

To: Representative Salinas, Chair
Representative Hayden, Vice-Chair
Representative Nosse, Vice-Chair
Members of the House Health Care Committee

From: Bill Bouska

Date: May 7, 2019

Re: Informational meeting on equitable access to health care

Chair Salinas, Vice Chairs Hayden and Nosse, and members of the Committee, my name is Bill Bouska and I am the Director of Government Affairs and Community Solutions for Intercommunity Health Network Coordinated Care Organization. IHN-CCO coordinates the physical, oral, and behavioral health services to over 55,000 individuals in Linn, Benton, and Lincoln Counties. We are concerned about the health of all our members, especially those members who may be experiencing health disparity, and we are working hard with our community partners to reduce these disparities.

Thank you for the opportunity provide information on how the race and ethnicity data we receive from the Oregon Health Authority can impact the health care of members of the IHN-CCO. As of May 5, 2019, the information provided to us from OHA through the enrollment files shows that we have 55,722 members enrolled in IHN-CCO. However; 24,357 or 44% of the membership is missing the data we need to do population specific health care interventions or health system transformation.

We want to acknowledge the work of the OHA to elevate the issues of health equity and increased expectations outlined for CCO 2.0. The Developing Equity through Leadership; Training and Action (DELTA) is an example of a high-quality training program that spreads the level of expertise throughout the state.

Recently, Dr. Kevin Ewanchyna, our Chief Medical Officer completed the training and developed a project regarding Colorectal Cancer Screening (CRC) for members identifying as Hispanic/Latino. Understanding that people identifying as Hispanic/Latino has a colorectal cancer screening rate that is much lower than the average population but a similar rate of cancer. Part of the project was understanding the barriers that might exist. After the DELTA course, we included key stakeholders in our communities like Community Health Workers, Oregon State University, Health Equity

subcommittee members, primary care providers and OHA subject matter experts involved in SRCH (Sustainable Relationships for Community Health). Many were excited about the creation of initiatives and strategies to implement interventions to increase the screening rate for members who identify as Hispanic/Latino. However; the project was not implemented as planned. The root cause of the barriers was not knowing who the target population is within our CCO. We were not able to get the appropriate race and ethnicity data to develop a target cohort for outreach and engagement. Thus, the project disbanded, and we were left to advertising to all community members regarding the importance of CRC screening. The need for data to help create a cohort that can be tracked and measured is necessary to improving health in diverse populations.

Improving the data collection is not necessarily easy or is there a quick fix but there would be benefit from strategic problem solving with multiple partners in the system, CCOs being a critical part of that work. IHN-CCO would welcome the opportunity to participate and contribute to efforts that will improve the collection and use of race and ethnicity data to increase health access and outcomes for all members.