
Community and Partner Workgroup (CPWG)

Meeting 3
June 23, 2022

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Meeting Objectives

1. Continue to build relationships among members
2. Review Issues Tracker and discuss updates
3. Review renewals and eligibility pathways and supports
4. Data that might help this workgroup understand who is impacted – what would be helpful to include in a public facing dashboard to understand renewal process?

Agenda

Welcome and introductions

Issues Tracker Follow up

CPWG Member open space

Review eligibility pathways and supports

Data points to track member experience

Meeting close and next steps

Introductions

Please share your:

- Name
- Pronouns you use
- Any needs you might have to help you participate fully
- Prompt:
 - What do you think are the biggest challenges when it comes to communicating with members or member communications?
 - *or*
 - What have you seen be most successful around member communications?

Issues Tracker Review

Updates and follow up on issues raised

Workgroup Recommendations Tracker: agency accountability for recommendations

Date Proposed	Recommendation	OHA/ODHS Response
5/26/2022	Community Partner ability to sign up individuals for other benefits in ONE System. How can this system be leveraged and what is the ONE system capable of?	Oregon Department of Human Services preparing a pilot of the ~30 funded CPs through CPOP who have interest in expanded access to support SNAP/cash/child care applications, as well as provide a small group of interested SSP CPs access to ONE for SSP programs only for the pilot. As of 6/8/2022, this is not moving forward in 2022. Barriers to be addressed include: 1) OHA/ODHS ability to design/build additional modifications in ONE system due to competing demands and 2) review and approval on the federal level of several federal regulations.
5/26/2022	Community Partners would like View Only access to Medicaid Management Information System (MMIS) to help understand existing benefits when assisting individuals. This is helpful to determine if fully new or already having active Medicaid/ ODHS benefits.	
5/26/2022	Prior to the PHE CCOs were receiving member renewal dates on the 834 Elig File. This was extremely helpful with member communication if they were to call regarding their medical benefit and why they were lost or when they needed to reapply. Will this be reinstated?	These are currently not being sent because renewals are not being performed. When renewals begin again, CCOs will get this information on the 834 Elig File. One limitation of this is that it is not updated until after a renewal is done. OHA can look at if possible to pull reports, compare to MMIS and provide to CCOs as an additional level of eligibility data. (This action is not yet operationalized)

Workgroup Recommendations Tracker: agency accountability for recommendations

Date Proposed	Recommendation	OHA/ODHS Response
5/26/2022	Could Public Services Announcements be a possibility regarding the redetermination process?	Yes - there will be a paid media campaign. Communications team will present to CPWG at 7/14 meeting for input into Comms Planning.
6/9/2022	Is there a way to make it clear/get reminders in the ONE system as CP assisters when someone is due for renewal?	CPs associated to a case should receive applicant portal inbox notifications when a member is sent any kind of notice. They can find their inbox on their applicant portal dashboard.
6/9/2022	Increase # of and awareness of Community Partners in rural areas of Oregon. More assisters overall	The Community and Partner Outreach Team can work with organizations to become assisters. https://healthcare.oregon.gov/Pages/find-help.aspx
6/9/2022	There is a question on the ONE system: Does it ask if someone wants WIC?	Currently there is a prompt in the system for workers to ask people applying for non-medical programs if they are interested in WIC. They then refer the person to WIC to manually apply. WIC now has the technology to accept referrals from ONE and discussions are starting around how to implement that capability in the systems. No decisions or timeline yet.

Workgroup Recommendations Tracker: accountability for recommendations

Date Proposed	Recommendation	OHA/ODHS Response
6/9/2022	Reminders for clients I've never worked with. It would be great to only get reminders about my clients.	Community Partners (CPs) may receive notifications about other individuals since CPs are associated with cases not just individuals.
6/9/2022	Need to ensure contact information for Oregonians in the ONE system is up to date and accurate before letters are sent out regarding redeterminations.	OHA doing outreach to CPs asking to encourage/obtain updated contact info in all contacts with members. ODHS staff doing the same in their interactions with Oregonians. Plans to send a letter to members asking for them to ensure updated contact info; returned mail will be processed to update addresses and planning is under way to manage the expected returned mail workload.
6/9/2022	Can OHA provide a communication toolkit for CCOs to share with providers about how providers can help with the redetermination process?	The Communications team is currently developing a comms toolkit for CCOs and others to learn more about the PHE Unwinding and have the information that they need to support people as they move through the redeterminations process.
6/9/2022	The CPWG has heard concerns about OHP members who when going through SNAP or other benefits eligibility determination (and who have their benefits discontinued) also inadvertently have their Medicaid benefits also discontinued. Does ODHS have a sense or has ODHS conducted an audit to determine how frequently members have loss Medicaid Eligibility due to worker error when doing other SS redeterminations?	We have PHE rules right now to not close during the PHE (other than certain circumstances) we know we have individuals over income that are still eligible for OHP based on updated SNAP information received and PHE rules allowing them not to have reductions/closures. If we could get examples it would be helpful.

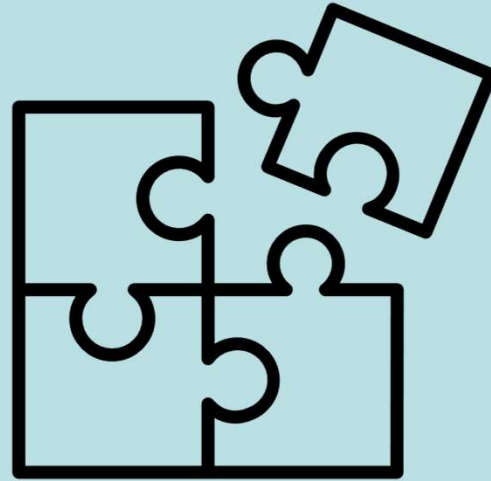
CPWG Member Open Space

Open time for members to raise questions, present topics they want this group to look into, or provide input.

Stretch break

- Let's take a 5-minute break – make sure to mute your microphones





Collecting Member Information

Who partners and assists in eligibility and renewals work?

What pathways do individuals follow?

What populations does this organization or group assist?

What reach does this organization or group have?

How frequently does this organization or entity interact with Oregon Health Plan members?

Are there any specific groups that this org. or group is most effective in reaching, any specific skills or focus on priority populations?

Are there any barriers that this Entity faces in reaching Members

Mapping of entities who support and play a role in enrollment and redeterminations

- Area Agencies on Aging (AAA)
- Aging and People with Disabilities (APD)
- Certified Insurance Broker
- Coordinated Care Organization
- Fee-for-Service Care Coordination
- Health Care Providers
- Local Public Health Authority (LPHAs) Federally Qualified Health Clinic (FQHC)
- Marketplace Community Partners
- OHA Community Partner (CP) Network
- OHP Client Services Unit
- One.oregon.gov
- Oregon Tribes
- PH Tech
- Schools
- Self-Sufficiency Programs (SSP-ODHS)
- Senior Health Insurance Benefits Assistance (SHIBA)
- ONE Customer Service Center






Summary

The table in the following slides show the different ways and opportunities for OHP members (Members) to update their addresses. The table contains the following information:

Entity



- **Entity Description** – This is the entity who supports and plays a role in enrollment and redeterminations
- **Entity's Role** – What is this entity's role in the enrollment and redeterminations work
- **Contact** – Entity's point of contact



Population Segment




- **Population Segment Description**– What specific population this entity serves
- **% Reach** – That #% of population does this entity reach
- **Frequency of Member Contact** – Low to High (e.g., only for enrollment, interacts for many services)
 - Low  Medium  High 


Analysis


- **Strengths** – Any specific groups that this Entity is most effective at reaching, any specific skills, any focus on specific priority populations or populations impacted by health inequities, etc.
- **Barriers** – Any barriers that this Entity faces in reaching Members

Entity	Population Segment	Strengths	Barriers
<p>Area Agencies on Aging - Type B (AAAs)</p> <p><u>Entity's Role</u> Application, renewals for all programs in the ONE system: medical, food, cash, childcare. Long-term Services & Supports (LTSS) are also provided. Understand the current connections and collaborations across OHA</p>	<p>Older adults and people 18 years and older who are experiencing physical and/or other disabilities. Work with dually eligible Medicare-Medicaid clients. Serves Members in Multnomah, Washington, Clackamas and Lane counties</p> <p><u>Reach</u> <i>##% of population does this entity reaches</i></p> <p><u>Frequency of Member Contact</u></p> <p> High Many contacts. Interacts with multiple statewide and local services/programs</p>	<ul style="list-style-type: none"> • Can apply for all ONE system benefits online, by phone or in-person • Able to learn about other programs • AAAs also responsible for Older Americans Act (OAA) services 	<ul style="list-style-type: none"> • Requires trust in entering government building/interacting with government entity • Locating address/phone number by phone or online • Transportation • Cost of transportation • COVID-19 exposure • Limited access to or ability to use internet
<p>Ageing and People with Disabilities (APD)</p> <p><u>Entity's Role</u> Application, renewals for all programs in the ONE system: medical, food, cash, childcare</p>	<p>Older adults and people 18 years and older who are experiencing physical and/or other disabilities. Work with dually eligible Medicare-Medicaid clients</p> <p><u>Reach</u> <i>##% of population does this entity reaches</i></p> <p><u>Frequency of Member Contact</u></p> <p> High Many contacts, interacts with multiple statewide and local services/programs</p>	<ul style="list-style-type: none"> • Can apply for all ONE system benefits online, by phone or in-person • Able to learn about other programs • Provides services to people in their preferred language, either through call center staff or on-call interpretation services from contractor 	<ul style="list-style-type: none"> • Requires trust in entering government building/interacting with government entity • Locating address/phone number by phone or online • Transportation • Cost of transportation • COVID-19 exposure • Limited access to or ability to use internet

Entity	Population Segment	Strengths	Barriers
<p>Certified Insurance Brokers</p> <p><u>Entity's Role</u> Over 600 certified insurance brokers throughout the state. Of these, 29 are partner agent grantees with the Marketplace.</p>	<p>Certified insurance brokers work directly with consumers applying for coverage and those that need to report life changes</p> <p><u>Reach</u> Great overall/ geographical reach to consumers, though not as well connected with Medicaid- eligible consumers. Need #% of population does this entity reaches</p> <p><u>Frequency of Member Contact</u>  Low Low contact with OHP members except for those in mixed eligibility situations</p>	<ul style="list-style-type: none"> • Trusted resource for consumers • Most are well connected with local Community Partners (CP). 	<ul style="list-style-type: none"> • Updates to OHP member information will be difficult for certified insurance brokers to help with because brokers/agents do not have access to the ONE System
<p>Coordinated Care Organizations (CCO)</p> <p><u>Entity's Role</u> CCOs help OHP members in their respective county to understand their health benefits and how to use it. They makes sure Members get care from providers (e.g., doctors, nurses, counselors, dentists, pharmacists). There are currently 16 CCOs in Oregon.</p>	<p>OHP members who are not served through Fee for Service (FFS)</p> <p><u>Reach</u> Approx. 90% of the OHP members in Oregon</p> <p><u>Frequency of Member Contact</u>  High Contact with OHP members through call centers, social media, mail notices, etc.</p>	<ul style="list-style-type: none"> • Trusted contact for some members, may be able to update member addresses (contingent on operations) • Some CCOs will transfer members to correct OHA resource line 	<ul style="list-style-type: none"> • Not currently operational to update member addresses • Hold time increases if need to transfer to another resource line • Representative may not be knowledgeable about proper channels (this may change on 8/1/22)


Entity	Population Segment	Strengths	Barriers
<p>Fee-for-Service (FFS) Care Coordination</p> <p><u>Entity's Role</u> Over 600 certified insurance brokers throughout the state. Of these, 29 are partner agent grantees with the Marketplace.</p> <p>CareOregon Tribal Care Coordination</p>	<p>OHA contracts with CareOregon to provide care coordination to American Indian/Alaska Native (AI/AN) FFS OHP members. Kepro serves other FFS members</p> <p><u>Reach</u> Approx. 10% of the OHP members in Oregon</p> <p><u>Frequency of Member Contact</u></p> <p> Medium Contact with OHP members through call only – AI/AN OHP clients use CareOregon's 800 number</p>	<ul style="list-style-type: none"> • Can reach all FFS AI/AN members statewide 	<ul style="list-style-type: none"> • Lack of resources
<p>Health Care Providers</p> <p><u>Entity's Role</u> Providers may share general reminders in their offices (e.g., flyers, posters, rack cards). Only providers who also serve as community partners may play a role in enrollment/ redetermination work.</p> <p>OHA's Provider Services Unit (PSU) does not handle enrollment or redeterminations for members.</p>	<p>PSU supports providers with denied claims inquiries. Providers serve both FFS and CCO members</p> <p><u>Reach</u> Please check with Todd Howard on how many FFS providers are enrolled.</p> <p><u>Frequency of Member Contact</u></p> <p> Low PSU does not assist members with enrollment or redeterminations.</p> <p> Medium Providers interact with members to deliver services, make referrals, perhaps resolve billing issues, help them contest denials</p>	<ul style="list-style-type: none"> • Often are the first to know when a Member has changed an address *PSU does not always know this information. 	<ul style="list-style-type: none"> • Not currently allowed under existing OARs to update Members' addresses

Entity	Population Segment	Strengths	Barriers
<p>Local Public Health Authority (LPHAs) Federally Qualified Health Clinic (FQHC)</p> <p><u>Entity's Role</u> <i>What is this entity's role in the enrollment and redeterminations work?</i></p>	<p><i>What specific population this entity serves?</i></p> <p><u>Reach</u> <i>#% of population does this entity reaches</i></p> <p><u>Frequency of Member Contact</u> <i>Minimum to many (e.g., only for enrollment, interacts for many services)</i></p>	<ul style="list-style-type: none"> Any specific groups that this Entity is most effective at reaching, any specific skills, any focus on specific priority populations or populations impacted by health inequities, etc. 	<ul style="list-style-type: none"> Any barriers that this Entity faces in reaching Members
<p>Marketplace Community Partners</p> <p><u>Entity's Role</u> Marketplace Community Partner (CP) grantees and community-based organizations (CBOs) have 48 certified application assisters. We will be adding additional certified application assisters with grantee organization in August 2022</p>	<p>300+ CBOs in Oregon. Seven of these organizations are Marketplace Community Partner (CP) grantees, with 5 additional organizations currently onboarding.</p> <p><u>Reach</u> CBOs have robust geographical reach with an emphasis on OHP and Medicaid programs. Marketplace CP grantees have coverage is Multnomah, Clackamas, Washington, Marion, Polk, Yamhill, Baker, Union, Wallowa, and Umatilla. We recently added grantees to cover Lane, Josephine, Jackson, Douglas, Coos, Curry, Hood River, Curry, Jefferson, and Deschutes. Our grantees have an emphasis on OHP and Marketplace enrollments</p> <p><u>Frequency of Member Contact</u></p> <p> High They had over 320,829 outreach contacts with the community and provided over 93,064 outreach materials from August 2020 to May 2021</p>	<ul style="list-style-type: none"> Marketplace CP grantees and CBOs are trusted in hard-to-reach communities Proficient in specialized outreach Trained in both Medicaid programs and the Marketplace 	<ul style="list-style-type: none"> Limited bandwidth and availability due to the demand for assistance

Entity	Population Segment	Strengths	Barriers
<p>OHA Community Partner (CP) Network</p> <p><u>Entity's Role</u> Approximately 340 CP Organizations and 1,500 assisters across the state. They work directly with people in Oregon who are applying for coverage and/or needing health care and system navigation.</p>	<p>OHP members who are applying for coverage and need health care and system navigation.</p> <p><u>Reach</u> <i>#% of population does this entity reaches</i></p> <p><u>Level of Contact with Members</u> <i>Low/ Medium/ High (e.g., only for enrollment, interacts for many services)</i></p>	<ul style="list-style-type: none"> • Ability to connect in person, over the phone, or via email (depending on the CP) • Trusted resource • May be able to assist with other issues • Able to submit address change on member's behalf • A resource for members experiencing housing insecurity 	<ul style="list-style-type: none"> • Barriers to in-person office visits • CP must input change within 10 days. Otherwise, member is responsible • Address change may not update in system right away, lack of ability to double check if address is entered correctly • CP may not be able to hold mail for clients who need a mailing address • Lack of resources for members experiencing housing insecurity
<p>OHP Client Services Unit</p> <p><u>Entity's Role</u> Processes CCO enrollment change requests from OHP members (Members) or their representatives. Provide general information regarding Member's Medicaid services – change their CCO, how to access care or services, resolve any issues including billing</p>	<p>OHP members of all Medicaid programs looking for general information</p> <p><u>Reach</u> 1.5 million OHP members</p> <p><u>Frequency of Member Contact</u>  High 600-1,400 members daily via phone, email and mail</p>	<ul style="list-style-type: none"> • Assists Members with complaints and resolves them • Works with all Members and are well equipped to provide accurate info and guidance regarding all OHP-related services • Able to assist Members questions with no risk of COVID exposure 	<ul style="list-style-type: none"> • This entity can no longer make non eligibility updates in the ONE System (e.g., address)

Entity	Population Segment	Strengths	Barriers
<p>One.oregon.gov</p> <p><u>Entity's Role</u> Website, known as the Applicant Portal internally, where people can create an account to apply for and manage benefits within ONE, including updating one's own personal contact information</p>	<p>People applying for or receiving medical, food, cash or child care benefits through the ONE system</p> <p><u>Reach</u> Available to any of the 1.5 million people in Oregon receiving benefits through the ONE system. Having an online account is optional; people can choose how they want to interact with ODHS related to their benefits: online, by phone or in-person.</p> <p><u>Level of Contact with Members</u></p>	<ul style="list-style-type: none"> • 24/7 access • Online application available in English and Spanish; • Helper bot to help applicants through process and answer questions 	<ul style="list-style-type: none"> • Lack of computer/mobile access or internet connectivity • Online application available only in English and Spanish
<p>Oregon Tribes</p> <p><u>Entity's Role</u> Tribal governments operate health centers that service American Indian/Alaska Native (AI/AN) OHP members</p>	<p>AI/AN OHP members (Members)</p> <p><u>Reach</u> AI/AN Members who receive services at Tribal/Indian Health Service (IHS) /Urban Indian health programs</p> <p><u>Frequency of Member Contact</u> <i>Low/ Medium/ High (e.g., only for enrollment, interacts for many services)</i></p>	<ul style="list-style-type: none"> • Tribes serve Members of their community and have relationships with community Members 	<ul style="list-style-type: none"> • We have not discussed with our tribal partners a role for them in updating information for this purpose

Entity	Population Segment	Strengths	Barriers
<p>PH Tech</p> <p><u>Entity's Role</u> Supplemental customer service support for OHA & ODHS during PHE Unwinding</p>	<p>Supplemental customer service support for OHA & ODHS during PHE Unwinding</p> <p><u>Reach</u> All Oregon Residents</p> <p><u>Frequency of Member Contact</u></p> <p>Call Only</p>	<ul style="list-style-type: none"> • Large body of FTE, will be able to make non-eligibility updates 	<ul style="list-style-type: none"> • Will have limitations in terms of training
<p>Schools</p> <p><u>Entity's Role</u> Assist applicants and members but when unable to do so, make referrals to their local application assister.</p>	<p>Schools and agencies working within schools (e.g., Migrant Education and School Based Health Centers offer application assistance and system navigation support)</p> <p><u>Reach</u> All Oregon Residents</p> <p><u>Frequency of Member Contact</u></p> <p>Frequent but through calls only</p>	<ul style="list-style-type: none"> • Families connected in schools provides a trusted source and place for families to receive assistance • Reduced chances of having an outside agency referral 	<ul style="list-style-type: none"> • Not all schools participate • Very much a patchwork of assistance at schools • Number one request from schools is more mental health services
<p>Self-Sufficiency Programs (SSP-ODHS)</p> <p><u>Entity's Role</u> Administers the state's SNAP food benefit, TANF cash assistance and ERDC child care assistance programs. Application, renewals for all programs in the ONE system:</p>	<p>People who are applying for or receiving benefits in the ONE system</p> <p><u>Reach</u> Has local offices throughout Oregon. Also can support any of the 1.5 million people receiving benefits through ONE system; people can be served in person through any AAA, APD or SSP office statewide; call center and online options also available</p> <p><u>Frequency of Member Contact</u></p>	<ul style="list-style-type: none"> • Can apply for all ONE system benefits online, by phone or in-person • Able to learn about other programs • Provides services to people in their preferred language, either through staff or on-call interpretation services from contractor 	<ul style="list-style-type: none"> • Requires trust in entering government building; • Locating address by phone or online • Transportation • Cost of transportation • COVID-19 exposure

Entity	Population Segment	Strengths	Barriers
<p>Senior Health Insurance Benefits Assistance (SHIBA)</p> <p><u>Entity's Role</u> Medicare and other supplemental care insurance</p>	<p>People with Medicare and their families</p> <p><u>Reach</u> <i>##% of population does this entity reaches</i></p> <p><u>Frequency of Member Contact</u> <i>Low/ Medium/ High (e.g., only for enrollment, interacts for many services)</i></p>	<ul style="list-style-type: none"> • Able to get in person assistance to learn about other insurance benefits • Able to file and navigate the complaint and appeal process with a live person • Volunteers have specialized knowledge and training • Trusted by Medicare community 	<ul style="list-style-type: none"> • Need to get to an office • Limited number of sites, some counties may not have a site • Ability to gain awareness of available support • Need transportation • Need Internet access or other means to get address • Need translator • Visit needs to match up with schedule of family/support worker/representative/etc., • Risk of COVID exposure • Unsure if SHIBA can accept address changes for OHP/Medicaid members
<p>ONE Customer Service Center</p> <p><u>Entity's Role</u> Help member to apply or manage benefits by phone for programs within ONE: medical, food, cash childcare. Known internally as the Virtual Eligibility Center (VEC).</p>	<p>All people applying for or managing benefits received through the ONE system;</p> <p><u>Reach</u> Available to any person applying, reapplying or managing the benefits available through the ONE system. Statewide service. Not as well connected with Medicaid- eligible consumers.</p> <p><u>Frequency of Member Contact</u></p> <p> High</p> <p>Many contacts; interacts with multiple statewide and local services/programs</p>	<ul style="list-style-type: none"> • Able to apply and get help with all ONE system benefits • Able to talk with a live person • Provides services to people in their preferred language, either through call center staff or on-call interpretation services from contractor • No risk of COVID exposure 	<ul style="list-style-type: none"> • Long wait times • Dropped calls • Hours limited to 7 a.m. to 6 p.m. PST, weekdays. • Long hold times, may require adjustment to work hours or other necessary obligations

Who can update contact info in ONE system – 6/21/22

Oregonians	ODHS Staff <i>(mix of central office units and local office staff in both Aging and People with Disabilities and Self-Sufficiency Programs Offices)</i>	ODHS Partners
<ul style="list-style-type: none"> • People receiving benefits who have created ONE accounts via the Applicant Portal at ONE.Oregon.gov • Individual Authorized Representatives (acts on behalf of applicant or beneficiary in applying, renewing and ongoing communications) 	<ul style="list-style-type: none"> • Eligibility workers • Eligibility support staff • Case aides • Eligibility lead workers • Eligibility supervisors • Family Coaches • Program Managers • District Managers • Central Office leadership • Imaging and Records Management Unit • Triage Team • Hearings Representatives • Financial clerks • Oregon Trail Care Replacement Line staff 	<ul style="list-style-type: none"> • Area Agency on Aging – Type B staff • OHA CPOP Community Partners and administrative staff • PH Tech (temporary staffing agency contracted to assist with ONE Customer Service Center) • Organized Authorized Representatives (organization permitted by rule to act on behalf of person receiving benefits such as a residential facility)

Data that might help this workgroup understand who is impacted

What would be helpful to include in a public facing dashboard?

Group recommendations and Discussion

Upcoming Meeting dates

Mtg 3: **Thursday, July 14th, 3-5pm**

Topics: strategies for outreach and communications

Mtg 2: **Thursday, July 28, 3-5pm**

Topics: feedback and reactions to outreach and communications strategies

* August 18th (3-5pm)

* September 15th (3-5pm)

Thank you!

Feel free to reach out if you have any questions or need any support.

Appendix

Slides that we might want to come back to.

Consensus Decision-Making

Thumbs up, Thumbs sideways, Thumbs down



Fully Agree



Fully Disagree



Could go either way

Fist to Five



5 fingers = Fully Agree and will champion

4 fingers = I'm fine with it

3 fingers = I see minor issues we can resolve later

2 fingers = I see minor issues we need to resolve now

1 finger = I see major issues that we need to resolve



Fist = I can't support this

Draft Timeline and Workplan

Month	Work
May 26, 2022	Mtg 1 – Review background and redetermination process
June 2022 - 2 mtgs, TBD	Mtg 1 – strategies for obtaining and updating contact information Mtg 2 – strategies for outreach and communication
July 2022 – 2 mtgs, TBD	Mtg 1 – strategies to maximize navigation assistance Mtg 2 – strategies to minimize loss of coverage
August – September 2022	Review plan and responsiveness to input
October 2022 – January 2023	Monitoring and oversight of redetermination process
February – March 2023	Review and endorsement of report to legislature

Draft Working Agreements

- We will focus on equity
- Show up with good intentions and be accountable for what you say and do
- Commit to addressing and repairing any harm we cause one another
- Listen respectfully to each other
- Make sure everyone's voice is heard/Share the microphone
- Be respectful to each other
- Commit to being uncomfortable
- Know that we are greater together
- Avoid using acronyms or explain them when we do

What is
missing or
what would
you add?

Draft Group Commitments

- To prioritize attending CPWG meetings
- To review meeting materials ahead of time and come prepared to participate
- To stay present and engaged in meetings to the best of my ability
- To be respectful to other CPWG members and their ideas and viewpoints
- To take the time we need to make sure everyone understands the material and they have the information they need to participate

CPWG Website:

<https://www.oregon.gov/oha/Pages/phe-maintain-coverage.aspx>

One place to go for information and materials on our work

