

**CASCADES EAST RIDE CENTER**  
Advisory Committee Meeting  
Central Oregon Intergovernmental Council  
Headquarters Building, 334 NE Hawthorne Avenue, Bend, Oregon

**Minutes**  
January 25, 2017

Members Present

Chuck Daugherty, Central Oregon MediTran  
Holly Wenzel, Crook County Public Health  
Therese Helton, DHS-CAF/CW (Children and Families/Child Welfare – Central Oregon)  
Peggy Gilbert – Abilitree  
Lisa Bray, Aging and People with Disabilities  
Randy Moss – American Medical Transit  
Ben Nichols – Bend City Cab  
Lindsey Stalling – Mosaic Medical  
Elizabeth Schmidt – Central Oregon Health Council (arrived later)  
Lesley Srikantaiah, **Vice-Chair**, St. Charles Health System (arrived later)

Staff Present

Tony Morales, CERC Contracts and Services Administrator  
Tamara Powell, CERC Policy and Services Administrator

**A. Introductions and Welcome**

1. Meeting called to order @ 1:10
2. Invited others to meeting from Pfeifer and DCBH, need better contact information if anyone has

**B. Adoption of Minutes**

1. Ms. Stalling moved to approve the November 30, 2016 minutes. Ms. Wenzel seconded the motion, which passed unanimously.

**C. Brokerage Reports**

1. Mr. Morales reported the following:
  - a. Changed format of report
  - b. This December had the most calls in the last 18 months, but call hold times remain way below standard of 2 minutes. We are under one minute.
  - c. Eligible OHA clients for the month have steadily declined 14% since March. Mostly Pacific Source clients decreasing. OHA clients fluctuate between 9,000 – 10,000 each month.
  - d. Unduplicated clients serving remains around the same.
  - e. Volunteer rides decreased, but were used a lot more during weather event due to transportation providers closing and CERC's ability to coordinate their rides more

readily. Not actively recruiting volunteers as time intensive program to manage. Funding for volunteer programs and a volunteer coordinator ran out a year ago, but have maintained services through transportation funds.

#### **D. Follow-Up from Prior Meeting**

1. Mr. Morales reported the following:
  - a. Karen Friend now the Executive Director of COIC. Brokerage will be hiring a transportation manager who will manage CERC and CET.
  - b. Implementing new grant funded call out system this week. This will remind clients of their rides. Hoping this will decrease no shows.
    - i. Mr. Moss asked if it is just a call out system or a confirmation system as well. Mr. Morales clarified that there is a decision tree where clients can reach a CSR to cancel a ride.
    - ii. Text capability has not yet been implemented.

#### **E. Topic of Discussion – Snowpocalypse**

1. Thank you to the providers who were out there getting people to appointments safely and helping with digging clients out.
2. Ms. Powell noted various issues that arose during the severe weather events:
  - a. The number of complaints regarding late rides were surprisingly high during the severe weather. While transportation providers were getting clients to their appointments late, the complaints did not seem to take account of the bad roads and the fact that the riders were arriving safely. Some complaints were from clients who arrived as little as 15 minutes late to their appointment whose providers would not see them late.
  - b. There was not much give on the medical provider side for late arrivals. Providers were sticking to policies where clients would not be seen if they were 5 and 10 minute late.
  - c. Information about clinic closures was not readily available to clients or CERC. Transportation providers would get to closed clinics and then had to return clients home right away. This kept them from getting to other clients who they were scheduled to pick up and created a spiral effect from very early in the morning. If closure information had been communicated better, CERC could've shifted resources to accommodate other clients.
3. Question for the group - What can be done from the medical provider side to accommodate severe weather?
  - a. Ms. Srikantiah – Proposed having clinic managers speak with schedulers prior to a severe weather event about being flexible with late policy
  - b. Mr. Moss – Reach out to medical provider as soon as possible when you know going to be late to see what the flexibility there is for a late appointment. Medical providers may be able to flip appointments in these situations with advance notice.
  - c. Ms. Gilbert – There may be a medical consortium in the community that can use as a communication point to speak about changing winter protocols.

- d. Ms. Stalling – Mosaic bases closures on local school district closures. Notified news channels. Put on Facebook page. Staff calling clients about cancellations. Mosaic has policy that they implemented regarding cancellations, rescheduling and flexibility for late clients. Difficult when blended facilities as portions were open while other were not. There was not a lot of coordination between medical facilities/providers and it is needed. Central Oregon Health Council may be a good place to start for communicating challenges.
  - e. Ms. Srikantiah – KTVZ could be a source of information on medical clinic closures as well.
  - f. Ms. Gilbert – Can CERC have a recording about clinic closures to avoid complaints? Can CERC communicate closures to clients? Ms. Stalling thought it should be put on clinics.
  - g. Mr. Nichols – Bend City Cab was proactively calling the clinics to see if they were open
  - h. Mr. Daugherty – Need consider the other side. These rides can be dangerous. Maybe work with medical providers who have less urgent medical needs so that not have these clients out on the roads. Ms. Stalling stated that this feedback could be useful for medical providers as their philosophy is that they should be open for clients, but hearing this information may help them see the other side. Mr. Moss noted that government offices prioritize essential and nonessential services. Transportation providers should not be the decision makers on what medical appointments are essential, but medical providers and clients can weigh the benefits and dangers.
  - i. Mr. Moss noted that medical providers would indicate that they would close and leave clients outside when providers were running late.
4. Ms. Powell – From a transportation standpoint, are there other issues out there that need addressed during severe weather events?
- a. Ms. Gilbert – Bus stops not cleared. Public perception that CET should be responsible for it. Ms. Powell noted that this is CET matter and CERC is different, but aware that buses were doing their best. Possibility that community volunteer resources may exist to help people with access issues to shovel.
  - b. Ms. Wenzel – Indicated that city needs to make access to transit a priority. Mr. Morales indicated there is a prioritization list, but transit is not on there.
  - c. Mr. Moss – CERC probably needs to adjust transit times when there are weather issues. Ms. Powell indicated that CERC was trying to accommodate this in scheduling.
  - d. Ms. Srikantiah asked about the policies that exist that . . . . Ms. Powell indicated that OAR's and other policies exist and that not a lot of flexibility and not sure where forgiveness will be given. Still denying rides due to road conditions, but OARs not written in a way to take account of issues like this.
  - e. Ms. Schmidt – development of catastrophic plan is needed. Ms. Powell noted that not need to be catastrophic to impact. At least one snow event hits each year and need a plan even for these lesser events to help lessen impact on any given weather event date.

- f. Ms. Gilbert – American Medical Association that has policy discussion.
- g. Ms. Wenzel – Automated systems may be needed. Ms. Powell indicated that CERC may be able to use their call out system in these events as even though medical providers should be doing the call outs, sometimes CERC is held responsible when clients don't know about appointment cancellations.
- h. Ms. Schmidt – will take info back to Central Oregon Health Council

**F. Other Business**

- 1. Mr. Moss – Asked how changes in Affordable Care Act may affect this business. Is there a strategic plan? Ms. Powell indicated that she has never gotten the impression that there is an end to NEMT in the works, but rather there will be a re-delegation and predicts that Oregon is likely to keep NEMT.
- 2. Mr. Daugherty – Requested client not be assigned to him anymore and client contacted him about why, multiple times. Would like to have the information of a provider excluding a member not be communicated to clients. Ms. Powell indicated she will address it policy-wise that when questions are asked about providers no longer transporting that we will respond that provider not coming out as lowest cost, most appropriate transport at this time.
- 3. Ms. Stalling – Willing to share snow policy with all. Would love to see what complaints may have been generated by Mosaic Medical clients during this time.
- 4. Ms. Gilbert – Abilitree no longer using their buses for transport. These may be available for some type of venture to use for rural transport.

**G. Meeting adjourned at 2:15 pm**