379 Fax (208) 642-9598

Outreach Center 7 S.W. 3rd Street Ontario, OR 97914 Tel: (541) 889-6119 Fax (541) 889-6860 May 13, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing to express my strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural and frontier counties that make-up EOCCO, including Malheur County.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement.

I believe that Valley Family Health Care is in a relatively unique position to help highlight some of the successes of the CCO model in general, and EOCCO in particular. Although founded and incorporated as an FQHC in Idaho, fifty-two percent of the patients we serve reside in Oregon, forty-seven percent in Idaho and one percent elsewhere. The differences between the two states is quite significant in what services can be offered/reimbursed. It is our firm belief that this allows us to provide more and better care—thus improving health outcomes.

For example, the investment in primary care has enabled us to grow from one Care Coordinator three years ago to eight today, including one who focuses solely on care transitions from the hospital and appropriate ER utilization. We have gone from three Outreach and Enrollment workers to five certified Community Health Workers, collaborating with several outside social service agencies and other healthcare providers to get individuals the assistance they need. And lastly, the focus on Value-based Pay and outcomes is necessary in order to reduce and then eliminate the incentives inherent in the system that reward the wrong things (sick care and numbers, versus well care).

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Timothy S. Heinze

CEO



May 6, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We are not only writing to express our support from a provider level but, from a community standpoint, EOCCO has provided exceptionally creative programming that consumers greatly benefit from, i.e. 3 community life-jacket stations in Wallowa County, Fit-Friday's, HealthFest for kids, just to name a few. Wallowa County understands the EOCCO and the value of services they have come to expect.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Chantay Jett, MA Executive Director



May 13, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem, OR 97301

Dear Director Allen,

We, the Wallowa County Local Community Advisory Council (LCAC), are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement.

Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils including ours, to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services.

EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

The Wallowa LCAC advocates for the health and wellness of our county. We consist of citizens from all walks-of-life, community partner organizations and Oregon Health Plan consumers. We partner with EOCCO on many important projects that are helping our communities in Wallowa County. We look forward to continuing this important work and improving the quality of care delivered in Wallowa County.

Sincerely,

Meg Bowen, Chair Wallowa LCAC



Wallowa County Health Care District We Treat You Like Family

May 1, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Larry Davy, CEO

Wallowa Memorial Hospital

Phone: 541-426-3111 TDD/TTY/TRS Dial 711 Fax: 541-426-4095 May 13, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

We are writing to express our strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans. Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

The Wheeler County Local Community Advisory Council has enjoyed a long standing productive and collaborative relationship with EOCCO and its staff. As the state's least populated county with significant geographical and economic barriers Wheeler experiences a unique set of determinative factors related to health needs and healthcare delivery. EOCCO and its excellent staff have gained a contextual understanding of these local conditions which can only be developed via hands on experience. Respectfully, we hereby submit that any change to the current dynamic would be counterproductive.

We look forward to continuing our work with EOCCO, in partnership with local delivery systems and community partners. Together we will continue to advance healthcare transformation improving the quality of care delivered in Eastern Oregon.

Sincerely,

Wheeler County Local Community Advisory Council P.O. Box 4 Fossil, OR 97830 Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I am writing to express my strong support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing excellent service to the Medicaid population in the twelve rural counties that make-up EOCCO.

EOCCO's success is in large part due to its work to continuously evolve and modify its approach to transformation in collaboration with local providers and community partners. Today, EOCCO's model focuses on payer/provider partnerships, community collaboration, and local investments to support ongoing healthcare transformation and quality improvement. Specific examples of EOCCO initiatives include: significant financial investments in primary care and PCPCH's, payments to PCPCH's that provide behavioral health services, the implementation of value based payment models including shared savings and payments for quality, grant funding for community partners and providers, and funding for the twelve local community advisory councils to address social determinants of health issues identified in their respective community health improvement plans.

Other initiatives include the use of Traditional Health Workers, including Community Health Workers, and reimbursement for their services. EOCCO has also invested in technology to collect, aggregate and report clinical data across its largest practices in order to address the challenges associated with multiple EHR systems. As a result of these ongoing collective investments, EOCCO met the 3.4% rate of growth target for the 2019 rate setting process.

We as a County hope to continuing working with EOCCO, in partnership with our community partners. Together we will continue improving the quality of care delivered in Eastern Oregon.

Sincerely,

James Williams Lake County Commissioner 513 Center Street Lakeview, OR 97630 (541)-947-6002 (541)-410-8075



May 3, 2019

Pat Allen, Director Oregon Health Authority 5003 Summer Street NE Salem OR 97301

Dear Director Allen,

I write to express Winding Waters support for Eastern Oregon CCO's (EOCCO) Request for Application to continue providing Medicaid coverage and services in the twelve counties of Eastern Oregon.

Winding Waters is a non-profit community health center offering high-quality primary medical, dental, and behavioral health care services to all, regardless of ability to pay. We serve the residents and visitors of Wallowa County, an area of striking natural beauty and significant generational poverty. Our latest Community Health Needs Assessment found High Need Areas across multiple domains including Health Conditions (above-average prevalence of chronic disease), Issues of Health Concern (significantly elevated tobacco use), Access to and Utilization of Care (need for oral health care), and Social Needs and Resources (% below poverty level).

Since the beginning, EOCCO has been an essential partner, supporting providers like Winding Waters as we improve the health of our community and address those high need areas made so much more persistent by generational poverty. EOCCO's support has taken many forms including traditional and alternative funding models, technical assistance, and community health improvement grant funding, among others.

Key to Winding Waters success in achieving high quality marks has been EOCCO's support of our Five Star PCPCH status. EOCCO has made significant investments, ensuring patients have a comprehensive care team in Wallowa County, including a range of primary care behavioral health services.

I look forward to continuing our work with EOCCO, in collaboration with our community partners. Together we will continue to advance healthcare transformation, improving the quality of care delivered in Wallowa County and all of Eastern Oregon.

Sincerely,

Nicolas Powers, CEO