



OREGON MIH COALITION BOARD MEETING AGENDA

August 21, 2024

Board Members Present:

Sabrina Ballew, Chair; Janina Kerr-Bryant, Secretary; Josh Nordberg, Treasurer; Madison Riethman, PIO; Joan Field; Jamie Breunig

Others:

Bill Steward, Stella Rausch-Scott, Michelle LaVina, Michelle Frazier, Mitch Elliott, Wendy Sullivan, Bill Conway, Rachel Thomas, Paul Keltner, Sid Humphries, Sarah Anderson, and Alesha Cain (new Community Paramedic for Clackamas Fire District #1—welcome!)

Call to Order: 0906

Review and Approval, Correction and Approval of April Minutes – April Minutes were approved.

Review and Approval, Correction, Edits and Approval of Agenda – no dissent.

State Updates—Stella: discussion of HB 4081, the EMS Modernization Act, which “establishes the Emergency Medical Services Program and Emergency Medical Services Advisory Board with the Oregon Health Authority” (from the internet). Not originating in the OHA—sponsored by Rep. Grayber, a TVFR firefighter/ paramedic, and Senator Elizabeth Steiner, MD, among others. An unfunded mandate—no fiscal impact this session—it will sunset current Advisory Committees (ex., Sid’s Senior EMS Advisory Committee) by 2027. **MIH members will have access to apply to sit on advisory committees, for example, the new Behavioral Health Advisory Committee, which will specifically be asking for MIH input.** The goal is that committees will not be “silo’d.” Adam Wagner, from OIT/ OHSU (“passionate about MIH/ CP”) will be new EMS committee manager. The trauma system will be replicated for other emergencies, ex., CVA, to be termed time-sensitive emergencies or TSE, and hospitals can voluntarily categorize as EMS Centers (EMS CTR) if they meet national standards to receive TSE cases. Another goal: integrated EMS data systems. **Also, the “ask” to this Coalition is for nominations for EMSAB positions to be filled, to include members from private, public, EMS provider labor union leaders, etc., including a member of the public who has been a frequent user of EMS services.** (Jennifer recommended outreach verbiage: “a friendly face that is able to strongly advocate for self and own needs” as opposed to “high utilizer of EMS.”) Mitch: which committee will handle rural EMS licensing and education? Stella: EMS Advisory Committee. (See below for Sarah Anderson’s report on OR Office of Rural Health project.)

Here are the links for easier content access:

Website:

<https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EMSTRAUMASYSTEMS/Pages/Stroke-Care.aspx>

Presentation:

<https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EMSTRAUMASYSTEMS/Documents/Bo>



OREGON MIH COALITION BOARD MEETING AGENDA

[ard%20and%20Committee/EMS%20Mod%20Page/Oregon-Health-Authority-EMS-Modernization-Implementation-Plan-2024-Q3.pdf](#)

Committee overview:

<https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EMSTRAUMASYSTEMS/Documents/Board%20and%20Committee/EMS%20Mod%20Page/Oregon-Health-Authority-Board-Committees-Overview-2024%20Q3.pdf>

Link to the description of EMSAB positions to be filled:

<https://www.oregon.gov/oha/PH/PROVIDERPARTNERRESOURCES/EMSTRAUMASYSTEMS/Documents/OHA-EMSTS-EMSAB-position-description.pdf>

Reports of Committees:

- I. **PR- Website/LinkedIn/Other- -Madison:** website still in process, as is a business page (already have registered a domain name, need funds, need a subscription fee) where updates such as minutes, etc., can be posted. (**Have something to share? Send it to Madison.**) LinkedIn page: <https://www.linkedin.com/company/oregon-mih-coalition/>
Madison's email address: madison@oregonclho.org
- II. **Upcoming conference schedule**
 - a. NAMIHP, Las Vegas: EMS World Preconference Workshops dedicated to MIH/ CP programs, September 9-10; Scott to present MIH/CP trends; Sabrina to present collaboration and partnerships in MIH
 - b. EMS World, Las Vegas: September 9-13; Scott is also presenting at this conference
 - c. State EMS Conference—**need presenters of MIH topics!** Wilsonville, Saturday, October 5, 0900 hours, primarily rural? (Postscript: Joan, Jess and Nina to present.)
 - d. **Madison will be presenting at the Oregon Rural Health Conference (45 minute presentation) and is soliciting the membership for topics/ ideas.**
- III. **Education/CE**
 - a. Dues will help provide a documents warehouse, continuing education, etc. More to follow.
 - b. State of Jefferson Conference will be March 6-8, 2025. IBSC MIH/ CP testing the goal—the IBSC proctor to administer the certification exam; possibility of a discount. Madison: rural funds/ scholarships, tuition fees, “a lot of resources” available through her agency.
 - c. Josh: TVF&R to be hosting a bootcamp with Dr. Reinhartz for 13 people; he will update all.
- IV. **Protocol Development--deferred**

Old Business.

- I. **501 c 3 update:** Madison's organization funded the needed fees! Thank you, Madison! The application is in process/ waiting for approval.



OREGON MIH COALITION BOARD MEETING AGENDA

- II. **Bank Updates:** The OnPoint account will be funded by Board dues and opened once Josh converts dues to a check for deposit. Sabrina and Nina will reach out to the Member Service Rep to make things official.
- III. **Data Review—deferred.**

New Business.

- V. **Coalition Membership review—deferred until after the Board can discuss these topics**
 - a. Discussion of membership dues: financial and frequency
 - i. Individual v. Organization fees
 - ii. Expanding membership levels: Founder (entry-level)? Others?
 - b. Discussion of services provided by the association
 - i. Voting rights
 - ii. Continuing education
 - iii. Documentation library
- VI. **Funding Opportunities-Madison:** “a lot of resources are available” in rural funds for scholarships/ tuition for education or conferences. Contact her (see above) for details.
- VII. **Update on house bill/legislation:** Sabrina for Scott—a federal bill discussing grants for Community Paramedicine is in the works. **LOCALLY: Oregon Congressional members have reached out to Scott; they want to do site visits to see how our MIH/ CP programs operate.** Contact Sabrina for more information. ILOS (In Lieu of Services) is moving forward. See explanation below.
- VIII. **Open Discussion:** Mitch: update for Wheeler: 3 providers; “lack of volunteers” means “our coverage is really concerning.” He meets regularly with the Governor’s office to discuss this issue and is “throwing out a request for input/ ideas (melliott@co.wheeler.or.us).” Nearest college for training is “several hundred miles away; in-house training was an option once, should be again.” Sarah Anderson, OR Office of Rural Health: a 5-year grant under the Medicare Rural Hospital Flexibility Program starts 9/1/2024 to support training/ recruitment for EMTs, including peer support and leadership training; she “would love to work with Mitch,” including chats with the Governor’s office. Contact info: ansarah@ohsu.edu. Sid: Senior EMS Advisory Council (SEMSAC), seeking applicants for Position #10 (a family member of a licensed care facility resident); also application for EMS in a licensed care setting. Quality Care Fund Rules Advisory Committee needs membership. SEMSAC meetings open to the public. Contact Sid (SIDEY.L.HUMPHRIES@odhs.oregon.gov) for more details.

Adjourned at 1020 hours

Next meeting: November 12, 2024--virtual

New Member link to sign up:

New Member form:

<https://forms.office.com/r/ExGJBK0NxY>



OREGON MIH COALITION BOARD MEETING AGENDA

Explanation of ILOS from the Oregon Health Authority Website:

In lieu of services (ILOS) are services determined to be medically appropriate and cost effective substitutes for covered services or settings under the State Medicaid Plan. ILOS must meet requirements outlined in 42 CFR 438.3(e)(2).

Oregon can propose specific ILOS to Centers for Medicare and Medicaid Services (CMS) for approval on an annual basis. Approved ILOS are included in coordinated care organizations (CCO) contracts and become available for CCOs to offer to members. Coordinated care organizations (CCOs) are not required to offer ILOS to members. A member cannot be required to use the alternative service or setting.

Supporting health system transformation

ILOS can be used to offer services in community-centered ways or in non-clinical settings, supporting key services like certified Traditional Health Worker services and strengthening access to care.

ILOS also connects to the larger vision for CCO 2.0 as key transformation objectives by:

- *Improving access to services in a more culturally responsive manner;*
- *Enhancing care coordination for high-need/ traditionally underserved members; and*
- *Reducing hospital care, nursing facility care, and emergency department utilization.*

Questions? Please contact

ILOS.info@odhsoha.oregon.gov

New term to know: **GWTG** (Get with the Guidelines), referring to CVA/ stroke care. See Stella's presentation.