

Oregon Primary Care Association's 2022-2023

Annual Report



PATHWAYS TO

HEALTH EQUITY

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Welcome

to the Oregon Primary Care Association's Annual Report. This is a place for us to celebrate the innovations happening at federally qualified health centers (FQHCs), explain health care issues, and demonstrate through data the impact of our work.

At OPCA, we seek to advance health equity through policy reform, operational training and support for our members, and by leading peer-based work groups. OPCA collaborates with FQHC staff, elected leaders, and healthcare experts across the country to bring the best information, the best practices, and the best tools to community health centers. Just as health centers improve the lives of patients through a holistic lens, OPCA supports health centers across a variety of focus areas to build sustainable and equitable practices across the state of Oregon.

In this report, you'll also discover what more than 430,000 Oregonians already know: community health centers provide quality care to people who would otherwise struggle or be unable to afford primary care. FQHCs provide patients with regular, preventative care along with holistic services including dental care and behavioral health, along with connections to resources like housing connections, healthy food sources, and even legal assistance. FQHCs were integral to communities' survival throughout the pandemic, and our elected officials took notice. During the first three months of 2023, Governor Kotek visited three of our members on her listening tour.

As you traverse the community health care landscape, let OPCA be your guide. And if you'd like to stay current on community health center news in Oregon and beyond, we encourage you to sign up for our email newsletter and join us at our events this year.

Sincerely,

Joan Watson-Patko
Executive Director

5 YEAR STRATEGIC PLAN DOMAINS

DATA

- Demonstrate value of CHCS
- Data-informed decisions and allocations
- Reach underserved populations

EQUITY

- Reduce health inequities
- Address social determinants of health
- Aim to repair the harms of racial and structural oppression

POLICY

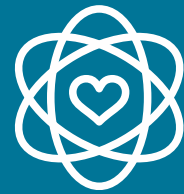
- At the right table at the right time
- Advocate for the critical role of CHCs
- Being at the forefront of policy making



Mission: Transform primary health care.



Vision: Health equity for all Oregonians



Values: Justice, Integrity, Collaboration, Innovation



MEMBERSHIP

- Strengthen and advance our network
- Align strategy and value
- Amplify collective impact

TRANSFORMATION

- Improve patient experience
- Innovative care models
- Enable comprehensive health services

EMERGENCY PREPAREDNESS

- Plan and tools in place
- Support resilience
- Drive business continuity & sustainability



OPCA

The Oregon Primary Care Association (OPCA) is a nonprofit membership organization for the state's federally qualified health centers and look-alikes. We strive to generate data-based insights into operational challenges, shape evolving health policy, and provide training and technical assistance to community health centers to achieve health equity for low-income and vulnerable Oregonians.



OPCA FOSTERS COLLABORATION.

OPCA's members each have unique patient populations, but they face similar challenges. OPCA facilitates health center peer groups, where community health center leaders share their best practices for common challenges such as workforce development, budget management, and addressing patients' barriers to care.



OPCA TRANSFORMS DATA INTO BEST PRACTICES.

OPCA leads the Quality Improvement (QI) Collective, where member health centers share and compare data to achieve membership-wide improvements. Through data analysis, OPCA generates best practice procedures to reduce both common operational challenges and patients' recurring barriers to care. OPCA transforms individual community health centers' data into a collective, clear picture of the healthcare landscape.



OREGON'S HEALTHCARE INNOVATION HUB.



OPCA BUILDS INTEGRAL HEALTH POLICY.

OPCA works with legislators and government agencies to shape sensible policies to support and strengthen the healthcare safety net. OPCA utilizes data and stories collected from member organizations, peer associations, and federal agencies to identify the scope of current health challenges and craft solutions.



OPCA FORGES PATHS TO EQUITABLE CARE IN OREGON.

OPCA recognizes challenges such as poverty and homelessness, cultural and language barriers, rural or social isolation, and chronic mental illness have a significant impact on our patients' health. These social drivers or determinants of health (SDH) can be addressed through innovative new approaches to patient intake, patient payment systems, and community health initiatives.



OPCA'S AREAS OF WORK

Through our programs and services, OPCA connects health centers, shares and leverages resources, increases organizational capacity, and raises a unified voice on behalf of all of Oregon's FQHCs.

OPCA GOVERNANCE & STRATEGY

- OPCA Board of Directors & Board Committees
- Annual Membership Meeting
- Strategic Planning



FINANCE & OPERATIONS

- Fiscal & Operational HRSA Compliance
- Payment rules & regulations
- Value Based Payment
- Alternative Payment Methods
- Emergency Preparedness
- Workforce
- Comprehensive Services Integration



POLICY & ADVOCACY

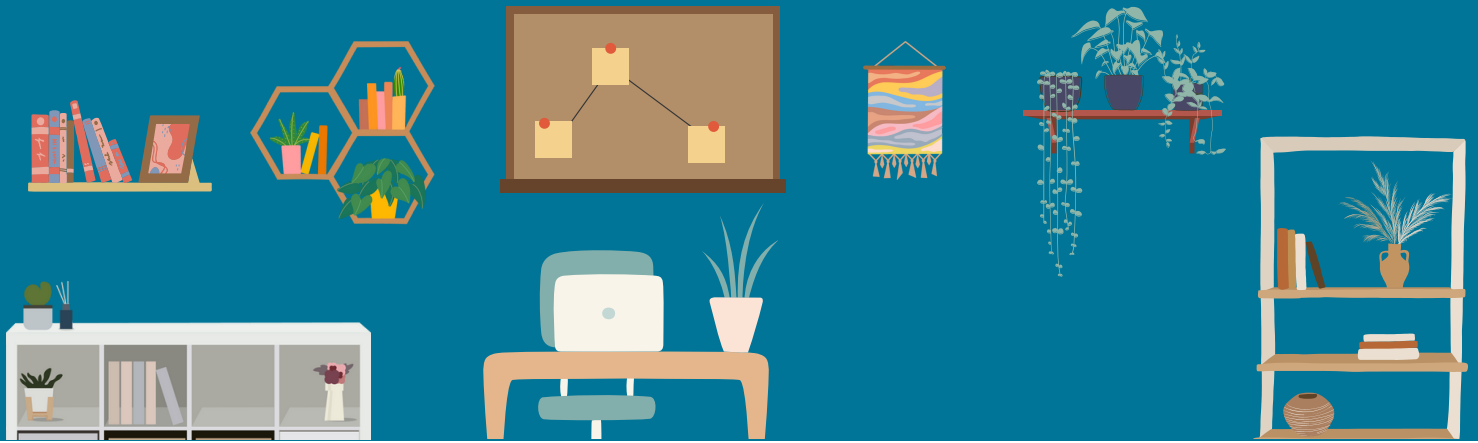
- Communications & Digital Advocacy
- Governmental Affairs
- Coalition Building
- Regulatory Oversight
- Payment Innovation
- National Health Center Week
- Health Center connections with lawmakers



HEALTH EQUITY

- Social Determinants of Health (SDH) Screening & Coding
- Alignment with CCO health equity efforts
- OPCA Health Equity Committee





PEER AND BEST PRACTICES GROUPS

- CEO/EDs
- CFOs
- Clinician Leaders
- Dental Leaders
- Operations Leaders
- HR Leaders
- Pharmacy Leaders
- Behavioral Health Leaders
- Communications
- Community Health Worker Integration (paused in 2022)



HEALTHCARE TRANSFORMATION

- Value Based Care Population Health
- New Modes of Access
- Team Based Care
- Community Health Worker
- Behavioral Health Integration
- Community Partnership
- Trauma-Informed Care



DATA SHARING

- COVID-19 Data
- Race and Ethnicity Data
- APCM & QI Collective Quality Metrics

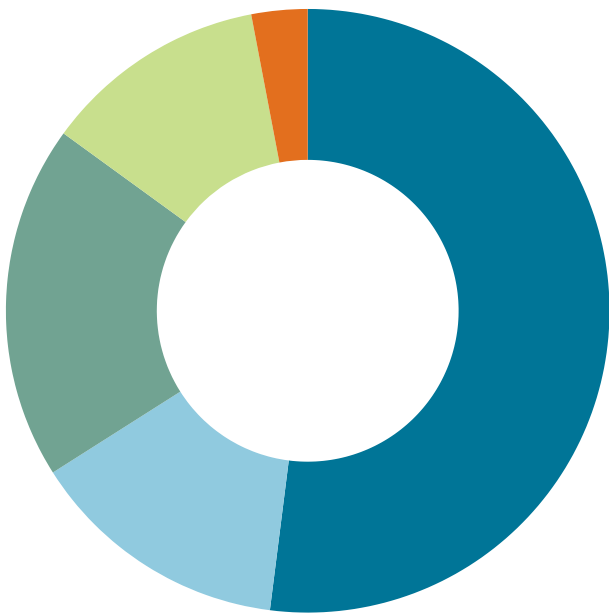


QUALITY IMPROVEMENT COLLECTIVE

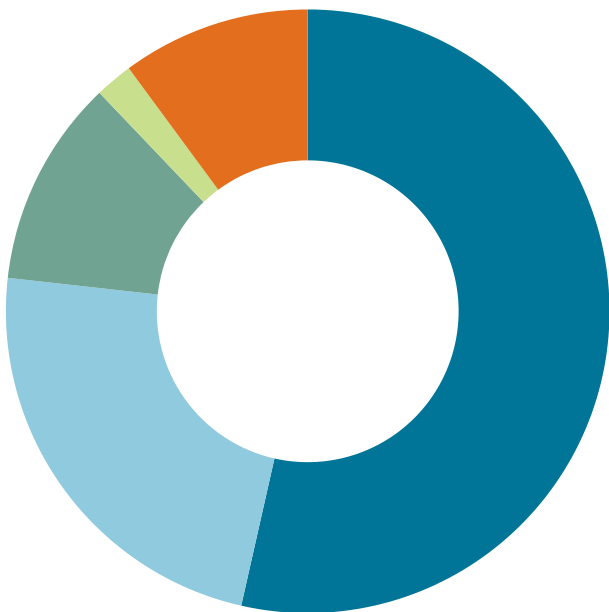
- Depression and Diabetes Screening
- Reducing Health Inequities
- Patient Experience
- Peer to Peer Best Practices
- Social Determinants of Health



OPCA 2022-2023 FISCAL YEAR BUDGET



	Revenues	Amount	%
●	BPHC grant	\$2,089,852	52%
●	Other grants and contributions	\$575,771	14%
●	Membership Dues	\$780,399	19%
●	Clinically Integrated Network (CIN) Participation Fees	\$482,151	12%
●	TA, training & other services	\$107,938	3%
	Total Revenue	\$4,036,111	100%



	Expenses	Amount	%
●	Bureau of Primary Health Care	\$2,089,852	53%
●	Support Services	\$919,389	23%
●	Clinically Integrated Network (CIN)	\$442,419	11%
●	Special Projects	\$77,319	2%
●	Administrative	\$402,409	10%
	Total Expenses	\$3,931,388	100%

*Based on unaudited financials

MEMBERSHIP BENEFITS

OPCA PROVIDES:

- ▶ Trainings, conferences, workshops, and technical assistance for community health centers.
- ▶ Representation with elected officials on behalf of CHCs, other safety net clinics and the populations they serve.
- ▶ Timely information on policy and legislation related to health care for low-income and uninsured Oregonians.
- ▶ Access to OPCA staff expertise, FQHC program compliance resources, opportunities for learning collaboratives and ongoing operational support.
- ▶ Peer group learning opportunities for community health center executive leadership teams.

In fiscal year 2022-2023, OPCA



COVID-19 ORAL ANTIVIRAL PILOT

OPCA plays a key role in organizing the statewide efforts to stop COVID-19.

The COVID-19 Oral Antiviral Treatment Pilot Project combined efforts of the Oregon Health Authority (OHA), OPCA, and seven Federally Qualified Health Centers (FQHCs) to aid underserved and vulnerable populations in fighting the deadly disease.

The project aimed to efficiently distribute critical treatment for COVID-19 cases, using the oral antiviral medication Paxlovid.

OHA provided funding, developed regulations, and brought in temporary health care workers. FQHCs worked diligently to provide COVID-19 cases with Paxlovid. OPCA facilitated FQHC efforts, tracked the successes as well as the growing pains of the pilot project to streamline strategies.

With funding, staffing, treatments, project management, and the hard work of dedicated professionals at every level of the process, the project ultimately expanded the reach of the health center model of care in some of the highest need communities and populations in the state.

The Project is ongoing through May 2023, but OPCA's initial report aggregates insights to further refine efforts to stop the spread of COVID-19.



To access the full version of OPCA's report, follow the QR code!

“
Paxlovid had an 89% reduction in the risk of hospitalization and death in unvaccinated people in the clinical trial.

- Yale Medicine
”

Participants



\$4.8 MILLION AWARDED TO SUPPORT COVID-19 VACCINATIONS

In December 2022, the U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), announced a new \$350 million initiative for HRSA-supported health centers to increase COVID-19 vaccines in their communities, with a specific focus on underserved populations.

Oregon received \$4,940,192 from HRSA and HHS to support 32 health centers in the state. Thirty HRSA-Funded Health Centers received a total award of \$4,818,135, while two Health Center Program Look-Alikes received a total award of \$122,057.

For example, Virginia Garcia Memorial Health Center has provided more than 90,000 doses of COVID vaccine in 2022 at its 18 locations across Washington and Yamhill counties. Community health centers like Virginia Garcia build connections with patients over time through regular wellness checkups, educational outreach, and preventative care for health issues like heart disease or diabetes.

“We witness a lot of vaccine hesitancy in the population we serve,” said Roxanna Pascual, Virginia Garcia Regional Operations manager. “We provide a space where people feel safe getting tests, vaccines, and therapeutics for their illness.”

The funding enables Oregon’s health centers to expand mobile, drive-up, walk-up, or community-based vaccination events, including events with community and faith-based organizations. Health centers can also use funds to provide transportation, translation, education, and interpretation services related to COVID-19 vaccinations.

“Health centers are community-led organizations, adaptable and responsive to the unique needs in their areas. They are essential in vaccinating hard-to-reach patients across the state. HRSA’s latest initiative will bolster the tailored approaches community health centers take to help combat the threat of COVID-19.

- OPCA Executive Director Joan Watson-Patko

THE ADVANCED PAYMENT CARE MODEL 101

APCM allows care teams to focus on patients instead of visits.

Thirteen years ago, OPCA developed the Alternative Payment and Advanced Care Model (APCM) program in collaboration with the Oregon Health Authority (OHA) and Oregon's federally qualified community health centers (FQHCs) to improve payment mechanisms for health centers and ultimately promote health equity by providing better care to patients at lower costs.



The Problem

Standard “fee-for-service” payment models means a provider receives payment for each test, appointment, or other health service. This model rewards a provider based on the quantity of services provided, not the quality. Under this model, patients tend to seek care only when they experience serious illness or injury.



The Solution

Under APCM, health centers receive a “capitated” payment - a set amount per patient per month. With revenue no longer tied to the quantity of medical services, community health centers can focus on developing a more effective care plan for their entire patient population. Regular monthly payments also enable health centers to invest in their team, facility, and IT infrastructure to improve population health over time.

With an APCM approach, an interdisciplinary team of professionals works together within the primary care setting to address patients’ medical, dental, behavioral, and social needs. The primary care team is also connected through community partnerships to other organizations that are working to improve health.

By focusing on the quality of health outcomes over the quantity of billable services, APCM builds resiliency for both the patient’s health and provider’s infrastructure and ultimately results in an overall cost savings for taxpayers. State analysis of APCM showed \$17 million in Medicaid costs saved over the first three years.

OPCA regularly offers training to community health centers who wish to adapt the APCM approach in their practice. To date, OPCA has successfully trained 21 FQHCs on the program. OPCA’s APCM onboarding includes webinars, in-person trainings, organized site visits to existing APCM clinics, and individualized assistance on rate development.



"OPCA staff are a conduit to policy, operations, training, and more for interested clinics as well as clinics that participate in the program." - OHA's Medicaid Unit

How OPCA supports the APCM program:

- Serves as main point of contact for both OHA and health centers
- Liaises with OHA's Medicaid staff members about program issues and technical assistance (TA) needs
- Provides TA to health centers
- Facilitates the Steering Committee and other collaborative meetings, including trainings, on-demand program modules and bi-annual APCM Forums
- Leads onboarding processes for health centers
- Creates and disseminates APCM communications
- Assesses the potential impact of new state or federal policies on APCM
- Advocates for accountability measures
- Facilitates monthly accountability reporting
- Fields interest from external partners about APCM

APCM Care Steps Information

New Visit Types

- Online Portal Engagement
- Health & Wellness Call
- Home Visits (Billable & Non-Billable)
- Advanced Technology Interactions

Wellness & Health Promotion

- Care Gap Outreach
- Group Education
- Group Exercise
- Support Groups
- Health Education Supportive Counseling

Coordination & Integration

- Clinical Follow Up & Transitions
- Dental Coordinating Care
- Behavioral Health & Functional Ability Screenings
- Warm Hand-Off

Reducing Barriers to Health

- Social Determinants of Health Screening
- Case Management
- Accessing Community Resources/Services
- Transportation Assistance



APCM ONBOARDING TIMELINE

YEAR	CLINICS ONBOARDED
PHASE 1 2013	<ul style="list-style-type: none"> • Mosaic Medical • OHSU-Richmond • Virginia Garcia
PHASE 2 2014	<ul style="list-style-type: none"> • Benton County • Multnomah County • OHSU-Scappoose • Yakima Valley
PHASE 3 2015	<ul style="list-style-type: none"> • Clackamas County • Rinehart Clinic • Rogue Community Health
PHASE 4 2016	<ul style="list-style-type: none"> • Neighborhood Health • Northwest Human Services • Winding Waters
PHASE 5 2017	<ul style="list-style-type: none"> • La Clinica • Wallace Medical Concern
PHASE 6 2018	<ul style="list-style-type: none"> • Lane County • Valley Family • Orchid Health
PHASE 7 2019	<ul style="list-style-type: none"> • ADAPT South River • Waterfall Clinic
PHASE 8 2020	<ul style="list-style-type: none"> • Aviva • One Community Health
PHASE 9 2023	<ul style="list-style-type: none"> • La Pine



"We envision APCM will enhance our team-based model and patient engagement by increasing our resources that are currently unfunded but vital to patient care. We anticipate this model will enhance how we partner with patients to improve their health."



OPCA MEMBERS' IMPACT

436,769

PATIENTS SERVED

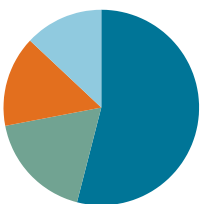


13,715

JOB'S CREATED

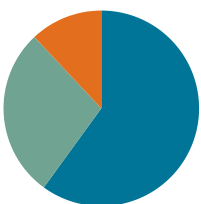


Patients' Insurance



54% Medicaid
18% Uninsured
15% Privately Insured
13% Medicare

Patients' Income



60% At or Below 100% FPL
26% At 100-200% FPL
12% At >200% FPL

Sources: U.S. Health Resources and Services Administration Health Center Program Uniform Data System (UDS) 2021. Jobs data per Capital Link, based on 2020 UDS and economic impact analysis.



Oregon's 34 Community Health Centers employ over 9,000 providers and staff in rural and other underserved communities.



Community Health Centers serve one in four patients on the Oregon Health Plan.



> 75% of Community Health Centers have clinic sites serving rural communities.



Community Health Centers have clinic locations in 85% of Oregon counties.



73% of Community Health Center patients live at or below the poverty line, and 94% live at or below 200% of the Federal Poverty Level.



30% of Oregon's Community Health Centers are federally recognized as Health Care for the Homeless locations and 33% are designated as Migrant Health Centers.

GOVERNOR KOTEK VISITS OREGON COMMUNITY HEALTH CENTERS



Oregon Governor Tina Kotek plans to visit every county in the state by the end of the year. During these visits, she hopes conversations with local community leaders will build consensus on how to tackle systemic issues like housing, mental health and addiction care, and education.

She started her tour in December 2022, and her first stop was Yamhill County. During the visit, Governor Kotek spoke with community leaders at Virginia Garcia Memorial Health Center.

“We had a roundtable discussion that included some of our providers and clinic leaders,” said Kasi Woidyla, Virginia Garcia Marketing Communications Director. “We are excited to see the governor’s office prioritizing the health and wellness of those living in our state.”

Then, in February, Governor Kotek visited Aviva Health in Roseburg. “At Aviva Health, we heard from behavioral health service providers about their challenges and successes and took a tour of the Feeding Umpqua food bank. So impressed by the collaboration, innovation, and resilience in Douglas County!” Governor Kotek tweeted.

OPCA and member community health centers are grateful for the opportunity to weigh in on the challenges facing families across Oregon, and we look forward to additional ways to demonstrate the value of our health centers.



Virginia Garcia Memorial
HEALTH CENTER



AVIVA HEALTH



Yakima Valley
Farm Workers Clinic

WALLACE OFFERS ONE-STOP DENTAL & MEDICAL CHECK UPS FOR KIDS

OPCA members like Wallace offer high-quality, low-cost care that is responsive to the needs of their community. At Wallace, staff across departments came together to create a new program to make kids healthier and to help adults feel a little less stressed.

In spring 2022, Wallace launched Kids' Days. These events bring Wallace's medical and dental teams together on Saturdays to provide exams and treatment for their youngest patients.

Parents can bring their kids in for back-to-back medical and dental appointments, making Wallace their one-stop-shop for health basics. And by offering the event on a Saturday, Wallace ensured most parents would have the day off from work to manage the appointments.

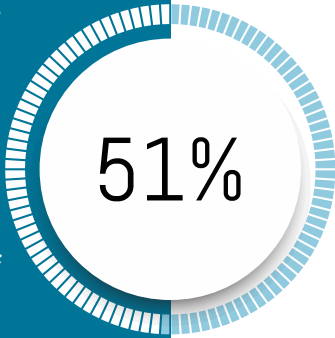
Wallace's Chief Medical Officer, Stuart Currie MD explained, "Dental pain is one of the biggest reasons children stay home from school, accounting for millions of lost school hours. Many families delayed doctors' visits during the pandemic, and their medical needs have accumulated. But simply making it to our clinics for multiple weekday appointments can be a significant hurdle."

For many families, it's a challenge to make, manage, and keep health appointments for everyone. "We've realized the best way we can help our patients is to provide as much care as possible in one appointment," Dr. Currie said.

For families with multiple kids, the event's benefits multiplied. One mother brought her three children, and Wallace provided three sets of medical and dental appointments. "It was a little frantic at times, but we all did our best to juggle everything and treat her family," Wallace's Dental Director, Kyle Geelan DDS, said. "Now imagine, what would it look like if she was asked to take time off and arrange transportation for six separate midweek appointments? It would've been nearly impossible."

Wallace has been keeping families in good health for nearly 40 years and their Kids' Days are their latest tool to make care more accessible than ever.

At health centers, at least 51% of their board members must be patients served by the health center, and non-patient board members must be representative of the community.



51%

wallace
together in health

ONE COMMUNITY HEALTH CELEBRATES LAUNCH OF NEW MOBILE CLINIC

In March of 2022, One Community Health (OCH) launched a new mobile clinic in the Columbia Gorge, expanding services to patients with transportation challenges. The newly renovated clinic, named “La Clínica”, brings affordable and inclusive health care into underserved Columbia Gorge communities, kicking off with a series of launch parties in March and April.

“We have many community members who have a hard time accessing health care due to barriers like lack of transportation, childcare, and working several jobs,” says Max Janasik, Chief Executive Officer for OCH. “The mobile clinic allows us to bring quality and affordable health care to the places that need it most. It’s an important step in increasing health equity in the region.”

The name “La Clínica” was chosen for the mobile clinic as a reference to OCH’s roots as La Clínica del Cariño. “We know that this name still means a lot to many of our patients and community members. We started as a small, grassroots organization providing health care to farmworkers in the Gorge. Now we’re excited that La Clínica is allowing us to bring our range of services to the communities where our patients live,” says Gladys Rivera, Director of Preventative Health for OCH.

La Clínica offers a range of services including:

- Urgent care and small procedures
- Preventative health care and primary care
- Pediatric care
- Basic vision exams
- Immunizations
- Referrals to specialists
- COVID, diabetes, and other basic testing
- Access to substance use support and medications
- Wound care
- Behavioral health care
- Diabetes and chronic disease management
- Insurance enrollment and financial aid applications
- Resource navigation





La Clínica is staffed by a bilingual team that includes Family Nurse Practitioner Middy Tilghman, Certified Medical Assistant Alejandra García, and Certified Community Health Worker Gerardo Vasquez.

La Clínica will travel to communities throughout the Gorge that have disproportionate rates of social and environmental factors that affect health outcomes. The clinic will work to improve access to health care in the areas of Parkdale, Odell, Cascade Locks, Celilo Village, Lone Pine, and The Dalles. OCH is working with Washington State to be able to provide services in Klickitat and Skamania counties in the near future as part of an overall campaign to recognize the impact of these social determinants of health.

One Community Health



NWHS LAUNCHES MEDICAL-LEGAL PARTNERSHIP

In June 2022, Northwest Human Services (NWHS) established a Medical-Legal Partnership (MLP) Program in partnership with the Oregon Health Justice Center (OHJC) to address the legal issues that patients face.

“Our programs are safe and inclusive and focus on addressing the Social Determinants of Health. Our goal is to remove barriers that prevent individuals and families from receiving care in our community.”

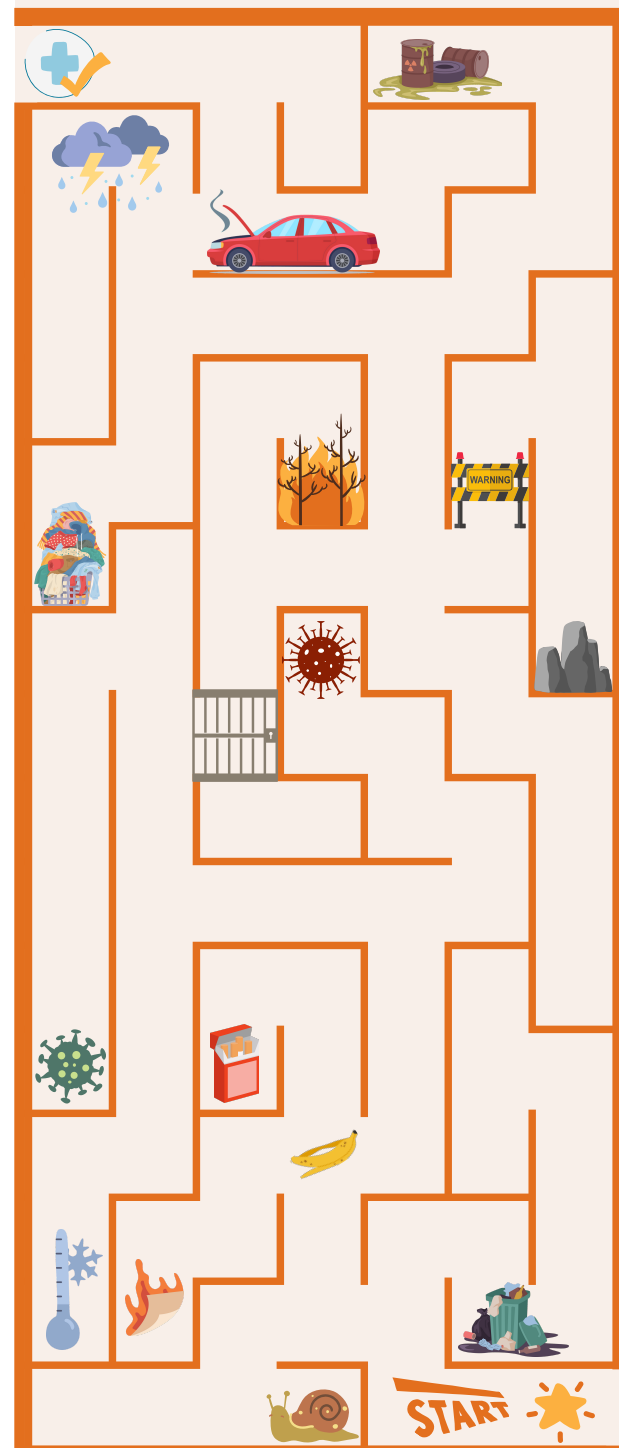
--Northwest Human Services

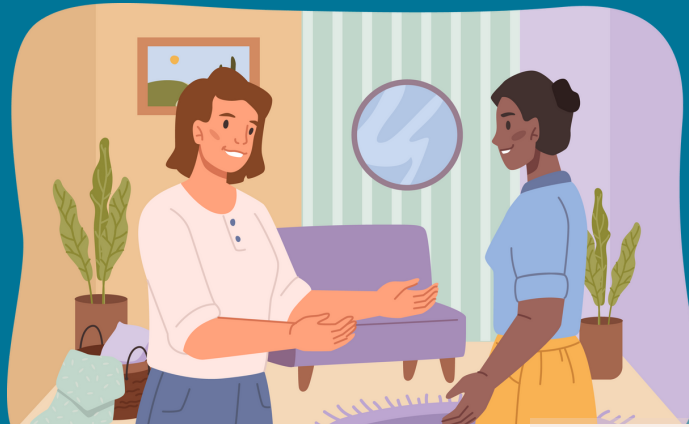
NWHS staff work diligently with patients to get a clear understanding of each individual’s barriers to health. Sometimes, stressors in a patient’s life have the potential to become life-threatening if not addressed through social support. For example, one NWHS patient faced significant life upheaval related to severe mental health symptoms. These symptoms caused the patient to neglect important pending legal concerns.

The patient was highly motivated to begin treatment, and with NWHS’s help, their symptoms started to improve. With better health, the patient had capacity to recognize that their pending legal concerns could lead to jail time. The patient had experienced jail once before and felt certain they would rather die than return.

The patient’s dire mindset raised immediate red flags with their care team at NWHS. Staff recognized the patient needed help navigating the legal system.

Navigating a health crisis alone can feel like....





In November 2021, Lisa DeCelless, PMHNP, made an internal referral to NWHHS's Care Coordination team to address a client's legal issues and concerns. After a thorough review of the referral, the Care Coordinator assigned the case to a Community Health Worker for MLP intake. The Community Health Worker conducted an in-person meeting with the patient a week later and scheduled an MLP appointment for the next day.

The MLP staff met with the patient twice to provide support and assistance with the legal issues at hand. The MLP staff, the referring provider, and the Care Coordination team all worked together to build a pathway to justice. Specifically, they helped the patient secure an extension on their community service requirement, which ultimately helped the patient avoid a one-year jail sentence.

Despite health setbacks, the patient remains fully engaged in their treatment and maintains regular contact with their care team. The patient is working diligently on fulfilling their mandatory hours and is making significant progress towards their goals. Their story is just one example of how a person's path to health can feel like a complex maze, full of twists, turns, and unexpected obstacles. Community Health Centers like NWHHS strive to be a guiding force through those difficult times.



Navigating a health crisis with Community Health Center support can feel like....



CHCNO IS NOW THE NETWORK!

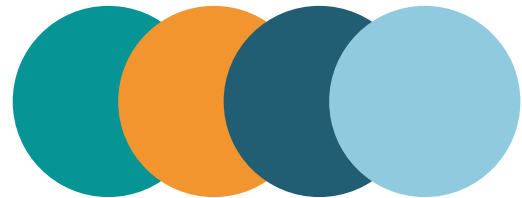
WE HAVE A NEW NAME AND A NEW LOOK TO REFLECT OUR GROWING IMPACT

You know us as the Community Health Center Network of Oregon (CHCNO), the clinically integrated network. Our organization recently took on a rebranding project to better align our name and logo with OPCA to maximize both organizations' visual impact and brand awareness.

Our new name is "The Oregon Network of Community Health Centers," aka "The Network" or "The Oregon Network" on second reference. Our new logo has a bold Oregon state image with colors and fonts designed for readability.



BRAND COLORS



MISSION STATEMENT

The Oregon Network of Community Health Center's mission is to improve the quality of contracts with healthcare payers, expand and improve clinical services, and support ongoing development of comprehensive, quality health care services, particularly for low-income, Medicaid, uninsured and under-served patients.

VISION

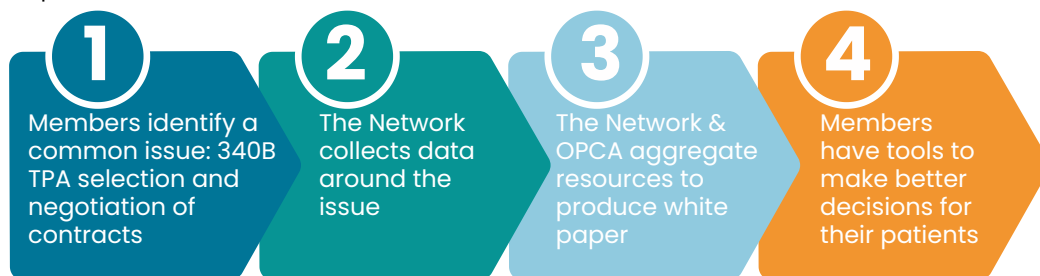
The Oregon Network of Community Health Center seeks to unleash the impact that a direct partnership of aligned health centers with CCOs can have on the health of our patients and our communities through data integration, shared strategies and value-based payment mechanism.

KEY NETWORK UPDATES

340B THIRD PARTY ADMINISTRATORS 101

The FQHC landscape is complex and heavily regulated to ensure quality care, reasonable prices, and carefully calculated reimbursement rates. The administrative burden necessary for record keeping with 340B has led many providers to seek third-party administrators (TPAs) to ensure compliance with federal regulations. Safety net providers now struggle with issues like selecting the right TPA for their patient populations; negotiating and writing contracts with TPAs; and implementing best practices for 340B administration.

The Oregon Network of Community Health Centers and OPCA set out to gather information from colleagues in community health centers (CHCs) to determine best practices and strategies when a safety net provider seeks to contract with a Third Party Administrator. CHCs in Oregon provided survey responses, anecdotes, and samples of their best practices for review.



This project is an example of how OPCA, the Network, and our members collaborate to share best practices, which advances our goal to provide high quality health care at low costs to Oregon's communities. Contact the Network to receive your copy of the paper! Email Network Director John Duke - jduke@orpca.org.

THE NETWORK'S BUDGET RECAP

The Network has just completed its second fiscal year and is moving into its third. We have made great strides in this last year, going from a \$469K budget to a \$1.2 Million budget, selecting a vendor and securing funding for our population health data platform, seven of our health centers have negotiated value-based pay contracts through the Network for 2023, and we will get our first contract revenue in June from last year's contract with the four health centers in Portland. Our Clinical Quality Committee is rolling out its first coordinated CQI initiatives around attribution and risk coding. We are well underway with the exploration and application to create an ACO to participate in the Medicare Shared Savings Program starting in January 2024. Coming out of the hardest years of the pandemic, our health centers are taking a leading role in the equitable healthcare of our communities and state.

THANK YOU, OPCA MEMBERS!





NEHALEM BAY
HEALTH CENTER & PHARMACY
COMPASSIONATE COMMUNITY CARE



Outside In 



PRISM HEALTH



Siskiyou Community Health Center



Virginia Garcia Memorial
HEALTH CENTER





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