

Columbia Pacific Coordinated Care Organization (CPCCO)
Board of Directors Meeting
September 15, 2025 Meeting Minutes



The meeting was held in-person in St. Helens and also via Teams. Eleven of the thirteen Board members attended: Jon Betlinski, Shawn Bower, Pam Cooper, Sherrie Ford, Eric Hunter, Steven Manesis, Viviana Matthews, Monica Martinez, Erin Skaar, Eric Swanson and Nicole Williams.

Chair Erin Skaar called the meeting to order at 9:33 a.m. and declared a quorum for the record. By a vote of the Directors present, the Board approved the July 21, 2025 Board of Directors meeting minutes as written. Erin congratulated Mae Pfeil as CPCCO's new Executive Director; this will be the last Board meeting that Mimi Haley will staff, with Mae taking over in October.

Discussion and Engagement Items

1. Financial Challenges: CPCCO and CareOregon. Teresa Learn, CareOregon CFO, presented a status update on financial news since the July BOD meeting. She noted that revised 2026 CCO rates prepared by OHA and provided to CCOs on 9/4 increased CPCCO's rate from a 2.1% increase as of 8/1 to a 5.6% increase with the current rates. While this is a 3.5% increase, CPCCO still has the second lowest rate increase of any CCO in the state. The statewide average was 10.2%. Along with these revised rates, OHA agreed to some risk mitigation strategies, including carving-out risk for high-cost drugs and implementation of an optional Behavioral Health risk corridor. The pay-for for the additional capitation revenue is from decreases to the Quality Pool funds for both 2025 and 2026. Teresa also presented a revised operating margin for CPCCO of -6.2%; this forecast includes a decrease in Quality Pool spending, additional cost savings and no savings from the new OHA risk mitigation strategies.
2. CareOregon Board Update and CPCCO Options for 2026. Eric provided an update from the 9/12 CareOregon Board meeting, noting that the discussion changed significantly from prior meetings based on the proposed rate increases. The CareOregon Board continues to prioritize the Medicaid lines of business, including CPCCO, despite current forecasted losses. He noted that the options for CPCCO for 2026 do not include a new risk partner but do include an option to retain CPCCO as currently, with a financial turnaround plan and a plan to help recapitalize CareOregon. While the fate of CPCCO is no longer dependent on Health Share (HSO), there are still several decisions that HSO needs to make before the end of the year, including how to assign risk for behavioral health services. The CPCCO Board clarified the options on the table and the timeline for making decisions, including a possible bridge strategy to the CCO 3.0 procurement.

Committee Reports/Packet Review

3. Finance Committee. Steve Geidl shared the July 2025 YTD financial report. Highlights included: higher than budgeted medical and behavioral health expenses; total Quality Pool revenue of \$5.6 M; ongoing higher than budgeted investment income; net surplus of \$602k for CPCCO; and a YTD consolidated MBR of 101.2%.
4. Governance and Compliance Committee.
 - a. Mae Pfeil shared a proposal to change the distribution methodology for Quality Pool payments starting this year and extending to the future. The proposal would suspend the one-time annual performance reward checks and add those dollars to the balance used for value-based payments to primary care, behavioral health and dental care partners. The Board noted the need for clear communications to affected partners.

- b. Nancy Knopf opened a discussion of the 2025 CPCCO Large Grant Review Committee recommendations for four grants totaling just under \$200,000. She noted some process improvements for this funding year to include more transparency and shorter duration of grant projects, generally not to exceed one year.

5. Action Items

By a vote of all Directors present, the Board approved the motion to not exercise the option to non-renew CPCCO's 2026 OHA contract.

By a vote of all Directors present, the Board accepted the July 2025 financial report as recommended by the Finance Committee.

By a vote of all Directors present, the Board approved the proposed changes to the Quality Pool distribution methodology as recommended by the Governance and Compliance Committee.

By a vote of all Directors present, the Board approved the Large Grant Committee recommendations for four new grants as recommended by the Governance and Compliance Committee.

6. General Updates/Round Robin

Columbia: Sherrie updated the Board on the back-to-school services at the CHS SBHCs, noting that there is a lot of feelings of heaviness, especially at the high school level.

Clatsop: Nicole noted that CMH closed its main hospital entrance to start construction which is creating patient flow issues. CMH will also have new providers for OB\GYN services as well as adding a hand surgeon starting this month. Pam reminded the Board that PSH will be closing their Labor/Delivery service effective October 1, thanking CMH for their partnership. They have also added a new mental health NP, a new psychiatrist, urologist and APCs. Viviana noted September is Hunger Awareness month: CCA is hosting open houses at their food bank.

Tillamook: Erin noted the opening of the new dialysis center, the continued construction of AH's new surgical site, the grand opening of Nehalem Bay Health Center in October, the 'first swim' at the renovated North Coast Recreation District, and CARE's new shelter opening in November.

Regional: Shawn noted that Iron Tribe Network has stabilized the funding for their Columbia County houses and that there is a new Oxford House for men in Tillamook. Eric noted the retainer of a consultant to help with financial stabilization for CareOregon. Jon noted that both the Oregon Psychiatric Line and the ECHO networks survived funding cuts and are both operating at normal levels.

There being no further business to discuss, Erin adjourned the meeting at 11:14 a.m.