

# City of Brookings

## MEETING AGENDA

### **CITY COUNCIL**

**Monday, Monday July 23, 2018, 7:00pm**

City Hall Council Chambers, 898 Elk Drive, Brookings, OR 97415

### **CITY COUNCIL**

#### **A. Call to Order**

#### **B. Pledge of Allegiance**

#### **C. Roll Call**

#### **D. Ceremonies**

- a. Introduction of New Employees
  - 1. Jay Trost
  - 2. Matt Wedmore
  - 3. Mike Pundyk
  - 4. Caitlin Goins

#### **E. Oral Requests and Communications from the audience**

- 1. Public Comments on non-agenda items – 5 minute limit per person.\*

#### **F. Staff Reports**

- 1. Confirmation of Public Safety Director [City Manager, Pg. 3]
  - a. McCrae Resume [Pg. 4]
  - b. Job Description [Pg. 6]
- 2. Travel Oregon Grant Contract [City Recorder, Pg. 11]
- 3. Monarch Festival Fund Request [City Recorder, Pg. 12]
  - a. Application packet [Pg. 13]
- 4. Travel & Adventure Show Fund Request [City Recorder, Pg. 15]
  - a. Proposal [Pg. 16]
  - b. 2018 Tradeshow Evaluation [Pg. 18]
- 5. Spectrum Digital Advertising Campaign [City Recorder, Pg. 26]
  - a. Campaign Proposal [Pg. 28]
  - b. Previous Campaign Analytics [Pg. 44]
- 6. Pistol River Wave Bash Event Evaluation [City Recorder, Pg. 48]
  - a. Evaluation [Pg. 49]
- 7. Friends of Music Support Letter [City Manager, Pg. 50]
  - a. Draft Support Letter [Pg. 51]
- 8. Authorized Signatures for Brookings Airport Purchase & Transfer Agreements [Pg. 52]

#### **G. Consent Calendar**

- 1. Approve Council minutes for July 9, 2018 [Pg. 53]
- 2. Accept TPAC Committee minutes for June 14, 2018 [Pg. 56]
- 3. Accept David Paoli resignation from Planning Commission (verbal)
- 4. Accept Tim Patterson resignation from TPAC (verbal)

5. Accept Jay Trost resignation from Parks & Rec Commission [Pg. 58]
6. Receive monthly financial report for June 2018 [Pg. 59]

## **H. Remarks from Mayor and Councilors**

### **I. Adjournment**

\*Obtain Public Comment Forms and view the agenda and packet information on-line at [www.brookings.or.us](http://www.brookings.or.us), at City Hall and at the local library. Return completed Public Comment Forms to the City Recorder before the start of meeting or during regular business hours.

All public meetings are held in accessible locations. Auxiliary aids will be provided upon request with at least 72 hours advance notification. Please contact 469-1137 if you have any questions regarding this notice.

# CITY OF BROOKINGS

## COUNCIL AGENDA REPORT

Meeting Date: July 23, 2018

Originating Dept: City Manager

Signature (submitted by)

  
City Manager Approval

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### Subject:

Confirmation of Appointment of Kelby McCrae as Public Safety Director.

### Recommended Motion:

Motion to confirm the appointment of Kelby McCrae as Public Safety Director (Police Chief) effective August 1, 2018.

### Background/Discussion:

Public Safety Director (Police Chief) Chris Wallace is scheduled to retire effective July 31, 2018. The Brookings Municipal Code provides (Section 2.30.020) that the City Manager has the authority to appoint the Chief of Police with the confirmation of the City Council. City Manager Janell Howard has appointed Kelby McCrae to the position effective August 1, 2018, subject to confirmation by the City Council.

We determined to undertake an internal promotion process to fill the vacancy. A recruitment announcement was distributed in mid-March with an application deadline of April 30. One application was received, that being from Sgt. Kelby McCrae.

The current and recently retired City Manager interviewed McCrae and were very impressed by both his interview performance and his application package.

McCrae has a Bachelor of Science degree in Education from Eastern Oregon University and an Oregon teaching credential. He is scheduled to complete his Master of Science in Justice Administration and Crime Management in August 2018. He has a Supervisor Certificate issued by the Oregon Department of Public Safety Standards and Training.

McCrae has served with the Brookings Police Department for 15 years, serving as Sergeant for the last eight years. He served with the Oregon Army National Guard for 22 years, including several overseas deployments, before retiring in 2013 at the rank of Major. Prior to his employment with the City, McCrae served as a teacher at Kalmiopsis Elementary School for four years.

The Public Safety Director is the chief administrative officer for both the Police and Fire Departments, and serves as the Chief of Police.

### Attachments:

- a. Kelby McCrae resume
- b. Public Safety Director job description

# KELBY McCRAE

PO Box 7676 • Brookings, OR 97415 • (541) 469-6199 • cav\_1lt@yahoo.com

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Likable, technically competent and confident police sergeant, retired Oregon Army National Guard Major, and former teacher with nearly 15 years with the Brookings Police Department. Led and supervised officers and dispatchers to successfully achieve the department mission. Voted Brookings Employee of the Year in 2010.

## EXPERIENCE

### **JULY 2003 – CURRENT**

#### **POLICE SERGEANT, BROOKINGS POLICE DEPARTMENT**

- Successful leadership and management of 10 officers and 7 dispatchers since 2010.
- Operate by the motto “mission first, employees always” by prioritizing mission accomplishment while maintaining consideration of employee wellbeing to maximize achievement.
- Successfully applied for six grants that purchased nine vehicle radar units and awarded approximately \$15,000 to focus on traffic enforcement.

### **APRIL 1991 – APRIL 2013 (RETIRED)**

#### **ASSISTANT BRIGADE OPERATIONS OFFICER, OREGON ARMY NATIONAL GUARD**

- Responsible for determining and coordinating the training needs of over 2,000 soldiers to ensure mission readiness.
- Responsible for writing comprehensive operations orders that detailed the mission to be accomplished and how it will be successfully executed and achieved during training and two deployments.
- Commanded an infantry unit then a cavalry unit, leading nearly 200 soldiers.

### **JULY 1999 – JUNE 2003**

#### **ELEMENTARY SCHOOL TEACHER, BROOKINGS-HARBOR SCHOOL DISTRICT**

- Responsible for the education of a diverse body of students over four school years to include hearing impaired and developmentally disabled.
- Requested each year by parents for organizational skills and developing student responsibility and achievement.
- Selected as a state trainer and evaluator for state standardized math and writing scoring.

## EDUCATION

### **JUNE 1998**

#### **BACHELOR OF SCIENCE IN ELEMENTARY EDUCATION**

**EASTERN OREGON UNIVERSITY, LA GRANDE, OR**

- Certified Oregon Teacher
- Minor in Military Leadership and Management



**AUGUST 2018 (SCHEDULED)**

**MASTER OF SCIENCE IN JUSTICE ADMINISTRATION AND CRIME MANAGEMENT  
BELLEVUE UNIVERSITY, BELLEVUE, NE**

- Maintaining a 4.0 G.P.A. with 10 of 12 courses completed
- Received accolades from all 7 professors for my quality of work

**SKILLS AND ACHIEVEMENTS**

- DPSST Supervisory Certification
- Range Master and qualified firearms instructor
- Incident Command Certified, FEMA
- 2010 Brookings Employee of the Year

**REFERENCES**

- Todd Plimpton, J.D.  
Brigadier General (Retired)  
Oregon Army National Guard Assistant Adjutant General,  
[todd@gbis.com](mailto:todd@gbis.com)  
(775) 273-2631 (Office)
- Professor Mike Butera  
Bellevue University, Criminal Justice Program Director  
[mike.butera@bellevue.edu](mailto:mike.butera@bellevue.edu)  
(402) 557-7594 (Office)
- Professor Dan Hoins  
Bellevue University, Adjunct  
Sarpy County, NE Administrator  
[dhoins@sarpy.com](mailto:dhoins@sarpy.com)  
(402) 593-2347 (Office)  
(402) 290-2600 (Cell)
- Professor Brad Alexander  
Bellevue University, Adjunct  
[brad.alexander@douglascounty-ne.gov](mailto:brad.alexander@douglascounty-ne.gov)  
(402) 676-6168 (Office)

**CITY OF BROOKINGS**  
**PUBLIC SAFETY DIRECTOR**

**GENERAL STATEMENT OF DUTIES:**

Under the administrative direction of the City Manager, plans, organizes, directs, coordinates, oversees, and reviews the operation of the City's Police and Fire Services to assure the most effective use of financial and human resources in the provision of public safety services to the public. Performs related duties as required.

**SUPERVISION RECEIVED:**

Work is performed under the general supervision of the City Manager.

**SUPERVISION EXERCISED:**

Supervises and coordinates public safety activities. Direct supervision is provided to employees assigned to the department including Police and Fire.

**TYPICAL DUTIES/EXAMPLES OF WORK:**

The following duties are a representative sample of the level of responsibilities, but do not include all of the duties of a similar complexity and responsibility, which may be assigned to a position in this class.

1. Establishes policies and procedures and interprets same for staff and the public; plans short and long term goals for the department and provides direction, leadership, and support for their implementation. Develops a philosophy of ethics and integrity that guides the provision of public safety services for the city.
2. Plans, organizes, directs, and coordinates the activities of the Brookings Department of Public Safety in the protection of life, property, and the environment.
3. Commands the operations of the Public Safety Department during emergency and/or disaster situations.
4. Enforces City, State, and National fire prevention codes, standards, and safety regulations and see that order is maintained and the laws of Oregon and the ordinances of the City of Brookings are enforced by delegating authority and responsibility to department officers.
5. Coordinates the preparation of the Department's annual budget and presents it to the budget committee; administers the budget and monitors expenditures throughout the fiscal year. Plans, manages, and exercises control of budgetary resources; provides for personnel recruitment, selection, and training programs; provides a progressive system of performance evaluation, recognition, and discipline; takes necessary steps to maintain operational readiness and improve the Department.
6. Participates in, and supports development of the department management team and the personal and professional development of program managers; reviews performance appraisals of all staff personnel; may participate in the training of new staff members.

**CITY OF BROOKINGS**  
**PUBLIC SAFETY DIRECTOR**

7. Selects, supervises, and evaluates supervisors and meets with them individually to review the status of operations and projects; consults with, and advises supervisors in matters that include problems, methods, alternative actions, staffing, and planning.
8. Confers with the City Manager on issues pertaining to public safety; participates in meetings and activities of the City management team.
9. Participates in fire/police service conferences and workshops, and other educational meetings to keep abreast of modern fire/police delivery system methods and administration.
10. Provides staff support, leadership, and direction for various City-wide committees and community groups; gives presentations to community clubs and civic groups.
11. Meets with media representatives and provides information for feature articles and publicity releases; prepares regular and special reports required by the City, and state, federal, and other agencies.

**KNOWLEDGE, ABILITY AND SKILL REQUIREMENTS:**

Extensive knowledge of police and fire operations, procedures, practices, systems, and structures; knowledge of the principles, practices, techniques, and laws governing fire prevention, suppression, and emergency medical service delivery; thorough knowledge of management techniques, principles, and practices as they occur in government organizations; thorough knowledge of budgeting and staffing procedures and methods; thorough knowledge of the value of community policing and community support; considerable knowledge of the role of law enforcement in the criminal justice system; knowledge of the role of computer technology in public safety operations; ability to utilize team management concepts; ability to apply City, State, and federal laws, regulations, policies, and procedures; ability to effectively command departmental units in an emergency or disaster situation; ability to provide maximum services with limited resources; ability to analyze information and make appropriate decisions; ability to develop and maintain an accurate sense of community service needs; ability to utilize word processing, spreadsheet, and database systems sufficiently to perform assigned duties; ability to function as a liaison between the Department and other city departments, agencies, and the public; ability to interact harmoniously with staff, the management team, other agencies, and the community; ability to operate communication equipment; ability to communicate effectively orally and in writing; ability to travel as required; skill in the operation of motor vehicles and weapons.

**MANDATORY QUALIFICATIONS**

Completion of a four year college degree program, with major coursework in criminology, law enforcement, sociology, or a related field, plus five years of progressively responsible experience in the supervision and management of law enforcement operations. A Masters Degree in Public Administration, Criminology, or a related field of study, may be substituted for one year of the required experience, or any combination of experience and education that provides the required experience, or any combination of experience and education that provides the required knowledge, skills, or abilities.

**CITY OF BROOKINGS**  
**PUBLIC SAFETY DIRECTOR**

Oregon Department of Public Safety Standards and Training Executive Certificate or ability to obtain within 90 days of appointment.

Appointee must possess a valid Oregon driver's license at the time of appointment.

**DESIREABLE QUALIFICATIONS**

Five years of experience with the Brookings Police Department, Masters Degree in Public Administration or related field.

COMPENSATION TYPE:   Salary

EXEMPTION STATUS:     Exempt

JOB GRADE:             20B

CERTIFICATION PAY:    None

**CITY OF BROOKINGS**  
**PUBLIC SAFETY DIRECTOR**

**CITY OF BROOKINGS**

**POSITION FUNCTIONAL REQUIREMENTS**

DIVISION/DEPT: Public Safety  
JOB TITLE: Public Safety Director  
REPORTS TO: City Manager

| FUNCTION                       | N/A | OCCASIONALLY | FREQUENTLY | CONSTANTLY |
|--------------------------------|-----|--------------|------------|------------|
| STANDING                       |     |              | X          |            |
| BENDING                        |     |              | X          |            |
| CLIMBING                       |     |              | X          |            |
| WALKING                        |     |              | X          |            |
| CARRYING/<br>LIFTING<br>10 LBS |     |              | X          |            |
| CARRYING/<br>LIFTING<br>30 LBS |     |              | X          |            |
| CARRYING/<br>LIFTING<br>60 LBS |     | X            |            |            |
| OPERATING<br>EQUIPMENT         |     | X            |            |            |
| OPERATING<br>MOTOR<br>VEHICLE  |     |              | X          |            |

**CITY OF BROOKINGS**  
**PUBLIC SAFETY DIRECTOR**

OTHER PHYSICAL FUNCTIONS: Pushing/pulling, manual dexterity, stooping, sitting, reaching above shoulder level. Quite often works out of doors, regardless of weather conditions.

**Mental Aptitudes Table**

| <b>Designated Function</b> | <b>% Time</b> | <b>Aptitude Level</b> |
|----------------------------|---------------|-----------------------|
| WRITING                    | 10            | 1                     |
| READING                    | 20            | 1                     |
| REASONING                  | 50            | 1                     |
| MATHEMATICS                | 25            | 2                     |
| VERBAL                     | 20            | 1                     |

Note: Percentages may exceed 100% because functions may occur simultaneously.

**Basic Acuities**

| <b>Designated Function</b> | <b>Acuity Level</b> |
|----------------------------|---------------------|
| VISION                     | 1                   |
| HEARING                    | 1                   |
| TOUCH                      | 2                   |
| TASTE                      | 3                   |
| SMELL                      | 1                   |


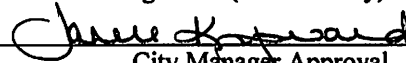
Note: Acuity and aptitude levels are: High = 1, Medium = 2, Low = 3

# CITY OF BROOKINGS

## COUNCIL AGENDA REPORT

Meeting Date: July 23, 2018

Originating Dept: City Recorder

  
Signature (submitted by)  
  
City Manager Approval

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**Subject:**

Travel Oregon Medium Competitive Grant – Bicycle Kiosks

**Recommended Motion:**

Motion to authorize the City Manager to execute a contract with Travel Oregon for a Medium Competitive Grant, funding the Brookings Bike Kiosks, Repair Stations and Storage Units project.

**Financial Impact:**

TOT funding was already allocated for a portion of the match on this project.

**Background/Discussion:**

At the May 29, 2018 City Council meeting, Council authorized staff to submit a Travel Oregon Competitive Medium Grant application requesting funding for a bike kiosk, repair stations, and storage lockers.



The notification of award will be made on July 23, 2018, and awardees must return signed contracts to Travel Oregon by August 3, 2018. Because this required timing doesn't allow for the contract approval to come before Council at an August meeting, staff is seeking approval to authorize the City Manager to execute the contract provided that the Brookings' application receives an award. Staff expects to be able to provide Council with the results at the time of the Council meeting.

# CITY OF BROOKINGS

## COUNCIL AGENDA REPORT

Meeting Date: July 23, 2018

Originating Dept: City Recorder

  
Signature (submitted by)  
  
City Manager Approval

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Subject: Transient Occupancy Tax (TOT) Fund Allocation for the Brookings First Annual Monarch Festival Event.

Recommended Motion:

As recommended by the Tourism Promotion Advisory Committee (TPAC): Motion to allocate a \$1,097 grant to the Brookings First Annual Monarch Festival event.

Financial Impact:

\$1,097 allocated from TOT revenues set-aside for tourism promotion.

Reviewed by Finance & Human Resources Director: 

Background/Discussion:

Vicki Mion representing the Brookings Oregon Monarch Advocates submitted a request for \$1,097 in funding assistance for the Brookings First Annual Monarch Festival event scheduled for September 15, 2018. The funds will be used to cover venue costs, advertising, supplies, etc.

This matter was considered by the Tourism Promotion Advisory Committee (TPAC) at its meeting of July 12, 2018. At that meeting, TPAC recommended unanimously to grant \$1,097 in TOT funding to the Brookings First Annual Monarch Festival event.

Attachment(s):

- a. Event Funding Application Packet





Brookings Oregon Monarch Advocates  
c/o Vicki Mion  
1234 Moore Street  
Brookings, OR 97415  
vickimion@gmail.com  
(760) 670-7826  
June 28, 2018

"Tourism Event Proposal"

Janell Howard, City Manager  
City of Brookings  
898 Elk Drive  
Brookings, OR 97415

Dear Ms. Howard and Tourism Promotion Advisory Committee members,

The members of Brookings Oregon Monarch Advocates (B.O.M.A.) were extremely pleased last May when the City of Brookings was designated as a Monarch City USA...the very first city in Oregon to achieve that distinction! One of the recommendations of the Monarch City USA association is that the City would host an annual Monarch Festival. Our dedicated B.O.M.A. volunteers are planning the "Brookings First Annual Monarch Festival" to be held in Azalea Park on Saturday, September 15<sup>th</sup>.

This family-friendly Monarch Festival will celebrate the monarch butterfly's amazing migration through Brookings to overwintering sites in central California with educational exhibits and seminars, games and small prizes for children. There will also be educational printed materials for adults who may wish to establish their personal Monarch Waystations or create a monarch and pollinator-friendly habitat on their properties. Also, there will be live caterpillars, butterflies and chrysalises for people to view up close and personal. Adult butterflies reared in captivity by B.O.M.A. members will be released to begin their southern migration at the end of the festival (weather-permitting). At our first festival, we only plan to sell water bottles and some milkweed plants, but in future years we hope to grow this festival into a larger event with vendors, music, butterfly rearing supplies and plant sales to further entice other monarch enthusiasts from Bandon to Brookings and Brookings to Ashland, as well as our friends from Del Norte County in California.

We will also have photo ops with the "City of Brookings" in the photos as memorabilia for folks to take home with them. We occasionally collaborate with the Southern Oregon Monarch Advocates group based in the Medford area. One great thing about monarch butterflies is that they are enjoyed by all age groups.

B.O.M.A. thanks you for your consideration in providing us with funding to help put on this event. If you require any additional information, please contact me, Vicki Mion, at the address and number given above.

Respectfully,

Vicki Mion  
(on behalf of B.O.M.A.)

Event Title: BROOKINGS FIRST ANNUAL MONARCH FESTIVAL Amount Requested \$ 1,097.00

Organization: BROOKINGS OREGON MONARCH ADVOCATES

Event Description: A CELEBRATION OF THE MONARCH BUTTERFLY'S AMAZING ANNUAL MIGRATION/PROMOTION OF BROOKINGS AS A MONARCH CITY USA / EDUCATION TO PUBLIC ABOUT HOW THEY CAN HELP WITH MONARCH CONSERVATION EFFORTS / GAMES & PRIZES FOR KIDS / SEMINARS / LIVE BUTTERFLIES FOR RELEASE

Event Date/s: SATURDAY, SEPTEMBER 15, 2018

Location: AZALEA PARK (UPPER LEVEL) Location secured? Yes ☒ No ☐

Event Goals: ① EDUCATION ② CONSERVATION  
③ CREATE AN <sup>ANNUAL</sup> FAMILY-FRIENDLY EVENT THAT FOSTERS COMMUNITY INVOLVEMENT AND TOURISM

How will this event be sustained after the first year? SPONSORSHIPS FROM LOCAL BUSINESSES AND INDIVIDUALS; POSSIBLE REQUEST FOR 2<sup>nd</sup> YEAR <sup>FUNDING ONLY</sup> FROM TPAC

Sponsors/Investors: NONE THIS YEAR. WE NEED TO ROLL OUT THIS FIRST ANNUAL EVENT, LEARN WHAT WORKED WELL AND THEN SEEK SPONSORS FOR 2019.

| Event Budget   |        |                     |                      |          |                                      |
|----------------|--------|---------------------|----------------------|----------|--------------------------------------|
| Income         |        |                     | Expenses             |          |                                      |
| Fees Collected | \$ 0   |                     | Facility/Venue Costs | \$ 22    |                                      |
| Admissions     | \$ 0   | FREE EVENT          | Insurance            | \$ 125   | ESTIMATE                             |
| Concessions    | \$ 100 | WATER & PLANT SALES | Advertising          | \$ 300   | RADIO, NEWSPAPER, SOCIAL MEDIA, ETC  |
|                | \$     |                     | Supplies             | \$ 500   | BROCHURES, EDUC. MATERIALS, DISPLAYS |
|                | \$     |                     | PRIZES FOR KIDS      | \$ 150   |                                      |
| TOTAL          | \$ 100 |                     | TOTAL                | \$ 1,097 |                                      |

How do you intend to evaluate the success of your event and determine the number of out of town visitors?  
EACH ATTENDEE WILL BE GIVEN A "RAFFLE TICKET." WE SHALL RECORD ZIP CODES ON TICKET STUBS. B.O.M.A. HAS MONTHLY MEETINGS AT WHICH WE WILL EVALUATE SUCCESS.

Contact Person: VICKI MION

Phone: (760) 670-7826 Email: VICKIMION@GMAIL.COM

Mailing Address: 1234 MOORE STREET; BROOKINGS, OR 97415



If more space is required please attach additional pages

# CITY OF BROOKINGS

## COUNCIL AGENDA REPORT

Meeting Date: July 23, 2018

Originating Dept: City Recorder

  
Signature (submitted by)  
  
City Manager Approval

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Subject: Transient Occupancy Tax Fund Allocation for the Travel & Adventure Show Promotion

Recommended Motion:

As recommended by the Tourism Promotion Advisory Committee: Motion to allocate \$1,000 to participate in the Travel & Adventure Show Promotion.

Financial Impact:

\$1,000 allocated from Transient Occupancy Tax revenues set-aside for tourism promotion and approximately \$950 from general fund administration.

Background/Discussion:

In February of 2018, staff participated as the City of Brookings' representative at the Travel and Adventure Show in Santa Clara, California, staffing the booth in a collaborative effort with Gold Beach and Curry County, at a cost of \$1,745 which included \$1265 to participate and \$466 for hotel accommodations.

For 2019, Travel Southern Oregon Coast (TSOC) is proposing a new regional collaborative program which would combine the efforts of coastal communities from Brookings north to Reedsport. The plan is to combine two booth spaces and promote the area regionally.

Two price points were offered. At a \$200 buy-in, the City could provide promotional materials which would be disseminated at the booth. At a \$500 buy-in, the City would get a large display banner and would be able to have a representative in the booth.

This matter was considered by the Tourism Promotion Advisory Committee (TPAC) at its meeting of July 12, 2018. At that meeting, TPAC unanimously recommended allocating \$1,000 from the TOT revenues to participate in the promotional event at the \$500 level and to cover hotel accommodations for the City representative. There would also be an additional \$700 cost for two days of staff time which would not be allocated through TOT funds but through the general fund instead. Additionally, meals and staff use of the City fuel card for the travel would have a cost of approximately \$250 and would also be charged to the general fund.

Attachment(s):

- a. Proposal
- b. 2018 Tradeshow Evaluation



**Travel Southern Oregon Coast (TSOC)**  
**Participation in the March 23-24, 2019 San Francisco Show**  
**DMO Co-Op Opportunity**  
travelshows.com

The **Travel & Adventure Show in the San Francisco Bay Area** provides Oregon's South Coast an opportunity to reach an audience of **more than 20,000 travel enthusiasts and active adventurers** seeking their next vacation destination. With a direct flight from SFO to OTH, these travelers can arrive quickly and begin exploring and experiencing all the coast has to offer.

**The Plan:** Combine two spaces into a 20x10 space to promote the **ENTIRE** South Coast with display/banners to represent the various major areas of the region – approximately 8-9 banners to hang from the back of the booth (see last page for example of another exhibitor's display of this nature.)

TSOC and the Network support attending the Travel Show as a region and has developed a Co-Op plan to help offset your cost.

**How it Works:** TSOC, Oregon's Adventure Coast (OAC-Coos Bay, North Bend, and Charleston), Gold Beach and the Southwest Oregon Regional Airport (OTH) have committed to attending the show and representing the South Coast Region.

**Can You Attend:** The more representation from the South Coast the better. We want you! Join the South Coast team and make a difference.

**Opportunity:**

**Option 1 – Full attendance at event**

**\$500**

This will include one banner depicting an activity or experience in your destination. All we need from you is a photo and TSOC will take care of the creative. A personal representative from your destination to attend the show and distribution of your materials in the booth. You represent the region first and then your destination. *This fee does not include travel expenses, but will cover transportation of your materials to the booth site.*

**Option 2 – Brochure distribution only**

**\$200**

This includes transportation of your materials to the booth space. The attendees in the booth will represent your destination as part of the entire South Coast region.

**Cost:** The cost of the two booth spaces is \$7590. For most DMO's this is out of reach but when we work together we can make it happen.

**How TSOC and the OSCRTN Network are Making a Difference:** TSOC along with OAC, Gold Beach and OTH will cover the majority of the booth fee. TSOC will cover transportation of materials, creative and regional collateral production while OSCRTN will provide organization and management.

**What It Does Not Cover:** It is important to note that travel, lodging and food are not covered. You can expect an additional \$1,500 to \$2,000 on top of your opportunity cost.

Example Booth Space – here is how the Florida Keys exhibited their entire area at the 2018 Show:



## Pressing Sand!

Oregon South Coast Regional Tourism Network (OSCRTN) making a difference on by collaborating to enhance economic development through sustainable tourism


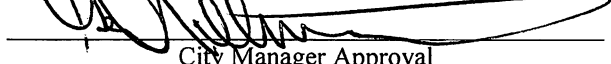
# CITY OF BROOKINGS

## TOURISM PROMOTION ADVISORY COMMITTEE

### AGENDA REPORT

Meeting Date: April 12, 2018

Originating Dept: City Recorder

  
Signature (submitted by)  
  
City Manager Approval

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Subject: Travel & Adventure Tradeshow Evaluation

Recommended Motion: None

Background/Discussion:

At its September 14, 2017 meeting, the Tourism Promotion Advisory Committee (TPAC) recommended to City Council a TOT grant of \$1,745 for participation in the Travel and Adventure Show in the San Francisco Bay Area over the weekend of February 16-17, 2018.

Staff participated in this event as a representative of the City of Brookings in conjunction with representatives from Gold Beach and Curry County. The booth promoted the entire South Coast region as the Wild Rivers Coast.

Total attendance at the event was 21,312. Over half the participants earned a household income of \$150-\$250 thousand. The 55-65 year old age group represented approximately 35 percent of the participants. Over 30 percent of participants indicated they expected to spend \$5-10 thousand on travel in 2018. The show's event summary is attached.

Specific to the Wild Rivers Coast's booth, Gold Beach had put together 1,000 give-away bags. All the bags were gone by mid-day on the second day, even with booth staff withholding the bags during the afternoon hours of the first day in order to conserve them for day two. Based on the dissemination of bags, staff estimates a total visitor count to the Wild Rivers Coast booth as at least 2,000 with a likelihood of up to 3,000.

Conversations with visitors to the booth typically involved an explanation of the represented area (many questions were about the Portland area, so booth staff would explain the south coast region), discussions of the scenic travel along Highway 101, amenities and sightseeing opportunities, and encouragement to visit. Many visitors to the booth related stories of previous visits to the area and along the coast.

Unfortunately, there is no mechanism to measure the success of this promotional opportunity i.e. no hard and fast numbers of tourist visits generated directly due to this event. But staff believes it has value particularly in concert with other advertising being conducted in northern California. In consideration of participating again next year, Gold Beach has already reserved a booth and will

represent the entire south coast regardless of Brookings or Curry County participation. Staff will bring the event back to TPAC for consideration in FY 2018-19.

Attachment(s):

- a. Travel Adventure Show Results-Event Summary
- b. Photo of booth and staff



# TRAVEL & ADVENTURE SHOW®

**SF/BAY AREA**  
FEBRUARY 17-18, 2018  
SANTA CLARA CONVENTION CENTER  
[WWW.TRAVELSHOWS.COM](http://WWW.TRAVELSHOWS.COM)

## RESULTS - EVENT SUMMARY



FIND US:  /TravelandAdventureShow  @TravAdventure  /TravAdventure





# 2018 SF/BAY AREA TRAVEL & ADVENTURE SHOW

**Date:** February 17-18, 2018

**Venue:** Santa Clara Convention Center

**Location:** 5001 Great America Parkway  
Santa Clara, CA 95050

**Halls:** A-B-C-D – 108,000 sq. ft.

## THANK YOU TO OUR SPONSORS

### NATIONAL MEDIA SPONSOR:



### SUPPORTING SPONSORS:



### PHOTO BOOTH SPONSOR:



### MEDIA SUPPORTER:



### GLOBAL BEATS STAGE SPONSOR:



### VIRTUAL REALITY ACTIVITY PAVILION:



### TRAVEL INDUSTRY PARTNERS:



### OFFICIAL PR PARTNER:



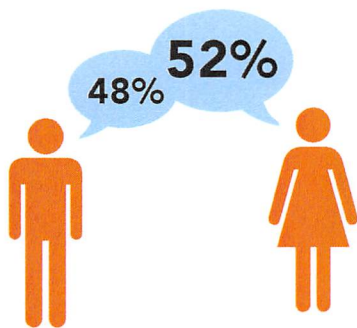
### PRODUCED BY:



# ATTENDANCE SUMMARY

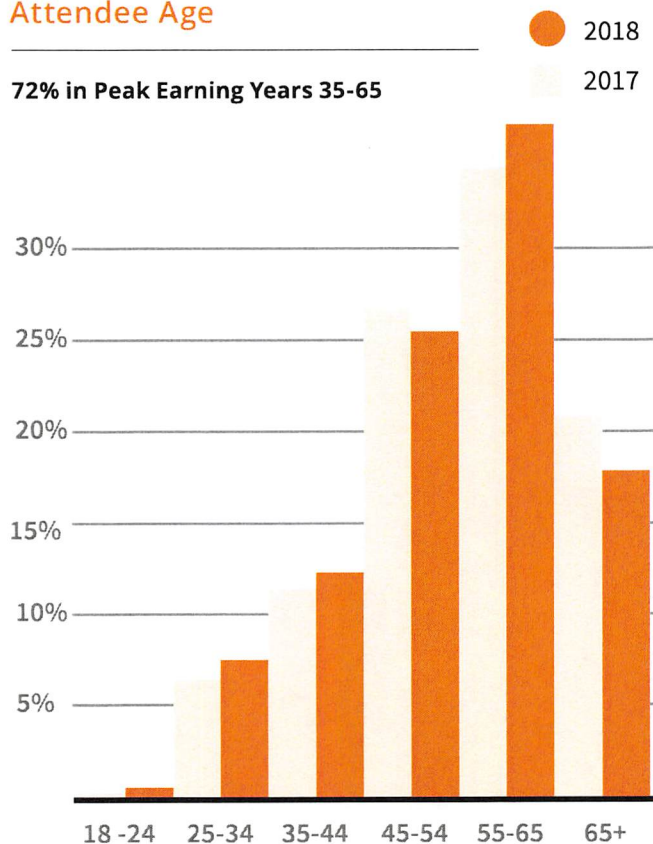
| Attendance Summary       | 2018          | 2017   |
|--------------------------|---------------|--------|
| <b>Total Attendance:</b> | <b>21,312</b> | 19,954 |
| <b>Travel Trade:</b>     | <b>1,537</b>  | 1,478  |
| <b>Travel Agents:</b>    | <b>512</b>    | 472    |
| <b>Press:</b>            | <b>81</b>     | 94     |

## Attendee Gender



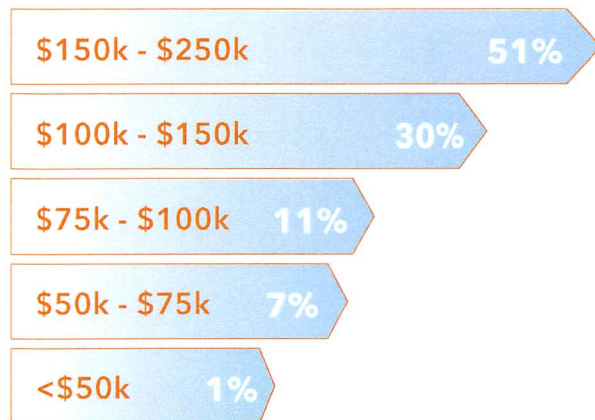
## Attendee Age

72% in Peak Earning Years 35-65



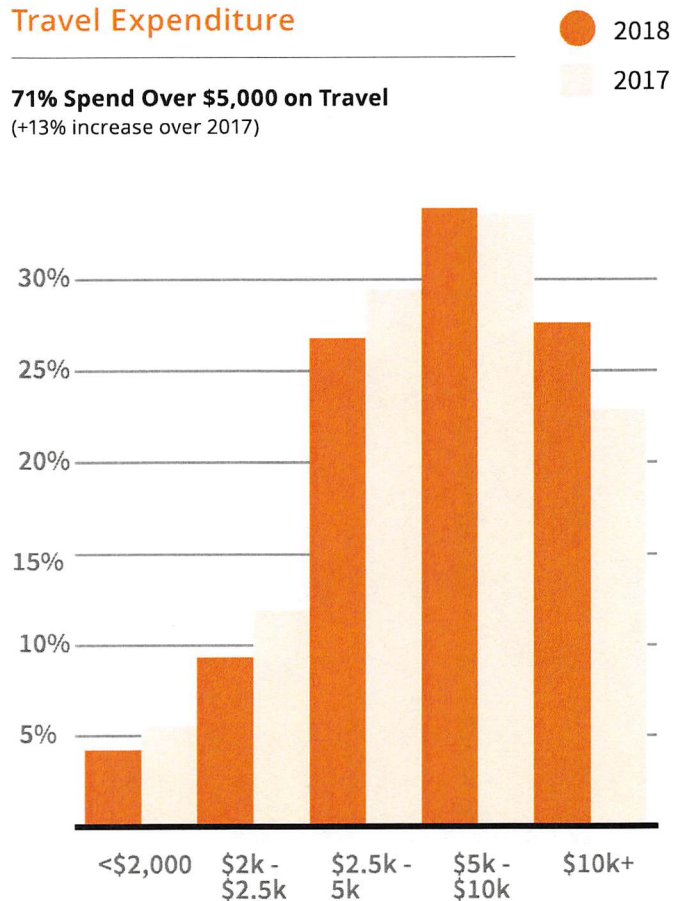
## Household Income (HHI)

81% Earn Over \$75,000 (9% increase over 2017)



## Travel Expenditure

71% Spend Over \$5,000 on Travel (+13% increase over 2017)





# HEADLINE SPEAKERS & STAGES

In 2018, the SF/Bay Area Travel & Adventure Show provided new, updated content and speakers to engage attendees.

The Travel Theater, where attendees go for inspiration and advice from travel celebrities, welcomed back Samantha Brown, Rick Steves and Pauline Frommer.

At the Destination Theater, 14 sessions spanning both show days provided educational workshops based on specific destinations.

On the Savvy Traveler Theater, attendees enjoyed 10 sessions dedicated to providing actionable advice on how to travel safer, better, and more efficient. From packing tips and solo travel advice, to budget tips and travel photography, Travel & Adventure Show consumers packed the theater each day.

For those attendees searching for cultural experiences, the Global Beats Stage provided just that. With over 16 performances on the Global Beats Stage, attendees got a taste of faraway cultures from around the globe.

**In addition to meeting with our vendors, attendees engaged in activities such as:**

- + Travel Theater
- + Destination Theater
- + Savvy Traveler Theater
- + Global Beats Theater
- + Yosemite Experience Pavilion
- + Camel Rides
- + Scuba Pool
- + Visit Florida Keys & Key West Photo Booth
- + San Francisco Passport Agency

## Keynote Speakers Included:



**Samantha Brown**  
*Host, PBS' Places to Love*



**Rick Steves**  
*Travel Writer, Host of Rick Steves Europe and Travel with Rick Steves*



**Pauline Frommer**  
*Editorial Director of the Frommer's Guides and Publisher of Frommers.com*

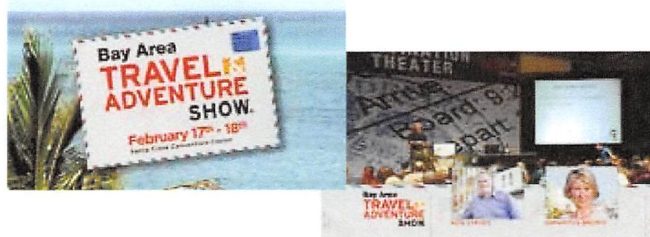


# PROMOTION SUMMARY

For the 2018 Travel Show Season, the Marketing Team was tasked with not only increasing attendance, but also increasing the quality of attendees who walked through the show doors.

## Broadcast Television:

2018 SF/Bay Area show's television mix was one of the strongest ever. Between NBC, CBS and ABC, over 430 commercials ran, complimented with digital ads from each station, resulting in 18.332 million impressions served over a 10 day flight. This resulted in a 4% increase in impressions year over year.



## Radio:

Between KCBS, KOIT, and the Total Traffic & Weather network (9 stations), over 180 radio spots ran over the span of two and a half weeks. Over 3.954 million radio impressions were served, resulting in a 36% increase from 2017.



## Out of Home:

Strategically placed along freeways in the Bay Area's affluent pockets, 5 illuminated static billboards and 3 illuminated posters targeted local commuters. Over 11 million impressions were served to drivers traveling in both directions, resulting in a 172% increase in overall impressions year over year.



## Digital Campaign:

In addition to digital campaigns with TV and radio partners, an outside digital marketing agency, AdTaxi, put together a campaign that spanned across social media, banner ads, and search marketing. The results? Over 2.5 million digital impressions to qualified prospects that met the Travel & Adventure Show's demographic.

## Media Coverage:

In the weeks leading up to the event, various print and radio interviews were set up with exhibitors, speakers, and Travel Show Management. NBC came to the convention center early on Friday morning, February 16th and held a taped Media Morning that was re-purposed throughout the weekend.





## PROMOTION SUMMARY - CONTINUED

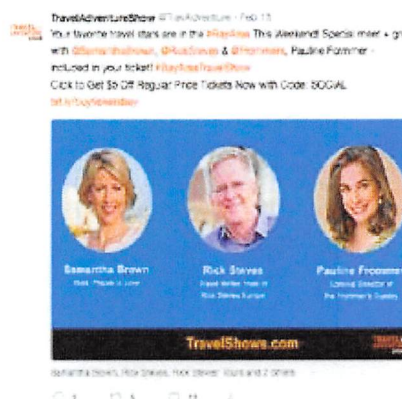
**FACEBOOK:**

Within the week leading up to, and including the SF/Bay Area event, The Travel & Adventure Show Facebook advertising campaign targeted Bay Area travelers, promoting event speakers, sponsors and exhibitors. These posts reached 245,190 users, while creating 268,500 unique Impressions and 10,740 engaged users drawing more attention to the event.



**TWITTER:**

By engaging celebrity speakers, local and national bloggers and industry professionals, @TravAdventure created 60K impressions. The Bay Area hashtag, #BayAreaTravelShow, was used in over 160 posts by over 100 users, reaching over 400,000 users and created over 650K impressions.



**INSTAGRAM:**

The #BayAreaTravelShow reached over 63,000 SF/Bay Area Instagram users and created over 122,500 impressions. #BayAreaTravelShow was used in over 100 posts throughout the week by SF/Bay Area Travel & Adventure Show attendees, resulting in over 2,500 likes/ video views and over 200 comments.



"The shows have been incredible! The traffic yesterday was non-stop. It has been a huge success for our agents and consumers. We have a great relationship with the Travel & Adventure Show." – **Julianne McDermott, Cruise Planners**

"This is our first time exhibiting. We have had a lot of very interested people. The venue is nice, too. The Bay Area is a good region to find qualified buyers. It helps to speak with people face to face." – **Terry, Salmon Catcher Lodge**

“This show has been great. Exhibiting in the Bay Area makes a lot of sense for our destination. We’ve had good engagement and we’re on track to hand out everything we brought. We love speaking with consumers directly to see what they think. Show management has been very good to work with.” – **Visit Redding**



“This show has been good. There’s been lots of traffic. We tend to find more qualified people here in a higher income bracket than other events we participate in.”  
**–Charlie Blackburn, Klamath**

# CITY OF BROOKINGS

## COUNCIL AGENDA REPORT

Meeting Date: July 23, 2018

Originating Dept: City Recorder

  
Signature (submitted by)  
  
City Manager Approval

---


Subject: Spectrum Digital Proposal

Recommended Motion:

Motion to authorize the City Manager to execute an agreement with Spectrum Reach, continuing a digital tourism advertising campaign, for an additional six-months, at a cost of \$500 per month.

Financial Impact:

\$3,000 in Transient Occupancy Tax funds

Approved by Finance & Human Resources Director: 

Background/Discussion:

At its November 16, 2017 meeting, TPAC voted 4-2 to recommend to Council to continue its Spectrum Digital advertising campaign, focusing on the Redding, California area as the target market. City Council approved the recommendation at its meeting of December 26, 2017.

The campaign has now been running for a year-and-a-half and is up for renewal.

Spectrum Reach has proposed another six-month, digital advertising package, again focusing on customers in Redding, California through both static display ads with embedded flash components and with 15-second video ads.

Spectrum's analytics suggest that the current campaign has exceeded industry benchmarks. Spectrum's summary report is attached.

Staff has separately evaluated analytics available through the City's website and has noted the following outcomes:

- From the period of January 1 to June 30, 2018, there were 933 visits to the City's webpage via campaign sources (at least 330 of those can be definitively attributed to the Spectrum campaign).
- For the period of January 1 to June 30, 2018, data regarding website visits from the Redding, California area shows an overall positive increase compared to the same time beginning January 1, 2017. For instance, visits from the city of Redding increased by 393; visits from Tehama increased by 129; visits from Mt. Shasta and Shasta Lake increased by 23; visits from the city of Millville increased by 6.
- Due to the retargeting landing-page being changed to the Visiting page at the start of the second campaign, staff compared visits to that page utilizing the same time perimeters as

used in the previous bullet point. Unique page views to the Visiting page increased from 3003 to 3309.

- Also during the second six-month campaign, modifications to the retargeting were implemented to bring visitors directly to the whale watching and/or Nature's Coastal Holiday pages for a two-month period in November and December. Analytics for those two pages show that in that timeframe, there were 176 visits to the whale watching page and 215 visits to the Nature's Coastal Holiday page.

The continuation of this advertising campaign was discussed by TPAC at its meeting of July 12, 2018. At that meeting, TPAC recommended, in a 5-1 vote, to continue the campaign for an additional six months as proposed.

Attachment(s):

- a. August 2018 Six-Month Proposal
- b. Spectrum Analytics

# City of Brookings - Q3-Q4 Digital 2018



Client: City of Brookings-  
NW210512

Agency: <none>

Bill to: N/A

Brookings, OR 97415

AE: House Medford

E-mail: N/A

EDI Client:

EDI Product:

EDI Estimate:

EDI Order:

Zones: 8803

Flight Dates: 8/26/2018 -  
1/27/2019

Billing Calendar: Broadcast

Traffic Order #:

Spot Length: 30

## Zone(s): DIMF- Digital Medford Klamath, 8803

| Network       | Start Date | End Date | Daypart   | Description                  | Spots/Wk | Total Spots | Rate     | Extended Cost     |
|---------------|------------|----------|-----------|------------------------------|----------|-------------|----------|-------------------|
| TDEV          | 08/26/18   | 08/26/18 | Su 6a-12m | 71,429 impressions (Redding) | 1        | 1           | \$500.00 | \$500.00          |
| TDEV          | 09/23/18   | 09/23/18 | Su 6a-12m | 71,429 impressions (Redding) | 1        | 1           | \$500.00 | \$500.00          |
| TDEV          | 10/28/18   | 10/28/18 | Su 6a-12m | 71,429 impressions (Redding) | 1        | 1           | \$500.00 | \$500.00          |
| TDEV          | 11/25/18   | 11/25/18 | Su 6a-12m | 71,429 impressions (Redding) | 1        | 1           | \$500.00 | \$500.00          |
| TDEV          | 12/23/18   | 12/23/18 | Su 6a-12m | 71,429 impressions (Redding) | 1        | 1           | \$500.00 | \$500.00          |
| TDEV          | 01/27/19   | 01/27/19 | Su 6a-12m | 71,429 impressions (Redding) | 1        | 1           | \$500.00 | \$500.00          |
| <b>Totals</b> |            |          |           |                              |          | <b>6</b>    |          | <b>\$3,000.00</b> |

## Order Summary:

Zone Description: DIMF- Digital Medford Klamath, 8803

Total Gross\$: \$3,000.00

Total Net\$: \$3,000.00

## Broadcast Month Totals:

|                       | Aug 18   | Sep 18   | Oct 18   | Nov 18   | Dec 18   | Jan 19   | Total      |
|-----------------------|----------|----------|----------|----------|----------|----------|------------|
| <b>Total Spots</b>    | 1        | 1        | 1        | 1        | 1        | 1        | 6          |
| <b>Total Net \$</b>   | \$500.00 | \$500.00 | \$500.00 | \$500.00 | \$500.00 | \$500.00 | \$3,000.00 |
| <b>Total Gross \$</b> | \$500.00 | \$500.00 | \$500.00 | \$500.00 | \$500.00 | \$500.00 | \$3,000.00 |

## Disclaimer:

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_



Either signature on this order form, or delivery to Charter Communications Operating, LLC ("Spectrum Reach") of any advertisement, advertising content or other materials of or on behalf of an advertiser or agency (each, a "Client") for distribution, shall constitute Client's agreement to the Spectrum Reach Terms and Conditions, available at [spectrumreach.com/terms-conditions](https://spectrumreach.com/terms-conditions) and incorporated into this order form as if fully set forth herein, as applicable and as may be amended from time to time.

Presented to  
City of Brookings



# Executive Overview

Complex data sources were used to develop the right mix of audience targeting & online delivery to help achieve your business goals.

## Audience Targeting

- › 8 Targeted Zip Codes in 2 Counties
- › Total Target Population: Approx 194,780
- › Retargeting: Included

## Product Selection



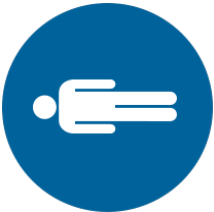
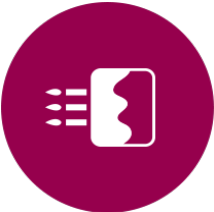



# Geographic Targeting

Target the consumers that are most likely to become your customers by focusing on the geography best suited for your locations & business type.

## Geography



## Demographics

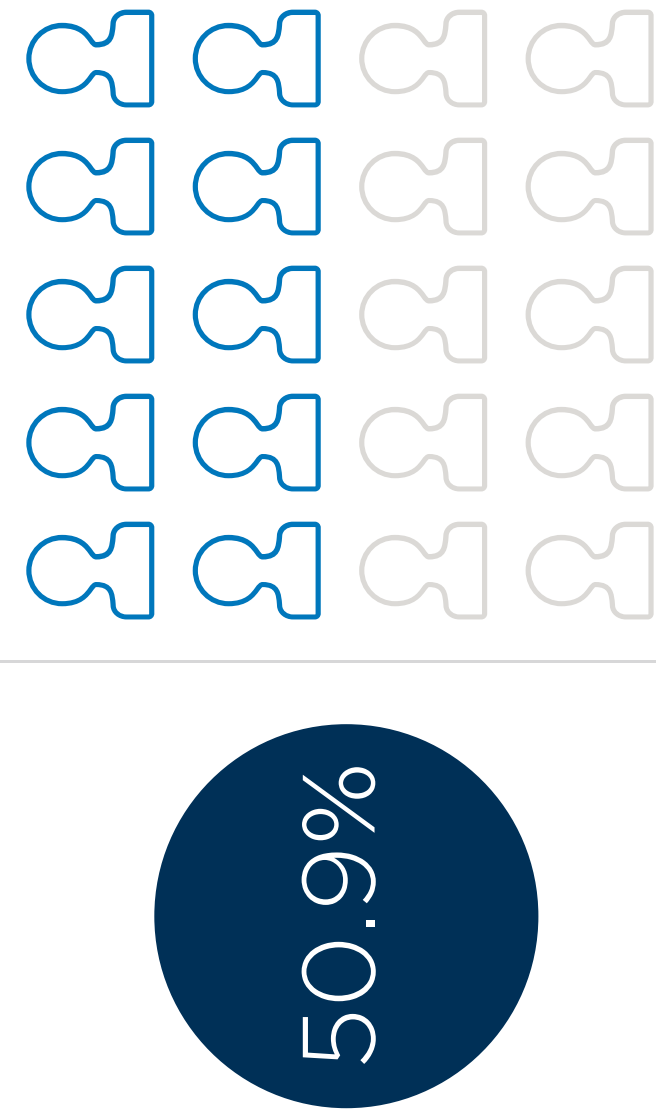
|  |                  |         |
|--|------------------|---------|
|    | Gender           | > All   |
|    | Age Range        | > 25-64 |
|  | Household Income | > All   |
|  | Parent/Single    | > All   |
|  | Education        | > All   |

# Demographic Targeting

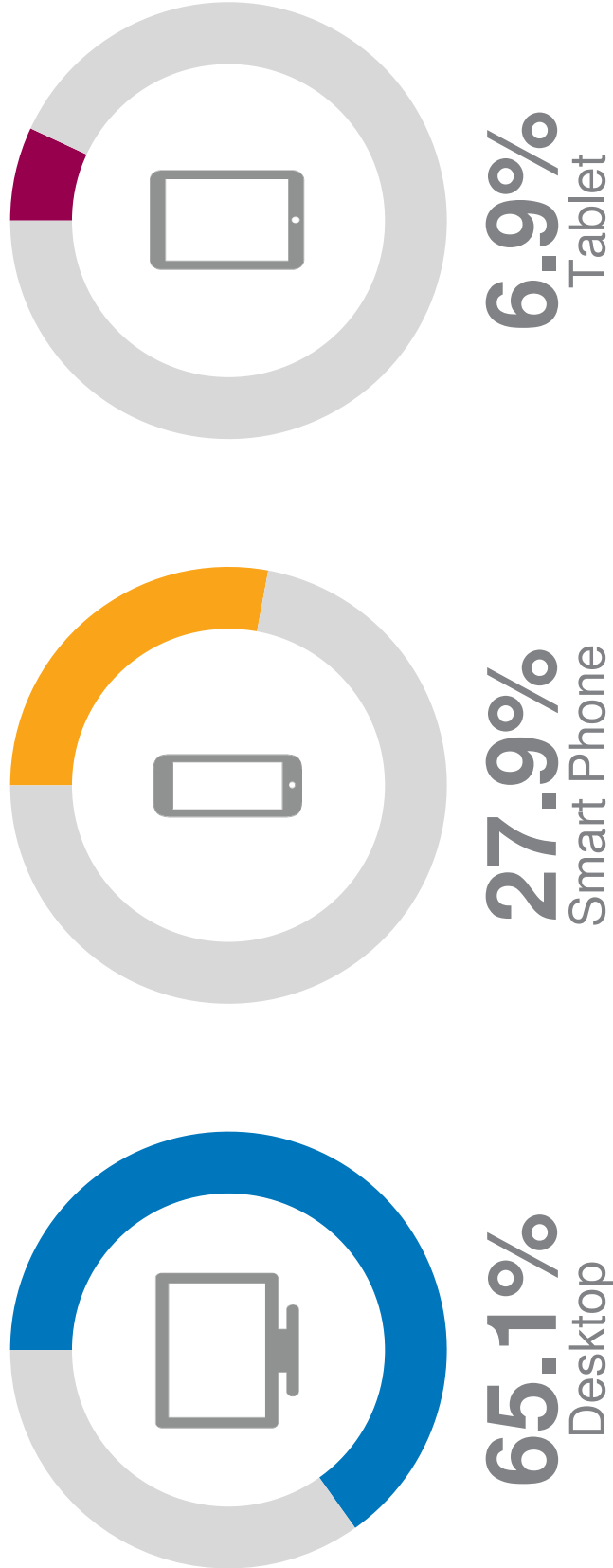
Understanding the background & behavior of your best target customers is key to constructing a cost-effective media plan.

Targeting 99,083 out of 194,780

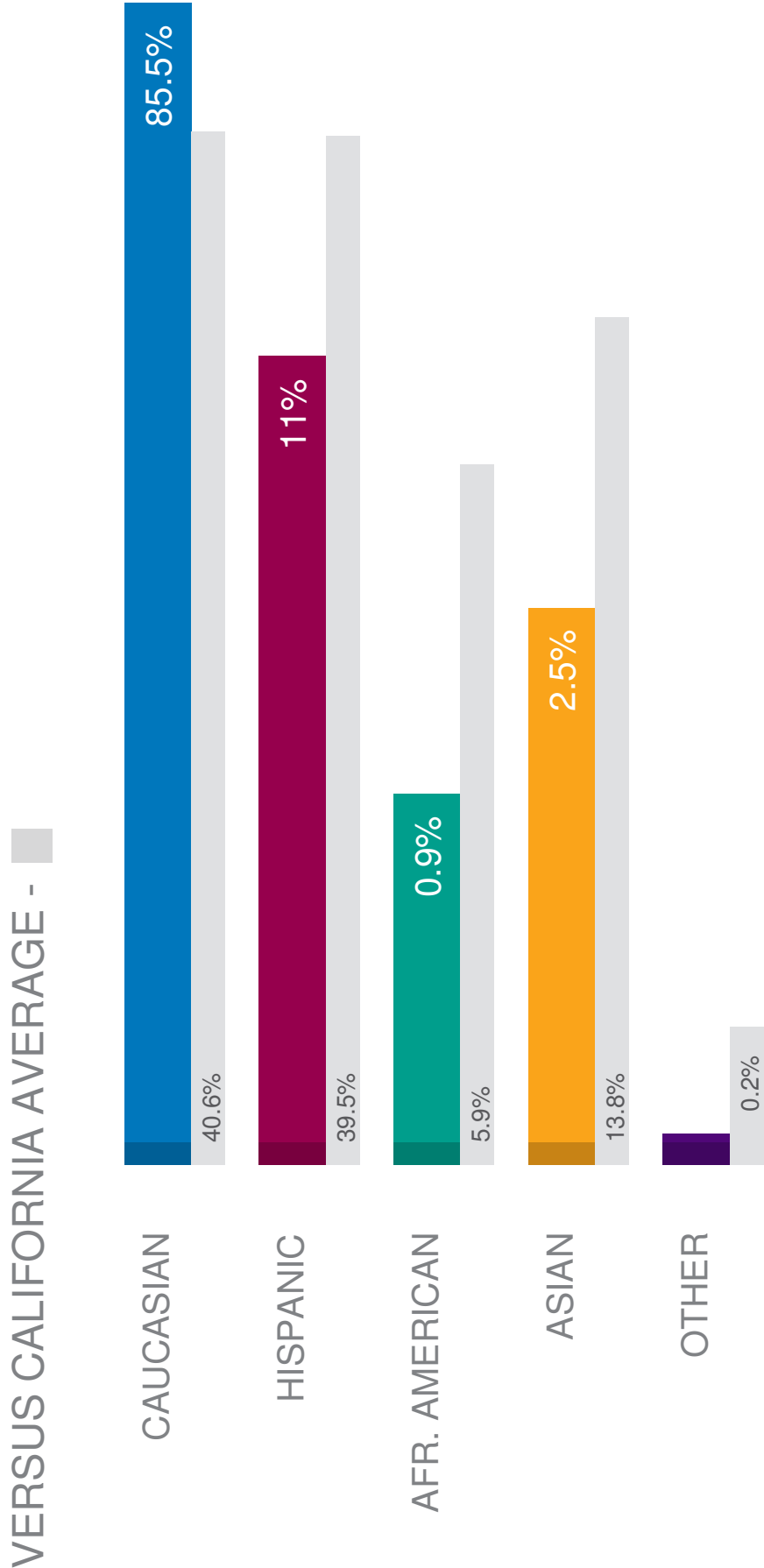
25-64



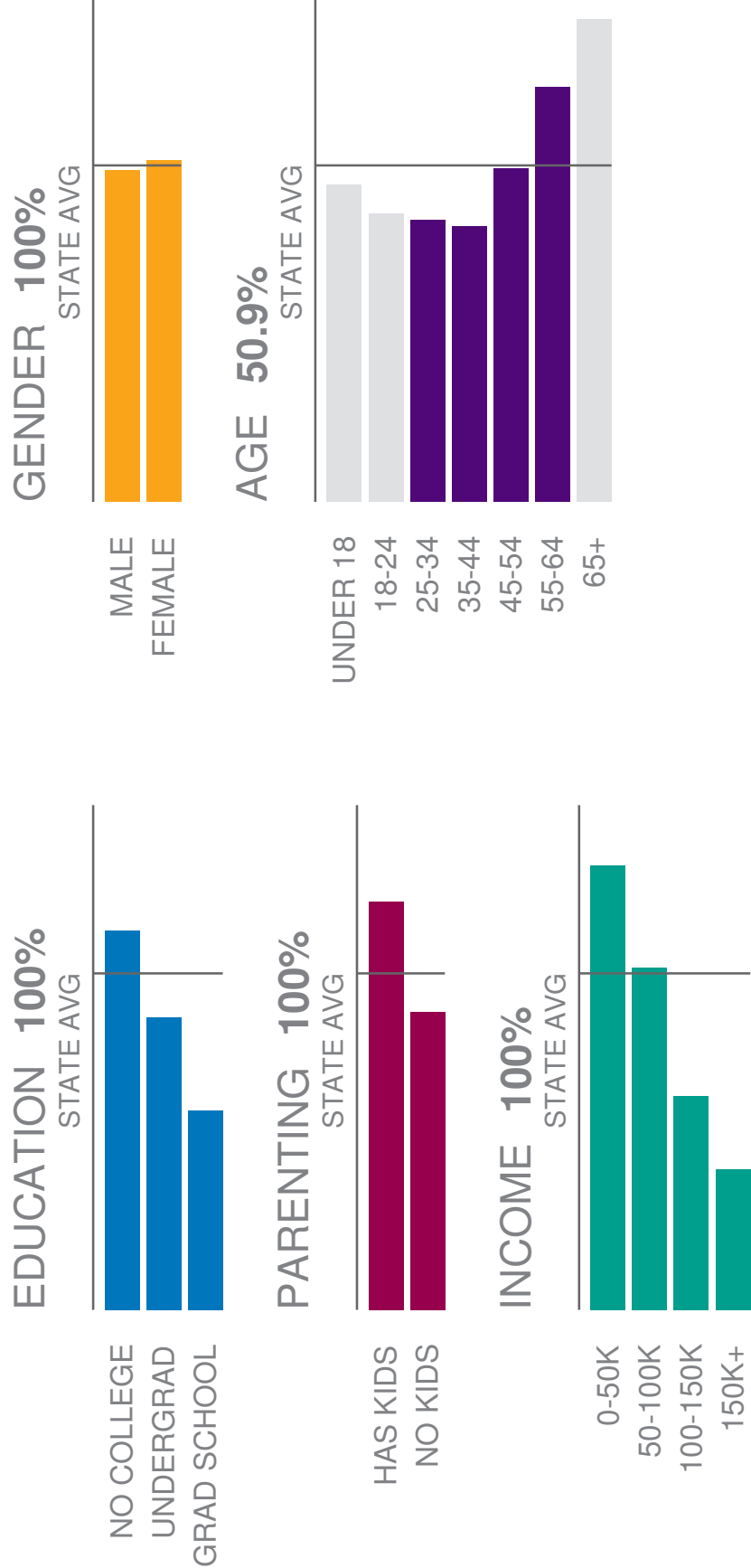
Device use in targeted area



## Geographic composition



## Targets against regional average





# Audience Interests

After you know who your best customers are, its important to understand their interests, habits, & media consumption.

## Site List

**LOCAL MEDIA**  
krcrtv.com  
redding.com  
actionnewsnow.com  
chicoer.com  
appeal-democrat.com  
advocate-news.com  
ktvl.com  
dailytidings.com  
kmed.com  
colfaxrecord.com

**TRAVEL**  
expedia.com  
priceline.com  
kayak.com  
hotelplanner.com  
taxifarefinder.com  
taxi-services.regionaldirectory.us  
auto-rental.regionaldirectory.us  
travel.com  
taxidir.info  
worldtaximeter.com

**BOATING**  
thehulltruth.com  
boatingmag.com  
jetski.com  
swimmingworldmagazine.com  
sailmagazine.com  
yachtingmagazine.com  
likesailing.com  
reelboating.com  
sailingworld.com  
dailyboater.com

### HOTELS & ACCOMMODATIONS

hotels.com  
bedandbreakfast.com  
hotelclub.com  
hotelcoupons.com  
hoteldiscounts.com

### HIKING & CAMPING

sportsmansguide.com  
fielandstream.com  
outdoorbasecamp.com  
outdoorchannel.com  
theoutdoorlodge.com  
backcountry.com  
outsideonline.com  
backpacker.com  
trails.com  
statetparks.com

### TRAVEL AGENCIES & SERVICES

travelindustrywire.com  
tripcook.com  
tours.com  
travel-agents.regionaldirectory.us

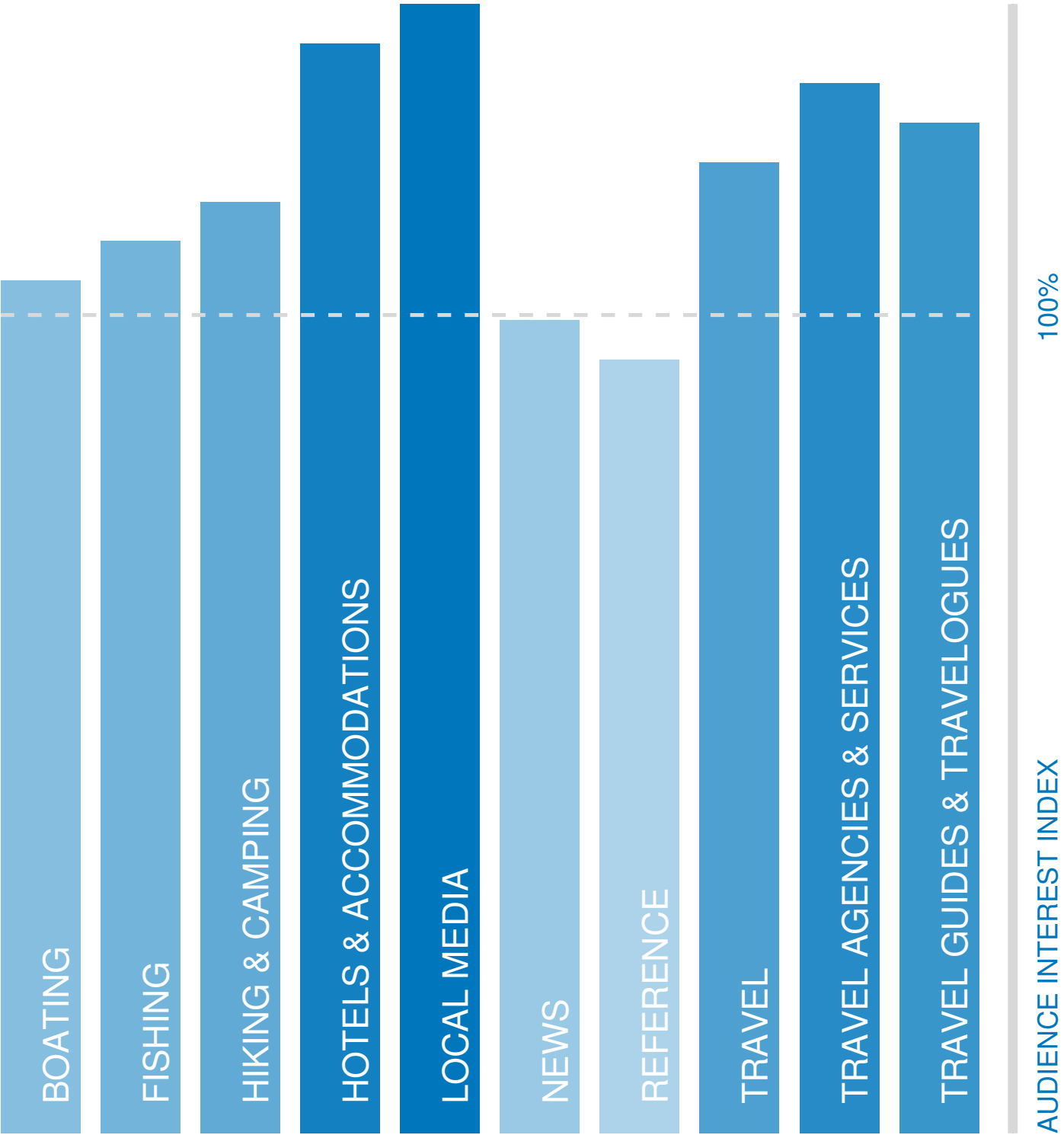
### TRAVEL GUIDES & TRAVELOGUES

bookingbuddy.com  
everytrail.com  
budgettravel.com  
smartertravel.com  
orbitz.com  
travelandleisure.com  
travelandresortsnews.com  
yahoo.com/travel

### FISHING

basspro.com  
outdoorlife.com  
hookandbullet.com  
lake-link.com  
gameandfishmag.com  
fishingflyshop.com  
anglerweb.com  
fishingnetwork.net

## Audience Interests

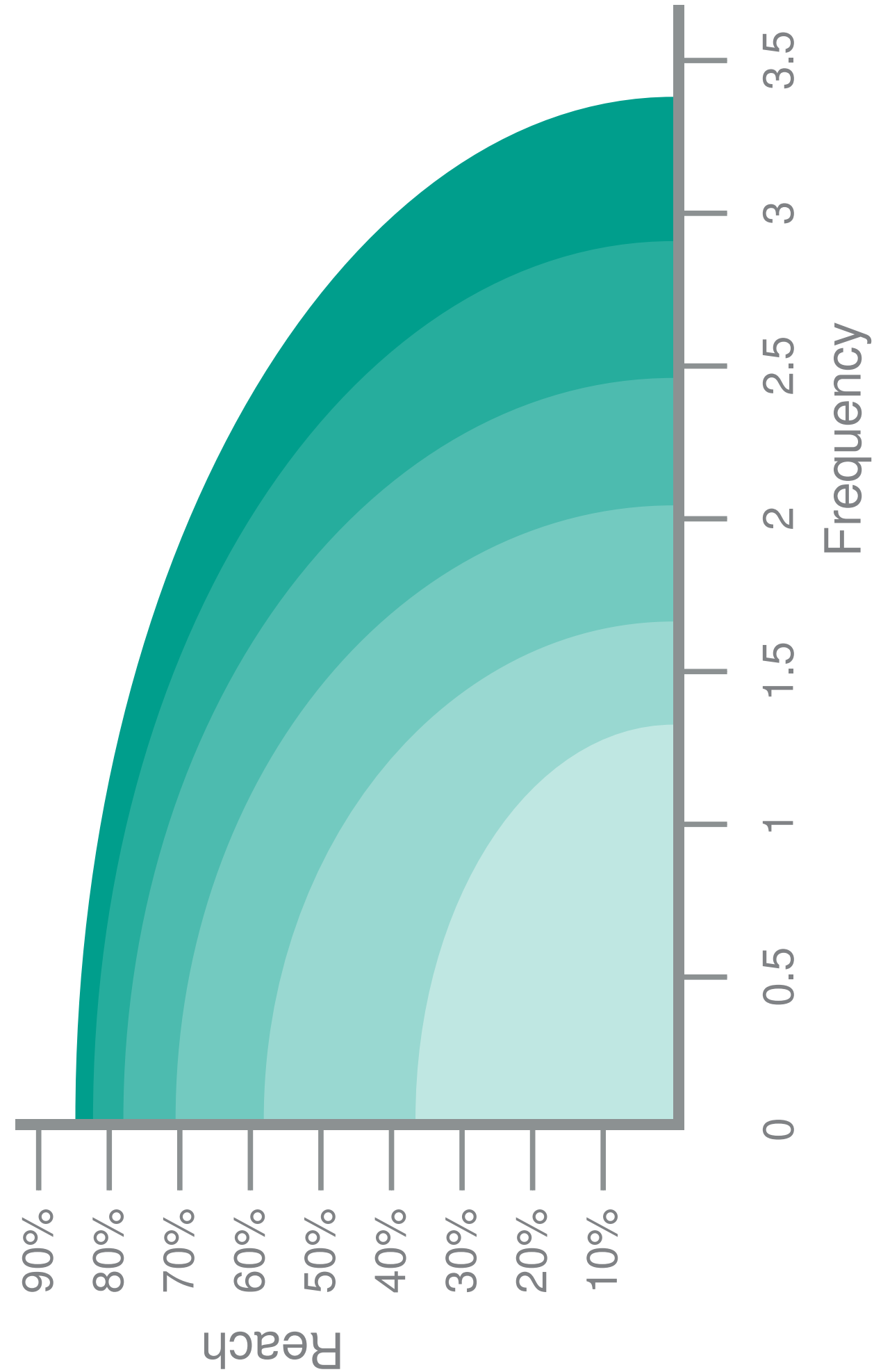


\*This list represents the types of sites on which your ad will run. This list may change over time based on inventory fluctuations and performance results.

# Digital Reach & Frequency

By estimating how many people will see your ads and how many times they will see them over the length of your schedule you can make strategic decisions with your marketing budget.

| MO IMP REACH %FREQ |      |       |      |
|--------------------|------|-------|------|
| 1                  | 71k  | 36.6% | 1.29 |
| 2                  | 143k | 58.1% | 1.63 |
| 3                  | 214k | 70.6% | 2.01 |
| 4                  | 286k | 78%   | 2.43 |
| 5                  | 357k | 82.3% | 2.87 |
| 6                  | 429k | 84.8% | 3.35 |



# Advertising Agreement

Spectrum Reach

## Products

DISPLAY  
Local Audience Banners on all devices  
1 location

## Budget 1

\$500 per month  
71,429 imprs/month

\$3,000 total  
428,574 total imprs

## Grand Total

\$500  
per month

\$3,000  
for 6 months

Either signature on this order form, or delivery to Charter Communications Operating, LLC (“Spectrum Reach”) of any advertisement, advertising content or other materials of or on behalf of an advertiser or agency (each, a “Client”) for distribution, shall constitute Client’s agreement to the Spectrum Reach Terms and Conditions, available at [spectrumreach.com/terms-conditions](https://spectrumreach.com/terms-conditions) and incorporated into this order form as if fully set forth herein, as applicable and as may be amended from time to time.

Start Date: \_\_\_\_\_

Print Client/Agency Name: City of Brookings

End Date: \_\_\_\_\_

Client/Agency Signature: \_\_\_\_\_

Proposal ID: 1525712240175995337

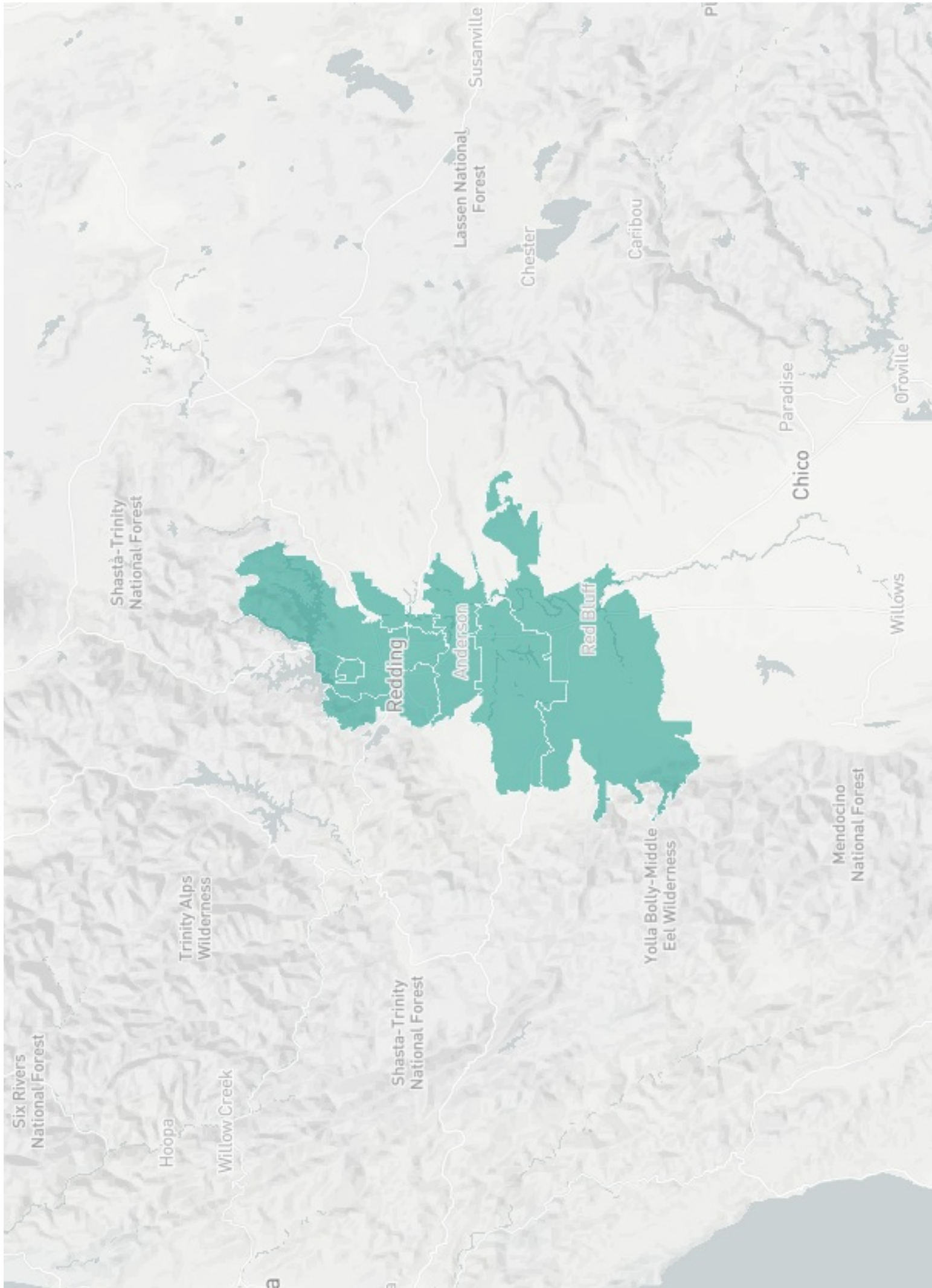
Spectrum Reach Signature: \_\_\_\_\_

Presented to City of Brookings



# Geographic Targeting Per Location

Palo Cedro CDP, California, Zone: Redding, CA [0966]



|  |                                   |  |
|--|-----------------------------------|--|
| <b>TARGET AREA</b><br>8 ZIP Codes in Shasta, Tehama Counties   | <b>POPULATION</b><br>194,780      | <b>PEOPLE / HOUSEHOLD</b><br>2.6       |
| <b>LOCAL SITES</b><br>krcrtv.com, redding.com, actionnewsnow.com, chicoer.com, appeal-democrat.com, advocate-news.com, ktvl.com, dailytidings.com, kmed.com, colfaxrecord.com, kdrv.com, mailtribune.com | <b>AVERAGE INCOME</b><br>\$62,724 | <b>AVERAGE HOME VALUE</b><br>\$220,175 |
|  | <b>MEDIAN AGE</b><br>41           | <b># OF BUSINESSES</b><br>4,526        |

# Reporting & Analytics

Spectrum Reach invests in the latest research and tools to provide advertisers with important insights into how to effectively target customers.



- ▶ **ADVANCED REPORTING METRICS**  
Access advanced campaign performance metrics 24/7.
- ▶ **BRAND LIFT MEASUREMENT**  
Quantify the true impact of display campaigns beyond the click.
- ▶ **CITY AND SITE-LEVEL TRANSPARENCY**  
Ensure advertisers reach their audience on brand-enhancing websites.

- ▶ **A/B TESTING**  
Determine the most effective means to reach a target audience.
- ▶ **GEOFENCING DATA**  
Utilize precise latitude/longitude data to maximize quality exposures and minimize waste.
- ▶ **SCREENSHOT AUTOMATION**  
Provide verification of quality ad placements in action.



# Campaign Strategy: Site List Demographic Data

appendix

| PLACEMENT                          |  | HAS KIDS |     |        |     |          |     |       |     |       |     | NO KIDS |     | HAS KIDS |     |       |  | NO KIDS |  |  |     | \$150K+   |  |            |  |         |  |
|------------------------------------|--|----------|-----|--------|-----|----------|-----|-------|-----|-------|-----|---------|-----|----------|-----|-------|--|---------|--|--|-----|-----------|--|------------|--|---------|--|
|                                    |  | MALE     |     | FEMALE |     | UNDER 18 |     | 18-24 |     | 25-34 |     | 35-44   |     | 45-54    |     | 55-64 |  | 65+     |  |  |     | \$50-100K |  | \$100-150K |  | \$150K+ |  |
| LOCAL MEDIA                        |  |          |     |        |     |          |     |       |     |       |     |         |     |          |     |       |  |         |  |  |     |           |  |            |  |         |  |
| krcrtv.com                         |  | 28%      | 72% | 1%     | 4%  | 12%      | 22% | 23%   | 15% | 20%   | 28% | 72%     | 40% | 28%      | 20% | 13%   |  |         |  |  | 28% | 20%       |  |            |  |         |  |
| redding.com                        |  | 47%      | 53% | 1%     | 2%  | 22%      | 23% | 20%   | 18% | 12%   | 50% | 50%     | 30% | 32%      | 23% | 15%   |  |         |  |  | 32% | 23%       |  |            |  |         |  |
| actionnewsnow.com                  |  | 36%      | 64% | 1%     | 4%  | 9%       | 29% | 21%   | 18% | 18%   | 39% | 61%     | 34% | 42%      | 14% | 9%    |  |         |  |  | 42% | 14%       |  |            |  |         |  |
| chicoer.com                        |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| appeal-democrat.com                |  | 29%      | 71% | 2%     | 9%  | 23%      | 12% | 25%   | 8%  | 18%   | 41% | 59%     | 48% | 30%      | 13% | 9%    |  |         |  |  | 30% | 13%       |  |            |  |         |  |
| advocate-news.com                  |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| ktvl.com                           |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| dailytidings.com                   |  | 57%      | 43% | 2%     | 7%  | 14%      | 16% | 18%   | 17% | 23%   | 34% | 66%     | 51% | 24%      | 15% | 10%   |  |         |  |  | 24% | 15%       |  |            |  |         |  |
| kmed.com                           |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| colfaxrecord.com                   |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| HOTELS & ACCOMMODATIONS            |  |          |     |        |     |          |     |       |     |       |     |         |     |          |     |       |  |         |  |  |     |           |  |            |  |         |  |
| hotels.com                         |  | 44%      | 56% | 2%     | 6%  | 18%      | 20% | 25%   | 18% | 11%   | 44% | 56%     | 30% | 30%      | 23% | 17%   |  |         |  |  | 30% | 23%       |  |            |  |         |  |
| bedandbreakfast.com                |  | 38%      | 62% | 2%     | 4%  | 14%      | 18% | 27%   | 18% | 17%   | 38% | 62%     | 28% | 33%      | 23% | 16%   |  |         |  |  | 33% | 23%       |  |            |  |         |  |
| hotelclub.com                      |  | 52%      | 48% | 3%     | 9%  | 23%      | 20% | 24%   | 11% | 10%   | 44% | 56%     | 37% | 32%      | 26% | 5%    |  |         |  |  | 32% | 26%       |  |            |  |         |  |
| hotelcoupons.com                   |  | 23%      | 77% | 4%     | 2%  | 9%       | 37% | 16%   | 14% | 18%   | 45% | 55%     | 51% | 10%      | 12% | 26%   |  |         |  |  | 10% | 12%       |  |            |  |         |  |
| hoteldiscounts.com                 |  | 49%      | 51% | 3%     | 2%  | 15%      | 23% | 19%   | 22% | 15%   | 36% | 64%     | 37% | 22%      | 17% | 25%   |  |         |  |  | 22% | 17%       |  |            |  |         |  |
| TRAVEL AGENCIES & SERVICES         |  |          |     |        |     |          |     |       |     |       |     |         |     |          |     |       |  |         |  |  |     |           |  |            |  |         |  |
| travelindustrywire.com             |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| tripcook.com                       |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| tours.com                          |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| travel-agents.regionaldirectory.us |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| TRAVEL GUIDES & TRAVELOGUES        |  |          |     |        |     |          |     |       |     |       |     |         |     |          |     |       |  |         |  |  |     |           |  |            |  |         |  |
| bookingbuddy.com                   |  | 42%      | 58% | 2%     | 5%  | 15%      | 18% | 23%   | 21% | 16%   | 40% | 60%     | 33% | 30%      | 22% | 15%   |  |         |  |  | 30% | 22%       |  |            |  |         |  |
| everytrail.com                     |  | 42%      | 58% | 3%     | 12% | 28%      | 15% | 15%   | 19% | 7%    | 37% | 63%     | 26% | 24%      | 33% | 17%   |  |         |  |  | 24% | 33%       |  |            |  |         |  |
| budgettravel.com                   |  | 41%      | 59% | 3%     | 9%  | 25%      | 21% | 13%   | 12% | 18%   | 47% | 53%     | 23% | 29%      | 33% | 15%   |  |         |  |  | 29% | 33%       |  |            |  |         |  |
| smartertravel.com                  |  | 38%      | 62% | 1%     | 4%  | 10%      | 13% | 21%   | 28% | 24%   | 33% | 67%     | 25% | 30%      | 29% | 17%   |  |         |  |  | 30% | 29%       |  |            |  |         |  |
| orbitz.com                         |  | 46%      | 54% | 1%     | 6%  | 19%      | 19% | 24%   | 17% | 12%   | 43% | 57%     | 28% | 30%      | 24% | 18%   |  |         |  |  | 30% | 24%       |  |            |  |         |  |
| travelandleisure.com               |  | 47%      | 53% | 2%     | 6%  | 17%      | 13% | 19%   | 22% | 23%   | 35% | 65%     | 27% | 29%      | 31% | 14%   |  |         |  |  | 29% | 31%       |  |            |  |         |  |
| travelandresortsnews.com           |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |
| yahoo.com/travel                   |  | 49%      | 51% | 19%    | 11% | 15%      | 16% | 15%   | 13% | 11%   | 50% | 50%     | 40% | 27%      | 18% | 15%   |  |         |  |  | 27% | 18%       |  |            |  |         |  |

# Campaign Strategy: Site List Demographic Data

appendix

| PLACEMENT                          | GENDER |        |          |       |       |       |       |       |     |         | AGE      |         |           |            |         | HAS KIDS |  |  |  | INCOME |  |  |
|------------------------------------|--------|--------|----------|-------|-------|-------|-------|-------|-----|---------|----------|---------|-----------|------------|---------|----------|--|--|--|--------|--|--|
|                                    | MALE   | FEMALE | UNDER 18 | 18-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65+ | NO KIDS | HAS KIDS | \$0-50K | \$50-100K | \$100-150K | \$150K+ |          |  |  |  |        |  |  |
| TRAVEL                             |        |        |          |       |       |       |       |       |     |         |          |         |           |            |         |          |  |  |  |        |  |  |
| expedia.com                        | 45%    | 55%    | 2%       | 8%    | 18%   | 19%   | 24%   | 18%   | 11% | 44%     | 56%      | 29%     | 30%       | 23%        | 19%     |          |  |  |  |        |  |  |
| priceline.com                      | 46%    | 54%    | 2%       | 7%    | 22%   | 20%   | 23%   | 17%   | 10% | 42%     | 58%      | 30%     | 30%       | 23%        | 17%     |          |  |  |  |        |  |  |
| kayak.com                          | 50%    | 50%    | 2%       | 9%    | 25%   | 20%   | 21%   | 15%   | 9%  | 41%     | 59%      | 27%     | 29%       | 25%        | 19%     |          |  |  |  |        |  |  |
| hotelplanner.com                   | 35%    | 65%    | 2%       | 6%    | 17%   | 21%   | 22%   | 21%   | 10% | 52%     | 48%      | 29%     | 29%       | 25%        | 16%     |          |  |  |  |        |  |  |
| taxifarefinder.com                 | 44%    | 56%    | 1%       | 9%    | 24%   | 27%   | 17%   | 14%   | 8%  | 49%     | 51%      | 21%     | 31%       | 30%        | 18%     |          |  |  |  |        |  |  |
| taxi-services.regionaldirectory.us | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| auto-rental.regionaldirectory.us   | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| travel.com                         | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| taxidir.info                       | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| worldtaximeter.com                 | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| HIKING & CAMPING                   |        |        |          |       |       |       |       |       |     |         |          |         |           |            |         |          |  |  |  |        |  |  |
| sportsmansguide.com                | 68%    | 32%    | 3%       | 5%    | 10%   | 15%   | 22%   | 27%   | 18% | 40%     | 60%      | 38%     | 29%       | 20%        | 12%     |          |  |  |  |        |  |  |
| fieldandstream.com                 | 66%    | 34%    | 2%       | 9%    | 16%   | 15%   | 22%   | 19%   | 17% | 38%     | 62%      | 36%     | 32%       | 17%        | 16%     |          |  |  |  |        |  |  |
| outdoorbasecamp.com                | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| outdoorchannel.com                 | 64%    | 36%    | 3%       | 8%    | 7%    | 11%   | 23%   | 25%   | 22% | 45%     | 55%      | 39%     | 30%       | 15%        | 16%     |          |  |  |  |        |  |  |
| theoutdoorlodge.com                | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| backcountry.com                    | 54%    | 46%    | 5%       | 11%   | 17%   | 21%   | 23%   | 15%   | 8%  | 45%     | 55%      | 29%     | 26%       | 23%        | 22%     |          |  |  |  |        |  |  |
| outsideonline.com                  | 62%    | 38%    | 1%       | 8%    | 16%   | 25%   | 21%   | 16%   | 11% | 35%     | 65%      | 28%     | 28%       | 26%        | 19%     |          |  |  |  |        |  |  |
| backpacker.com                     | 53%    | 47%    | 6%       | 11%   | 25%   | 19%   | 21%   | 12%   | 6%  | 48%     | 52%      | 28%     | 27%       | 22%        | 24%     |          |  |  |  |        |  |  |
| trails.com                         | 58%    | 42%    | 3%       | 7%    | 18%   | 20%   | 20%   | 20%   | 12% | 37%     | 63%      | 30%     | 31%       | 23%        | 16%     |          |  |  |  |        |  |  |
| stateparks.com                     | 57%    | 43%    | 1%       | 3%    | 10%   | 19%   | 20%   | 32%   | 14% | 57%     | 43%      | 33%     | 30%       | 21%        | 16%     |          |  |  |  |        |  |  |
| FISHING                            |        |        |          |       |       |       |       |       |     |         |          |         |           |            |         |          |  |  |  |        |  |  |
| basspro.com                        | 65%    | 35%    | 3%       | 6%    | 15%   | 20%   | 22%   | 20%   | 15% | 44%     | 56%      | 32%     | 26%       | 25%        | 17%     |          |  |  |  |        |  |  |
| outdoorlife.com                    | 66%    | 34%    | 7%       | 9%    | 19%   | 12%   | 19%   | 20%   | 14% | 43%     | 57%      | 34%     | 28%       | 21%        | 17%     |          |  |  |  |        |  |  |
| hookandbullet.com                  | 63%    | 37%    | 1%       | 6%    | 13%   | 21%   | 20%   | 20%   | 19% | 33%     | 67%      | 29%     | 36%       | 21%        | 15%     |          |  |  |  |        |  |  |
| lake-link.com                      | 72%    | 28%    | 2%       | 4%    | 27%   | 17%   | 14%   | 21%   | 15% | 44%     | 56%      | 24%     | 50%       | 15%        | 11%     |          |  |  |  |        |  |  |
| gameandfishmag.com                 | 72%    | 28%    | 0%       | 5%    | 16%   | 16%   | 27%   | 22%   | 13% | 43%     | 57%      | 28%     | 37%       | 26%        | 9%      |          |  |  |  |        |  |  |
| fishingflyshop.com                 | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| anglerweb.com                      | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |
| fishingnetwork.net                 | 49%    | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |          |  |  |  |        |  |  |

# Campaign Strategy: Site List Demographic Data

appendix

| PLACEMENT                 |  | HAS KIDS |        |          |       |       |       |       |       |     |         |          |         |           |            |         |  |
|---------------------------|--|----------|--------|----------|-------|-------|-------|-------|-------|-----|---------|----------|---------|-----------|------------|---------|--|
|                           |  | MALE     | FEMALE | UNDER 18 | 18-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65+ | NO KIDS | HAS KIDS | \$0-50K | \$50-100K | \$100-150K | \$150K+ |  |
| BOATING                   |  |          |        |          |       |       |       |       |       |     |         |          |         |           |            |         |  |
| thehulltruth.com          |  | 78%      | 22%    | 2%       | 5%    | 12%   | 14%   | 28%   | 24%   | 15% | 30%     | 70%      | 18%     | 30%       | 30%        | 23%     |  |
| boatingmag.com            |  | 72%      | 28%    | 3%       | 7%    | 12%   | 14%   | 15%   | 31%   | 18% | 30%     | 70%      | 22%     | 31%       | 34%        | 12%     |  |
| jetski.com                |  | 49%      | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |  |
| swimmingworldmagazine.com |  | 74%      | 26%    | 2%       | 7%    | 25%   | 3%    | 22%   | 33%   | 7%  | 33%     | 67%      | 13%     | 19%       | 20%        | 48%     |  |
| sailmagazine.com          |  | 49%      | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |  |
| yachtingmagazine.com      |  | 49%      | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |  |
| likesailing.com           |  | 49%      | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |  |
| reelboating.com           |  | 49%      | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |  |
| sailingworld.com          |  | 49%      | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |  |
| dailyboater.com           |  | 49%      | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |  |
| NEWS                      |  |          |        |          |       |       |       |       |       |     |         |          |         |           |            |         |  |
| msn.com                   |  | 50%      | 50%    | 8%       | 10%   | 15%   | 17%   | 19%   | 17%   | 14% | 44%     | 56%      | 39%     | 28%       | 19%        | 14%     |  |
| cnn.com                   |  | 56%      | 44%    | 4%       | 9%    | 16%   | 18%   | 21%   | 18%   | 14% | 40%     | 60%      | 32%     | 28%       | 23%        | 17%     |  |
| usatoday.com              |  | 57%      | 43%    | 2%       | 7%    | 15%   | 16%   | 21%   | 20%   | 18% | 38%     | 62%      | 30%     | 30%       | 24%        | 15%     |  |
| huffingtonpost.com        |  | 51%      | 49%    | 3%       | 7%    | 15%   | 16%   | 21%   | 21%   | 18% | 38%     | 62%      | 33%     | 30%       | 23%        | 15%     |  |
| foxnews.com               |  | 56%      | 44%    | 2%       | 5%    | 11%   | 15%   | 22%   | 23%   | 22% | 36%     | 64%      | 32%     | 30%       | 23%        | 15%     |  |
| nbcnews.com               |  | 51%      | 49%    | 2%       | 6%    | 13%   | 15%   | 21%   | 22%   | 22% | 37%     | 63%      | 31%     | 30%       | 24%        | 15%     |  |
| cbsnews.com               |  | 53%      | 47%    | 2%       | 7%    | 15%   | 16%   | 21%   | 21%   | 18% | 39%     | 61%      | 33%     | 29%       | 24%        | 14%     |  |
| usnews.com                |  | 47%      | 53%    | 4%       | 11%   | 19%   | 17%   | 20%   | 17%   | 12% | 44%     | 56%      | 29%     | 29%       | 25%        | 18%     |  |
| washingtonpost.com        |  | 58%      | 42%    | 2%       | 7%    | 16%   | 16%   | 20%   | 20%   | 18% | 38%     | 62%      | 29%     | 29%       | 26%        | 16%     |  |
| forbes.com                |  | 58%      | 42%    | 4%       | 11%   | 19%   | 17%   | 19%   | 16%   | 14% | 41%     | 59%      | 29%     | 29%       | 24%        | 18%     |  |
| REFERENCE                 |  |          |        |          |       |       |       |       |       |     |         |          |         |           |            |         |  |
| ask.com                   |  | 46%      | 54%    | 9%       | 7%    | 11%   | 15%   | 19%   | 20%   | 20% | 46%     | 54%      | 43%     | 28%       | 17%        | 13%     |  |
| mapquest.com              |  | 45%      | 55%    | 2%       | 5%    | 12%   | 16%   | 24%   | 23%   | 19% | 39%     | 61%      | 34%     | 31%       | 21%        | 14%     |  |
| ehow.com                  |  | 47%      | 53%    | 4%       | 9%    | 15%   | 17%   | 21%   | 20%   | 14% | 42%     | 58%      | 35%     | 29%       | 21%        | 14%     |  |
| whitepages.com            |  | 44%      | 56%    | 2%       | 5%    | 13%   | 17%   | 22%   | 22%   | 19% | 40%     | 60%      | 35%     | 29%       | 21%        | 15%     |  |
| dictionary.com            |  | 48%      | 52%    | 9%       | 14%   | 19%   | 18%   | 19%   | 12%   | 8%  | 51%     | 49%      | 31%     | 28%       | 24%        | 17%     |  |

# Campaign Strategy: Site List Demographic Data

appendix

| PLACEMENT               | MALE |     | FEMALE |     | UNDER 18 | 18-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65+ | NO KIDS | HAS KIDS | \$0-50K | \$50-100K | \$100-150K | \$150K+ |
|-------------------------|------|-----|--------|-----|----------|-------|-------|-------|-------|-------|-----|---------|----------|---------|-----------|------------|---------|
|                         |      |     |        |     |          |       |       |       |       |       |     |         |          |         |           |            |         |
| WEATHER                 |      |     |        |     |          |       |       |       |       |       |     |         |          |         |           |            |         |
| weather.com             | 51%  | 49% | 3%     | 7%  | 17%      | 17%   | 17%   | 17%   | 22%   | 19%   | 15% | 39%     | 61%      | 31%     | 30%       | 23%        | 16%     |
| accuweather.com         | 52%  | 48% | 3%     | 6%  | 14%      | 15%   | 15%   | 15%   | 22%   | 21%   | 18% | 40%     | 60%      | 34%     | 30%       | 22%        | 14%     |
| weatherbug.com          | 52%  | 48% | 12%    | 12% | 16%      | 16%   | 16%   | 16%   | 17%   | 14%   | 13% | 49%     | 51%      | 48%     | 23%       | 14%        | 15%     |
| intellicast.com         | 64%  | 36% | 2%     | 4%  | 5%       | 14%   | 14%   | 14%   | 26%   | 26%   | 22% | 36%     | 64%      | 29%     | 30%       | 22%        | 18%     |
| weathercentral.com      | 49%  | 51% | 19%    | 11% | 15%      | 16%   | 16%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| viewweather.com         | 49%  | 51% | 19%    | 11% | 15%      | 16%   | 16%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| ONLINE COMMUNITIES      |      |     |        |     |          |       |       |       |       |       |     |         |          |         |           |            |         |
| flickr.com              | 52%  | 48% | 4%     | 10% | 16%      | 16%   | 16%   | 16%   | 21%   | 19%   | 15% | 40%     | 60%      | 32%     | 30%       | 22%        | 17%     |
| photobucket.com         | 58%  | 42% | 7%     | 13% | 17%      | 16%   | 16%   | 16%   | 19%   | 17%   | 12% | 44%     | 56%      | 37%     | 27%       | 20%        | 16%     |
| blogspot.com            | 49%  | 51% | 19%    | 11% | 15%      | 16%   | 16%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| ARTS & ENTERTAINMENT    |      |     |        |     |          |       |       |       |       |       |     |         |          |         |           |            |         |
| ticketmaster.com        | 46%  | 54% | 5%     | 12% | 20%      | 18%   | 18%   | 18%   | 23%   | 15%   | 7%  | 47%     | 53%      | 28%     | 29%       | 24%        | 19%     |
| people.com              | 35%  | 65% | 2%     | 7%  | 16%      | 17%   | 17%   | 17%   | 23%   | 19%   | 15% | 41%     | 59%      | 32%     | 30%       | 23%        | 15%     |
| eonline.com             | 45%  | 55% | 2%     | 7%  | 14%      | 17%   | 17%   | 17%   | 22%   | 22%   | 17% | 39%     | 61%      | 32%     | 31%       | 23%        | 13%     |
| fandango.com            | 48%  | 52% | 6%     | 11% | 20%      | 17%   | 17%   | 17%   | 19%   | 14%   | 12% | 48%     | 52%      | 31%     | 31%       | 22%        | 17%     |
| usmagazine.com          | 37%  | 63% | 2%     | 7%  | 16%      | 17%   | 17%   | 17%   | 21%   | 21%   | 16% | 40%     | 60%      | 33%     | 30%       | 23%        | 14%     |
| ew.com                  | 50%  | 50% | 3%     | 13% | 20%      | 17%   | 17%   | 17%   | 20%   | 16%   | 10% | 41%     | 59%      | 32%     | 27%       | 24%        | 17%     |
| stubbyhub.com           | 55%  | 45% | 4%     | 12% | 21%      | 19%   | 19%   | 19%   | 23%   | 13%   | 9%  | 45%     | 55%      | 26%     | 28%       | 25%        | 21%     |
| rollingstone.com        | 59%  | 41% | 3%     | 11% | 20%      | 16%   | 16%   | 16%   | 21%   | 18%   | 11% | 40%     | 60%      | 31%     | 30%       | 23%        | 16%     |
| billboard.com           | 49%  | 51% | 7%     | 18% | 22%      | 16%   | 16%   | 16%   | 17%   | 12%   | 7%  | 48%     | 52%      | 32%     | 30%       | 22%        | 16%     |
| eventful.com            | 43%  | 57% | 4%     | 9%  | 16%      | 17%   | 17%   | 17%   | 21%   | 20%   | 13% | 44%     | 56%      | 33%     | 30%       | 22%        | 14%     |
| BOOKS & LITERATURE      |      |     |        |     |          |       |       |       |       |       |     |         |          |         |           |            |         |
| goodreads.com           | 41%  | 59% | 8%     | 14% | 21%      | 15%   | 15%   | 15%   | 17%   | 14%   | 10% | 48%     | 52%      | 31%     | 29%       | 23%        | 18%     |
| time.com                | 53%  | 47% | 4%     | 11% | 20%      | 16%   | 16%   | 16%   | 19%   | 16%   | 14% | 41%     | 59%      | 29%     | 28%       | 26%        | 17%     |
| bartleby.com            | 48%  | 52% | 11%    | 11% | 16%      | 15%   | 15%   | 15%   | 18%   | 16%   | 13% | 39%     | 61%      | 30%     | 30%       | 22%        | 18%     |
| george-orwell.org       | 49%  | 51% | 19%    | 11% | 15%      | 16%   | 16%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| canterburytales.org     | 49%  | 51% | 19%    | 11% | 15%      | 16%   | 16%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| classicreader.com       | 49%  | 51% | 19%    | 11% | 15%      | 16%   | 16%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| cummingsstudyguides.net | 31%  | 69% | 21%    | 28% | 12%      | 13%   | 13%   | 13%   | 8%    | 1%    | 17% | 70%     | 30%      | 51%     | 20%       | 11%        | 19%     |
| theatlantic.com         | 56%  | 44% | 5%     | 12% | 20%      | 15%   | 15%   | 15%   | 17%   | 18%   | 13% | 41%     | 59%      | 27%     | 28%       | 27%        | 18%     |

# Campaign Strategy: Site List Demographic Data

appendix

| PLACEMENT           | PALO CEDRO CDP, CALIFORNIA, ZONE: REDDING, CA [0966] |        |          |       |       |       |       |       |     |         |          |         |           |            |         |
|---------------------|--|--------|----------|-------|-------|-------|-------|-------|-----|---------|----------|---------|-----------|------------|---------|
|                     | MALE   | FEMALE | UNDER 18 | 18-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65+ | NO KIDS | HAS KIDS | \$0-50K | \$50-100K | \$100-150K | \$150K+ |
| krcrtv.com          | 28%  | 72%    | 1%       | 4%    | 12%   | 22%   | 23%   | 15%   | 20% | 28%     | 72%      | 40%     | 28%       | 20%        | 13%     |
| redding.com         | 47%  | 53%    | 1%       | 2%    | 22%   | 23%   | 20%   | 18%   | 12% | 50%     | 50%      | 30%     | 32%       | 23%        | 15%     |
| actionnewsnow.com   | 36%  | 64%    | 1%       | 4%    | 9%    | 29%   | 21%   | 18%   | 18% | 39%     | 61%      | 34%     | 42%       | 14%        | 9%      |
| chicoer.com         | 49%  | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| appeal-democrat.com | 29%  | 71%    | 2%       | 9%    | 23%   | 12%   | 25%   | 8%    | 18% | 41%     | 59%      | 48%     | 30%       | 13%        | 9%      |
| advocate-news.com   | 49%  | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| ktvl.com            | 49%  | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| dailytidings.com    | 57%  | 43%    | 2%       | 7%    | 14%   | 16%   | 18%   | 17%   | 23% | 34%     | 66%      | 51%     | 24%       | 15%        | 10%     |
| kmed.com            | 49%  | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| colfaxrecord.com    | 49%  | 51%    | 19%      | 11%   | 15%   | 16%   | 15%   | 13%   | 11% | 50%     | 50%      | 40%     | 27%       | 18%        | 15%     |
| kdrv.com            | 53%  | 47%    | 1%       | 2%    | 11%   | 10%   | 24%   | 42%   | 7%  | 33%     | 67%      | 31%     | 34%       | 21%        | 14%     |
| mailtribune.com     | 48%  | 52%    | 2%       | 6%    | 10%   | 15%   | 14%   | 32%   | 15% | 50%     | 50%      | 46%     | 28%       | 15%        | 10%     |



## City of Brookings Digital Summary

**Campaign Type:** Display

**Campaign Run Dates:** 1/1/18 – 5/30/18

**Display**

**638,937**

IMPRESSIONS

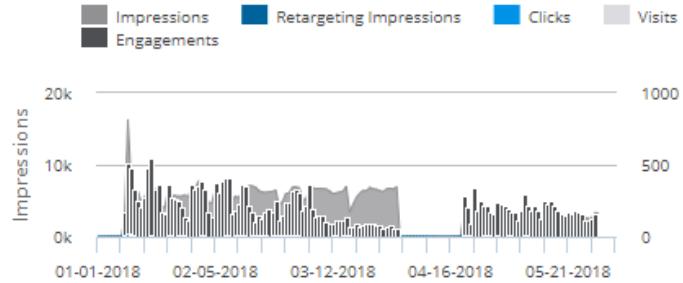
**25,170**

ENGAGEMENTS

**521**

SITE VISITS

### DIGITAL IMPRESSIONS AND ENGAGEMENTS

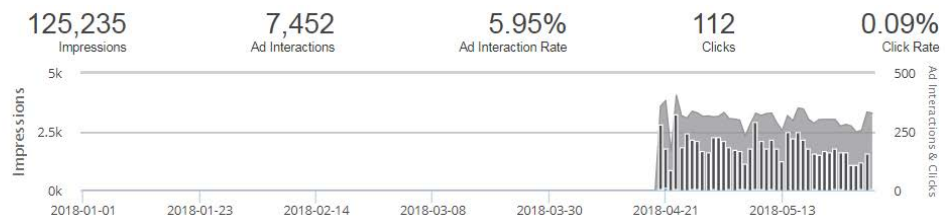


### Cities:

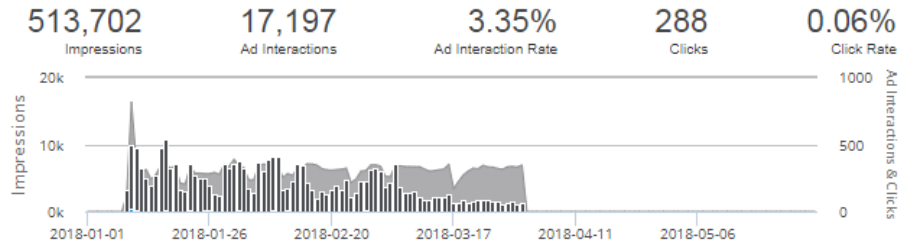
#### GEOGRAPHIC PERFORMANCE

| Place       | Region     | Total Imprs | Display Imprs | RTG Display Imprs | Geofence Imprs | Geo Recency Imprs | Clicks | Click Rate | View Throughs | View Through Rate |
|-------------|------------|-------------|---------------|-------------------|----------------|-------------------|--------|------------|---------------|-------------------|
| Redding     | California | 477,013     | 466,763       | 10,250            | 0              | 0                 | 295    | 0.06%      | 108           | 0.02%             |
| Tehama      | California | 66,378      | 63,074        | 3,304             | 0              | 0                 | 45     | 0.07%      | 1             | 0.00%             |
| Anderson    | California | 43,163      | 43,040        | 123               | 0              | 0                 | 22     | 0.05%      | 0             | 0.00%             |
| Cottonwood  | California | 25,232      | 24,505        | 727               | 0              | 0                 | 18     | 0.07%      | 0             | 0.00%             |
| Palo Cedro  | California | 17,184      | 16,683        | 501               | 0              | 0                 | 15     | 0.09%      | 0             | 0.00%             |
| Lake Shasta | California | 9,853       | 9,425         | 428               | 0              | 0                 | 5      | 0.05%      | 0             | 0.00%             |
| Red Bluff   | California | 114         | 114           | 0                 | 0              | 0                 | 0      | 0.00%      | 0             | 0.00%             |
| Grants Pass | Oregon     | 0           | 0             | 0                 | 0              | 0                 | 0      | 0.00%      | 11            | 0.00%             |
| Medford     | Oregon     | 0           | 0             | 0                 | 0              | 0                 | 0      | 0.00%      | 1             | 0.00%             |

### Creative:







### Campaign Performance

| Impressions Served | Total Clicks | CTR % | Benchmark CTR % |
|--------------------|--------------|-------|-----------------|
| 638,937            | 400          | .06%  | .05%            |

| Retargeting Impressions Served | Retargeting Clicks | Retargeting CTR % | Benchmark Retargeting CTR % |
|--------------------------------|--------------------|-------------------|-----------------------------|
| 15,333                         | 13                 | .08%              | .05%                        |

| Total Interactions | Interaction Rate | Benchmark CTR % |
|--------------------|------------------|-----------------|
| 24,649             | 3.86%            | 1.20%           |

| Total View Throughs | View Through Rate | Benchmark View Through Rate % |
|---------------------|-------------------|-------------------------------|
| 121                 | .02%              | .05%                          |

| Engagements | Engagement Rate | Engagement Rate Benchmark Rate % | Hovers | Video Plays |
|-------------|-----------------|----------------------------------|--------|-------------|
| 25,170      | 3.94%           | 1.1%                             | 19,968 | 4,681       |

### Campaign Type: Pre Roll

Campaign Run Dates: 1/1/18 – 5/30/18

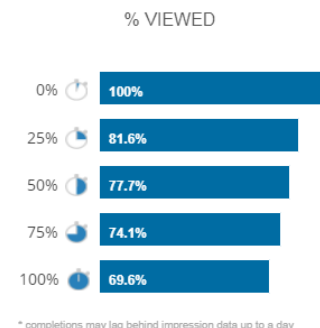
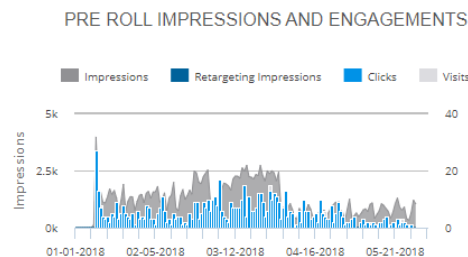
Had a 69.6% completion rate (benchmark completion rate is 70.56%)

Pre Roll ⓘ

185,884  
IMPRESSIONS

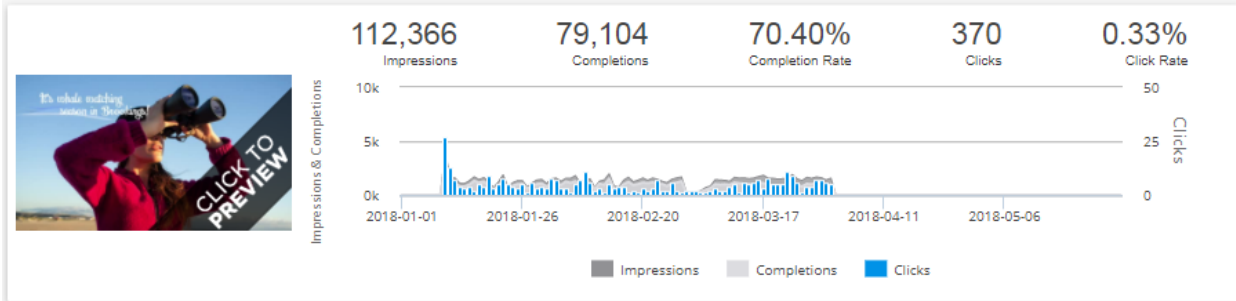
69.6%  
COMPLETION RATE

726  
SITE VISITS

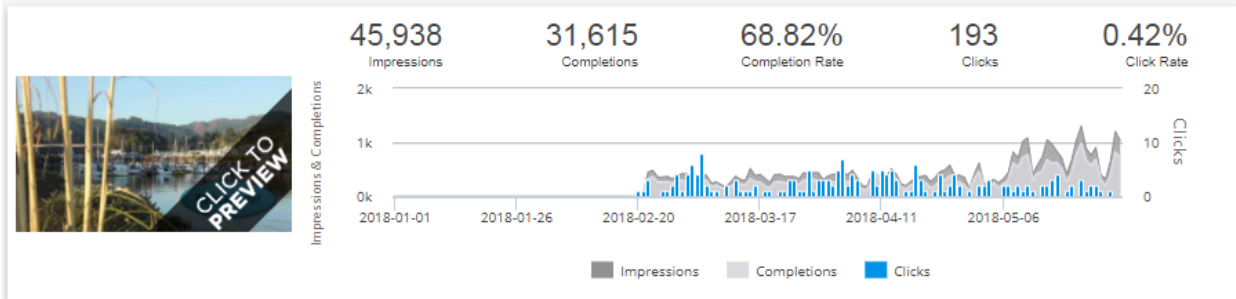


Creative:

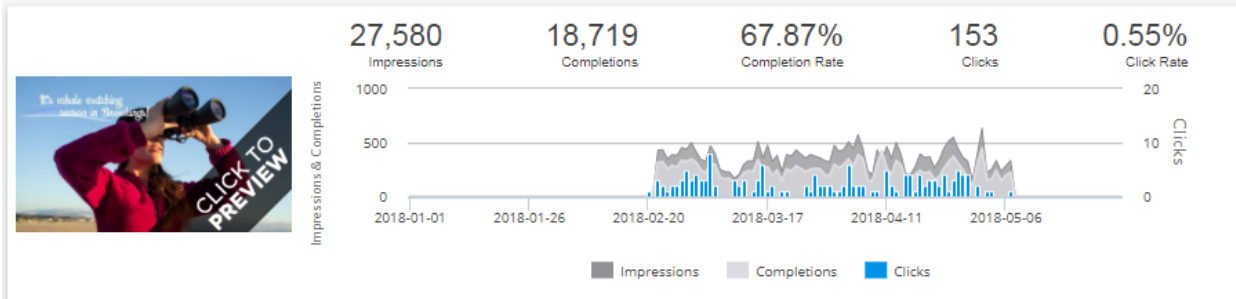
#### BROOKINGS\_WHALE\_WATCHING



#### BROOKINGS\_FINDYOUROWNBEACH



#### BROOKINGS\_WHALE\_WATCHING2

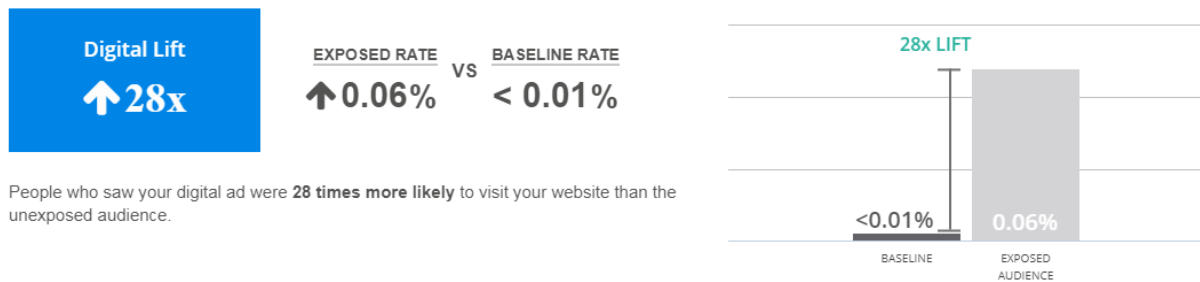


| Impressions Served | Total Clicks | CTR % | Benchmark CTR % |
|--------------------|--------------|-------|-----------------|
| 185,884            | 716          | .39%  | .10%            |

| Retargeting Impressions Served | Retargeting Clicks | Retargeting CTR % | Benchmark Retargeting CTR % |
|--------------------------------|--------------------|-------------------|-----------------------------|
| 463                            | 7                  | 1.51%             | .35%                        |

| View Throughs | View Through CTR % | Benchmark View Through CTR % |
|---------------|--------------------|------------------------------|
| 10            | .01%               | .02%                         |

Digital Lift:



#### Observations, Comments and Recommendations:

The City of Brookings' digital display campaign continues to perform strongly as it exceeds the industry benchmarks for the CTR, retargeting, ad interaction, and engagement rates through-out the campaign. The pre-roll campaign well exceeded the industry benchmark for the CTR and retargeting rates while just about meeting the industry benchmark for the 100% video completion rate.

The City of Brookings website saw an increase in digital lift from 26x in January 2018 to 28x by May 2018. This means that people who saw the City of Brookings digital ads were 28 times more likely to visit their website compared to people who were not exposed to their digital campaign.

The cities that performed the strongest include Redding, Tehama, Cottonwood, and Palo Cedro.


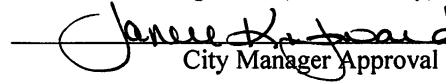
Creative insights: In the digital display campaign, the *Find Your Beach* display creative ad interaction and CTR rates exceeded the *Whale Watching* creative. It is recommended to conduct A/B testing with creative. B creative could move call-to-action to beginning and remain static throughout animation. Move video to beginning of animation to engage audience. Regarding the pre-roll creative, it is recommended to keep the call-to-action static in a small portion of the pre-roll ad (such as in the top right hand corner, "Visit Brookings!")

# CITY OF BROOKINGS

## COUNCIL AGENDA REPORT

Meeting Date: July 23, 2018

Originating Dept: City Recorder

  
Signature (submitted by)  
  
City Manager Approval

---

Subject:

Pistol River Wave Bash Event Evaluation

Recommended Motion:

Motion to accept the Pistol River Wave Bash Event Evaluation report.

Financial Impact:

Funding was already allocated for this project.

Background/Discussion:

At the February 26, 2018 City Council meeting, Council authorized a grant to the Pistol River Wave Bash event organizers in the amount of \$2,000 in Transient Occupancy Tax (TOT) funding for an event promotional video.

The event organizers have provided an event evaluation report to the Tourism Promotion Advisory Committee.

The organizers estimate that approximately 200 people attended the event. They estimate 150 of those were from outside the area, including participants from 12 different countries.

Attachment(s):

- a. Event Evaluation



# City of Brookings

898 Elk Drive, Brookings, OR 97415

(541) 469-1102 Fax (541) 469-3650

## Tourism Promotion Special Event Program Project Evaluation Report Form

*Within three (3) months of completing the event, the following information must be provided and returned to Lauri in Visitor Center.*

Project Title: Pistol River Wave Bash

Completion Date: June 11, 2018

Contact Person: Samantha Bittner Wilson

Phone: (808)280-4419

Amount Awarded \$2,000

1. How was the funding used? **Photography and Videography of the event**

2. Estimate how many people have been attracted to area because of project.

Approximately how many of  
these were from outside Curry County?

**200 people estimated attendance with estimated 150 from outside Curry County.  
12 different countries were represented by the 34 windsurfers entered in the event.**

Note: Failure to submit this report to the City within the allotted time (three months from approved event completion) may eliminate your organization from future consideration for funding under this program.

Signed: \_\_\_\_\_

Dated: 6/18/2018

Organization: International Windsurfing Tour



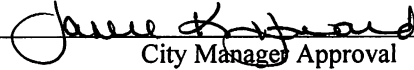
# CITY OF BROOKINGS

## COUNCIL AGENDA REPORT

Meeting Date: July 23, 2018

Originating Dept: City Manager

Signature (submitted by)

  
City Manager Approval

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Subject:

Letter of Support for Brookings Harbor Friends of Music organization to the Oregon Community Foundation.

Recommended Motion:

Motion to authorize Mayor to sign a support letter for Brookings Harbor Friends of Music for a grant application to the Oregon Community Foundation.

Financial Impact:

None.

Background/Discussion:

Brookings Harbor Friends of Music presents seven to eight concerts per year, offers scholarships, provides outreach to local students, and donates to local schools, music camps, and festivals.

Brookings Harbor Friends of Music has requested a letter of support for a grant application they are submitting to the Oregon Community Foundation.

Attachment(s):

Draft letter of support.



# City of Brookings

898 Elk Drive, Brookings, OR 97415

(541) 469-1104 Fax (541) 469-3650 TTY (800) 735-1232

[jpieper@brookings.or.us](mailto:jpieper@brookings.or.us); [www.brookings.or.us](http://www.brookings.or.us)

## JAKE PIEPER

*Mayor*

July 23, 2018

Oregon Community Foundation  
1221 SW Yamhill St  
Suite 100  
Portland, OR 97205

On behalf of the Brookings City Council, I submit this letter to express our support for Brookings Harbor Friends of Music organization as an important contributor to the culture and economy of the Southern Oregon coast.

Friends of Music presents seven to eight affordable concerts per year of world-renowned classical musicians that would not otherwise be accessible to the Southern Oregon coast community. Their concerts help attract tourists to the area who patronize local hotel and restaurants. In addition, the local community enjoys live concerts by highly acclaimed musicians from all over the world. Ticket prices are kept low in order to ensure all incomes and ages have the ability to enjoy live classical music. They also support our youth through their school outreach program, scholarship program, and free concert admission to all students under the age of 18.

Some of the ways the organization has made an impact on the South Coast of Oregon include:

- Offer a Scholarship program that distributes \$4,500 annually to gifted young musicians to help further their musical careers
- Provide an outreach program to local students via personal meetings with the concert performers  
This rare chance to meet and learn from world-class musicians is an experience many students would not otherwise have.
- Donate funds and instruments to local schools' music programs
- Donate to summer music camps for students
- Donate to local music festivals
- Donate to, promote, and participate in KCIW community public radio, podcasts, and programs

Friends of Music has been an integral part of the Southern Oregon coast culture for over 30 years. City Council supports their vision of building a performing arts center for the community and we value their important contributions to our area. We applaud their efforts and encourage their growth.

Sincerely,

Jake Pieper  
Mayor

CC: City Council

# CITY OF BROOKINGS

## COUNCIL AGENDA REPORT

Meeting Date: July 23, 2018

Originating Dept: City Manager

Signature (submitted by)

  
City Manager Approval

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### Subject:

Authorized signature(s) for Brookings Airport Purchase and Transfer Agreements

### Recommended Motion:

Motion to authorize the Mayor or the City Manager to execute three agreements involving the transfer and sale of the Brookings Airport including the "Purchase and Transfer Agreement Brookings Airport", "Brookings Airport Federal Obligations Assignment and Assumption Agreement" and the "Brookings Airport ODA COAR Grant Agreements Assignment and Assumption Agreement", and any other necessary associated documents at a cost not to exceed \$130,000..

### Financial Impact:

No additional cost over the amount approved on May 29, 2018.

### Background/Discussion:

On May 29, 2018, the City Council unanimously approved the Mayor to execute three agreements involving the transfer and sale of the Brookings Airport, and any other necessary associated documents.

The airport purchase was originally scheduled to close on or before June 27, 2018. It was later changed to July 12, 2018, and most recently changed to July 26, 2018. Mayor Pieper is out of town on July 26, 2018. I am requesting that Council authorize the Mayor or City Manager to sign these documents to provide flexibility. The closing date could change again. However, this authorization would allow either to sign, in the case that the other is not available.

# City of Brookings

## CITY COUNCIL MEETING MINUTES

City Hall Council Chambers, 898 Elk Drive, Brookings, OR 97415

Monday, July 9, 2018

### **Call to Order**

Mayor Pieper called the meeting to order at 7:00 PM.

### **Roll Call**

Council present: Mayor Jake Pieper, Councilors Bill Hamilton, Brent Hodges, Ron Hedenskog, and Dennis Triglia present; a quorum present.

Staff present: City Manager Janell Howard, City Attorney Martha Rice, Public Works & Development Director Tony Baron, and City Recorder Teri Davis.

Media Present: No media present

Others Present: Nine audience members.

### **Ceremonies/Appointments**

*Reappoint Skip Watwood to TPAC*

**Councilor Hedenskog moved, Councilor Hodges seconded and Council voted unanimously to reappoint Skip Watwood to TPAC.**

### **Oral Requests and Communications from the audience**

1. Cynthia Freeman of 19925 Whaleshead Road addressed Council requesting more information about the Environmental Impact Statement for the Lone Ranch development
2. Steven Pomerleau of 760 Old County Road addressed Council regarding a neighbor/blight issue
3. Pat Gallagher of 717 Old County Road addressed Council regarding a neighbor/blight issue

### **Staff Reports**

*Waive Picnic Table Use Fees for the Festival of Art in Stout Park*

Public Works & Development Director Baron presented the staff report.

**Councilor Triglia moved, Councilor Hamilton seconded and Council voted unanimously to waive picnic table use fees for the Pelican Bay Arts Association sponsored Festival of Art in Stout Park.**

*Elmo Williams Day Event Evaluation*

City Recorder Davis presented the staff report.

**Councilor Hedenskog moved, Councilor Triglia seconded and Council voted unanimously to accept the Elmo Williams Day Event Evaluation report.**

### *Azalea Park Ball Fields Lights*

Public Works & Development Director Baron presented the staff report.

**Councilor Triglia moved, Councilor Hedenskog seconded and Council voted unanimously to authorize the City Manager to execute a purchase agreement with Musco Lighting for ball field lighting at Azalea Park.**

### *Salmon Run Occasion Hall*

Public Works & Development Director Baron presented the staff report.

Candice Michel of 1253 Rowland Lane addressed Council requesting it reconsider other funding options.

Council discussed the merits and impacts of the expenditure.

**Councilor Hodges moved, Councilor Hedenskog seconded and Council voted 4-1, with Councilor Triglia voting 'nay', to allocate \$10,000 annually for five years from the Transient Occupancy Tax (TOT) revenues to construct an Occasion Hall at Salmon Run Golf Course.**

### *McDonald's Storm Drain Replacement Agreement*

City Manager Howard presented the staff report.

**Councilor Hodges moved, Councilor Triglia seconded and Council voted unanimously to authorize the City Manager to execute agreement for the storm drain replacement at 815 Chetco Avenue and the dedication of that storm drain to the city with deed of easement.**

### **Consent Calendar**

1. Approve Council minutes for June 25, 2018
2. Approve Compass Rose Liquor License

Councilor Triglia moved, Councilor Hedenskog seconded and Council voted unanimously to approve the Consent Calendar.

### **Remarks from Mayor and Councilors**

Councilor Hamilton commented on the great program, Safety City, underway now.

Mayor Pieper congratulated Barbara Ciaramella on the great fireworks display last week.

Mayor Pieper commented on the very interesting tour he took at the Wastewater Treatment Plant recently.



**Adjournment**

Councilor Hedenskog moved, Councilor Hamilton seconded, and Mayor Pieper adjourned the meeting at 7:53 p.m.

Respectfully submitted:

ATTESTED:

this \_\_\_\_\_ day of \_\_\_\_\_ 2018:

---

Jake Pieper, Mayor

---

Teri Davis, City Recorder

**TOURISM PROMOTION ADVISORY COMMITTEE (TPAC) MINUTES**  
**Thursday – June 14, 2018**

**CALL TO ORDER**

Meeting called to order at 4:00 PM

**1. ROLL CALL**

*Present:* Committee members Candice Michel, Sonya Billington, Dane Tippman, Bob Pieper, Barbara Ciaramella, and Skip Watwood.

Also present: Parks & Planning Manager Tony Baron and Staff Committee Liaison Teri Davis

**2. APPROVAL OF MINUTES –**

**Motion made by Dane Tippman to approve the minutes of May 10, 2018, motion seconded by Candice Michel and Committee voted; the motion carried unanimously.**

**3. Modification to Agenda**

**Motion made by Dane Tippman to add Salmon Run Occasion Hall to the agenda as Item 4d, motion seconded by Sonya Billington and Committee voted; the motion carried 5-0-1 with Candice Michel abstaining.**

**4. Public Comment** – There was no one present to address the Committee on non-agenda items.

**5. ACTION ITEMS**

**a. Spectrum Digital Campaign** – Amber Aguirre presented

- Committee discussed target market, timing and package, and budgetary constraints
- Committee requested Ms. Aguirre to provide comparisons of the Rogue Valley market versus the Redding, California market

**Motion made by Candice Michel to renew the contract at a \$3,000 level for a six-month period and a second six-month period, motion seconded by Bob Pieper; following budgetary discussion and information regarding other marketing campaigns the Committee would be considering at the July meeting, Candice Michel withdrew her motion.**

**Motion made by Dane Tippman to table the item, motion seconded by Candice Michel and Committee voted; the motion carried unanimously.**

**b. Wild Rogue Relay** – Tony Baron presented.

- Requesting \$2,000 in TOT funding

**Motion made by Dane Tippman to grant \$2,000 in TOT funds to sponsor the Wild Rogue Relay event, motion seconded by Bob Pieper and Committee voted; the motion carried unanimously.**

**c. Tank of Gas Campaign**

**Motion made by Dane Tippman to table the item, motion seconded by Candice Michel and Committee voted; the motion carried unanimously.**

**d. Salmon Run Occasion Hall** – Tony Baron presented.

- Committee discussed budgetary concerns and potential benefits of the facility

**\*Motion made by Dane Tippman to recommend to Council to approve a \$10,000 allotment per year for five years from TOT funds to purchase a metal building occasion hall facility at Salmon Run Golf Course, motion seconded by Candice Michel and Committee voted; the motion carried unanimously.**

## 5. INFORMATIONAL ITEMS

- a. **Elmo Williams Day Event Evaluation** – Event coordinator Carolyn Milliman submitted a 'thank you' card and reimbursed the Committee \$100 from the event.
- b. **Event Calendar** – not presented
- c. **Recent Council Actions** – Teri Davis presented
- d. **Budget Status & Internet Hit Info** – Committee reviewed the budget status and the internet hits for the month

7. **SCHEDULE NEXT MEETING** – Next meeting scheduled for July 12, 2018.

8. **ADJOURNMENT** – with no further business before the Committee, meeting adjourned at 5:32 pm.

\*At the July 12, 2018 meeting, the Committee requested an edit to the June 14, 2018 minutes, noting a misunderstanding of its options regarding the Salmon Run Occasion Hall. Committee members believed the purchase to be a foregone conclusion and its purpose solely to determine the funding timing. Had the Committee understood it could vote against the proposal, four out of six of the members would have voted 'nay'.

Respectfully submitted,



---

Skip Watwood, Chair

(approved at July 12, 2018 meeting)

**From:** [Lauri Ziemer](#)  
**To:** [Teri Davis](#)  
**Subject:** FW: Parks commission resignation  
**Date:** Wednesday, July 18, 2018 1:58:46 PM

---

Begin forwarded message:

**From:** Jonathan Trost <[jtrost0731@gmail.com](mailto:jtrost0731@gmail.com)>  
**Date:** July 2, 2018 at 12:29:54 PM GMT-6  
**To:** [abaron@brookings.or.us](mailto:abaron@brookings.or.us)  
**Subject:** Parks commission resignation

Tony and fellow Board members,

I need to inform you that I will need to resign from the Parks Commission effective immediately. It has been such an honor to serve with you all during this past year and a half. You are all doing such great work for our community, thank you for all you do and keep up all the good work.

Jay Trost

CITY OF BROOKINGS  
FUND SUMMARY  
FOR THE 12 MONTHS ENDING JUNE 30, 2018

DRAFT

GENERAL FUND

|                             | BUDGET              | PERIOD ACTUAL     | YTD ACTUAL          | REMAINING<br>BUDGET | PCNT         |
|-----------------------------|---------------------|-------------------|---------------------|---------------------|--------------|
| <u>REVENUE</u>              |                     |                   |                     |                     |              |
| TAXES                       | 2,914,282.00        | 141,526.70        | 3,018,873.02        | ( 104,591.02)       | 103.6        |
| LICENSES AND PERMITS        | 110,900.00          | 29,861.94         | 131,293.22          | ( 20,393.22)        | 118.4        |
| INTERGOVERNMENTAL           | 227,300.00          | 25,655.49         | 181,963.58          | 45,336.42           | 80.1         |
| CHARGES FOR SERVICES        | 165,000.00          | 20,441.29         | 166,723.46          | ( 1,723.46)         | 101.0        |
| OTHER REVENUE               | 171,000.00          | 9,856.29          | 186,469.12          | ( 15,469.12)        | 109.1        |
| TRANSFERS IN                | 488,587.00          | .00               | .00                 | 488,587.00          | .0           |
|                             | <u>4,077,069.00</u> | <u>227,341.71</u> | <u>3,685,322.40</u> | <u>391,746.60</u>   | <u>90.4</u>  |
| <u>EXPENDITURES</u>         |                     |                   |                     |                     |              |
| JUDICIAL:                   |                     |                   |                     |                     |              |
| PERSONAL SERVICES           | 24,561.00           | 2,151.81          | 24,973.60           | ( 412.60)           | 101.7        |
| MATERIAL AND SERVICES       | 11,850.00           | 400.00            | 7,853.94            | 3,996.06            | 66.3         |
| CAPITAL OUTLAY              | .00                 | .00               | .00                 | .00                 | .0           |
|                             | <u>36,411.00</u>    | <u>2,551.81</u>   | <u>32,827.54</u>    | <u>3,583.46</u>     | <u>90.2</u>  |
| LEGISLATIVE/ADMINISTRATION: |                     |                   |                     |                     |              |
| PERSONAL SERVICES           | 194,964.00          | 14,751.33         | 206,384.51          | ( 11,420.51)        | 105.9        |
| MATERIAL AND SERVICES       | 98,400.00           | 9,853.33          | 119,941.38          | ( 21,541.38)        | 121.9        |
| CAPITAL OUTLAY              | .00                 | .00               | .00                 | .00                 | .0           |
|                             | <u>293,364.00</u>   | <u>24,604.66</u>  | <u>326,325.89</u>   | <u>( 32,961.89)</u> | <u>111.2</u> |
| POLICE:                     |                     |                   |                     |                     |              |
| PERSONAL SERVICES           | 2,114,007.00        | 176,997.52        | 2,038,294.02        | 75,712.98           | 96.4         |
| MATERIAL AND SERVICES       | 170,800.00          | 10,882.59         | 148,493.88          | 22,306.12           | 86.9         |
| CAPITAL OUTLAY              | .00                 | .00               | 14,306.93           | ( 14,306.93)        | .0           |
| DEBT SERVICE                | 55,150.00           | .00               | 20,374.46           | 34,775.54           | 36.9         |
| TRANSFERS OUT               | .00                 | .00               | .00                 | .00                 | .0           |
|                             | <u>2,339,957.00</u> | <u>187,880.11</u> | <u>2,221,469.29</u> | <u>118,487.71</u>   | <u>94.9</u>  |
| FIRE:                       |                     |                   |                     |                     |              |
| PERSONAL SERVICES           | 187,554.00          | 15,598.80         | 180,247.67          | 7,306.33            | 96.1         |
| MATERIAL AND SERVICES       | 103,000.00          | 17,560.79         | 82,889.95           | 20,110.05           | 80.5         |
| CAPITAL OUTLAY              | .00                 | .00               | .00                 | .00                 | .0           |
| DEBT SERVICE                | 45,519.00           | .00               | 38,047.96           | 7,471.04            | 83.6         |
| TRANSFERS OUT               | .00                 | .00               | .00                 | .00                 | .0           |
|                             | <u>336,073.00</u>   | <u>33,159.59</u>  | <u>301,185.58</u>   | <u>34,887.42</u>    | <u>89.6</u>  |

CITY OF BROOKINGS  
FUND SUMMARY  
FOR THE 12 MONTHS ENDING JUNE 30, 2018

DRAFT

GENERAL FUND

|                              | BUDGET        | PERIOD ACTUAL | YTD ACTUAL    | REMAINING<br>BUDGET | PCNT    |
|------------------------------|---------------|---------------|---------------|---------------------|---------|
| PLANNING AND BUILDING:       |               |               |               |                     |         |
| PERSONAL SERVICES            | 174,119.00    | 11,042.39     | 140,982.27    | 33,136.73           | 81.0    |
| MATERIAL AND SERVICES        | 90,800.00     | 1,395.04      | 19,167.19     | 71,632.81           | 21.1    |
| CAPITAL OUTLAY               | .00           | .00           | .00           | .00                 | .0      |
| TRANSFERS OUT                | .00           | .00           | .00           | .00                 | .0      |
|                              | 264,919.00    | 12,437.43     | 160,149.46    | 104,769.54          | 60.5    |
| PARKS & RECREATION:          |               |               |               |                     |         |
| PERSONAL SERVICES            | 246,173.00    | 17,061.45     | 214,494.28    | 31,678.72           | 87.1    |
| MATERIAL AND SERVICES        | 87,200.00     | 11,563.23     | 93,165.46     | ( 5,965.46)         | 106.8   |
| CAPITAL OUTLAY               | .00           | .00           | .00           | .00                 | .0      |
| DEBT SERVICE                 | 49,000.00     | .00           | 44,350.68     | 4,649.32            | 90.5    |
| TRANSFERS OUT                | .00           | .00           | .00           | .00                 | .0      |
|                              | 382,373.00    | 28,624.68     | 352,010.42    | 30,362.58           | 92.1    |
| FINANCE AND HUMAN RESOURCES: |               |               |               |                     |         |
| PERSONAL SERVICES            | 194,630.00    | 16,432.39     | 191,914.05    | 2,715.95            | 98.6    |
| MATERIAL AND SERVICES        | 33,700.00     | 3,305.63      | 25,354.53     | 8,345.47            | 75.2    |
| CAPITAL OUTLAY               | .00           | .00           | .00           | .00                 | .0      |
|                              | 228,330.00    | 19,738.02     | 217,268.58    | 11,061.42           | 95.2    |
| SWIMMING POOL:               |               |               |               |                     |         |
| PERSONAL SERVICES            | 61,112.00     | 16,467.19     | 67,753.36     | ( 6,641.36)         | 110.9   |
| MATERIAL AND SERVICES        | 43,000.00     | 6,970.93      | 28,732.08     | 14,267.92           | 66.8    |
| CAPITAL OUTLAY               | .00           | .00           | .00           | .00                 | .0      |
|                              | 104,112.00    | 23,438.12     | 96,485.44     | 7,626.56            | 92.7    |
| NON-DEPARTMENTAL:            |               |               |               |                     |         |
| MATERIAL AND SERVICES        | 145,500.00    | 8,969.13      | 90,606.02     | 54,893.98           | 62.3    |
| CAPITAL OUTLAY               | .00           | .00           | .00           | .00                 | .0      |
| TRANSFERS OUT                | 243,500.00    | .00           | .00           | 243,500.00          | .0      |
| CONTINGENCIES AND RESERVES   | 652,530.00    | .00           | .00           | 652,530.00          | .0      |
|                              | 1,041,530.00  | 8,969.13      | 90,606.02     | 950,923.98          | 8.7     |
|                              | 5,027,069.00  | 341,403.55    | 3,798,328.22  | 1,228,740.78        | 75.6    |
|                              | ( 950,000.00) | ( 114,061.84) | ( 113,005.82) | ( 836,994.18)       | ( 11.9) |



CITY OF BROOKINGS  
FUND SUMMARY  
FOR THE 12 MONTHS ENDING JUNE 30, 2018

DRAFT

STREET FUND

|                            | BUDGET               | PERIOD ACTUAL    | YTD ACTUAL         | REMAINING<br>BUDGET  | PCNT         |
|----------------------------|----------------------|------------------|--------------------|----------------------|--------------|
| <u>REVENUE</u>             |                      |                  |                    |                      |              |
| INTERGOVERNMENTAL          | 485,000.00           | 40,918.55        | 383,508.91         | 101,491.09           | 79.1         |
| OTHER REVENUE              | 13,650.00            | .00              | 10,778.67          | 2,871.33             | 79.0         |
| TRANSFER IN                | .00                  | .00              | .00                | .00                  | .0           |
|                            | <u>498,650.00</u>    | <u>40,918.55</u> | <u>394,287.58</u>  | <u>104,362.42</u>    | <u>79.1</u>  |
| <u>EXPENDITURES</u>        |                      |                  |                    |                      |              |
| EXPENDITURES:              |                      |                  |                    |                      |              |
| PERSONAL SERVICES          | 205,515.00           | 11,981.71        | 172,521.62         | 32,993.38            | 84.0         |
| MATERIAL AND SERVICES      | 205,000.00           | 20,355.61        | 193,791.02         | 11,208.98            | 94.5         |
| CAPITAL OUTLAY             | 107,000.00           | .00              | 8,764.90           | 98,235.10            | 8.2          |
| DEBT SERVICE               | 27,583.00            | 1,717.04         | 20,604.42          | 6,978.58             | 74.7         |
| TRANSFERS OUT              | 31,582.00            | .00              | .00                | 31,582.00            | .0           |
| CONTINGENCIES AND RESERVES | 121,970.00           | .00              | .00                | 121,970.00           | .0           |
|                            | <u>698,650.00</u>    | <u>34,054.36</u> | <u>395,681.96</u>  | <u>302,968.04</u>    | <u>56.6</u>  |
|                            | <u>698,650.00</u>    | <u>34,054.36</u> | <u>395,681.96</u>  | <u>302,968.04</u>    | <u>56.6</u>  |
|                            | <u>( 200,000.00)</u> | <u>6,864.19</u>  | <u>( 1,394.38)</u> | <u>( 198,605.62)</u> | <u>( .7)</u> |

CITY OF BROOKINGS  
FUND SUMMARY  
FOR THE 12 MONTHS ENDING JUNE 30, 2018

DRAFT

WATER FUND

|                            | BUDGET               | PERIOD ACTUAL     | YTD ACTUAL          | REMAINING<br>BUDGET  | PCNT         |
|----------------------------|----------------------|-------------------|---------------------|----------------------|--------------|
| <u>REVENUE</u>             |                      |                   |                     |                      |              |
| SOURCE 03                  | .00                  | .00               | .00                 | .00                  | .0           |
| CHARGES FOR SERVICES       | 1,637,000.00         | 156,857.63        | 1,646,359.44        | ( 9,359.44)          | 100.6        |
| OTHER INCOME               | 54,500.00            | 2,755.00          | 53,861.41           | 638.59               | 98.8         |
| TRANSFERS IN               | .00                  | .00               | .00                 | .00                  | .0           |
|                            | <u>1,691,500.00</u>  | <u>159,612.63</u> | <u>1,700,220.85</u> | <u>( 8,720.85)</u>   | <u>100.5</u> |
| <u>EXPENDITURES</u>        |                      |                   |                     |                      |              |
| WATER DISTRIBUTION:        |                      |                   |                     |                      |              |
| PERSONAL SERVICES          | 361,597.00           | 25,807.96         | 317,705.02          | 43,891.98            | 87.9         |
| MATERIAL AND SERVICES      | 197,500.00           | 4,065.48          | 170,076.98          | 27,423.02            | 86.1         |
| CAPITAL OUTLAY             | 50,000.00            | 4,213.05          | 42,013.95           | 7,986.05             | 84.0         |
| DEBT SERVICE               | 14,900.00            | 398.39            | 4,780.69            | 10,119.31            | 32.1         |
| TRANSFERS OUT              | .00                  | .00               | .00                 | .00                  | .0           |
|                            | <u>623,997.00</u>    | <u>34,484.88</u>  | <u>534,576.64</u>   | <u>89,420.36</u>     | <u>85.7</u>  |
| WATER TREATMENT:           |                      |                   |                     |                      |              |
| PERSONAL SERVICES          | 311,891.00           | 8,558.48          | 244,408.10          | 67,482.90            | 78.4         |
| MATERIAL AND SERVICES      | 242,000.00           | 37,402.21         | 275,898.04          | ( 33,898.04)         | 114.0        |
| CAPITAL OUTLAY             | 20,500.00            | 7,650.00          | 10,034.49           | 10,465.51            | 49.0         |
| DEBT SERVICE               | 14,900.00            | 398.39            | 4,780.69            | 10,119.31            | 32.1         |
| TRANSFERS OUT              | 589,386.00           | .00               | .00                 | 589,386.00           | .0           |
| CONTINGENCIES AND RESERVES | 178,826.00           | .00               | .00                 | 178,826.00           | .0           |
|                            | <u>1,357,503.00</u>  | <u>54,009.08</u>  | <u>535,121.32</u>   | <u>822,381.68</u>    | <u>39.4</u>  |
| DEPARTMENT 24:             |                      |                   |                     |                      |              |
| CAPITAL OUTLAY             | .00                  | .00               | .00                 | .00                  | .0           |
|                            | <u>.00</u>           | <u>.00</u>        | <u>.00</u>          | <u>.00</u>           | <u>.0</u>    |
|                            | <u>1,981,500.00</u>  | <u>88,493.96</u>  | <u>1,069,697.96</u> | <u>911,802.04</u>    | <u>54.0</u>  |
|                            | <u>( 290,000.00)</u> | <u>71,118.67</u>  | <u>630,522.89</u>   | <u>( 920,522.89)</u> | <u>217.4</u> |

CITY OF BROOKINGS  
FUND SUMMARY  
FOR THE 12 MONTHS ENDING JUNE 30, 2018

DRAFT

WASTEWATER FUND

|                            | BUDGET               | PERIOD ACTUAL     | YTD ACTUAL          | REMAINING<br>BUDGET    | PCNT         |
|----------------------------|----------------------|-------------------|---------------------|------------------------|--------------|
| <u>REVENUE</u>             |                      |                   |                     |                        |              |
| SOURCE 03                  | ( 4,500.00)          | .00               | .00                 | ( 4,500.00)            | .0           |
| CHARGES FOR SERVICES       | 3,129,300.00         | 262,759.21        | 3,127,259.90        | 2,040.10               | 99.9         |
| OTHER REVENUE              | 10,000.00            | .00               | 15,320.59           | ( 5,320.59)            | 153.2        |
| TRANSFER IN                | .00                  | .00               | .00                 | .00                    | .0           |
|                            | <u>3,134,800.00</u>  | <u>262,759.21</u> | <u>3,142,580.49</u> | <u>( 7,780.49)</u>     | <u>100.3</u> |
| <u>EXPENDITURES</u>        |                      |                   |                     |                        |              |
| WASTEWATER COLLECTION:     |                      |                   |                     |                        |              |
| PERSONAL SERVICES          | 528,144.00           | 33,965.92         | 471,215.82          | 56,928.18              | 89.2         |
| MATERIAL AND SERVICES      | 243,700.00           | 3,893.28          | 134,121.99          | 109,578.01             | 55.0         |
| CAPITAL OUTLAY             | 15,000.00            | .00               | 13,092.49           | 1,907.51               | 87.3         |
| DEBT SERVICE               | 14,900.00            | 398.39            | 4,780.70            | 10,119.30              | 32.1         |
| TRANSFERS OUT              | 149,966.00           | .00               | .00                 | 149,966.00             | .0           |
|                            | <u>951,710.00</u>    | <u>38,257.59</u>  | <u>623,211.00</u>   | <u>328,499.00</u>      | <u>65.5</u>  |
| WASTEWATER TREATMENT:      |                      |                   |                     |                        |              |
| PERSONAL SERVICES          | 536,014.00           | 7,580.52          | 392,784.66          | 143,229.34             | 73.3         |
| MATERIAL AND SERVICES      | 582,300.00           | 71,167.13         | 559,047.49          | 23,252.51              | 96.0         |
| CAPITAL OUTLAY             | 10,000.00            | .00               | 2,384.49            | 7,615.51               | 23.8         |
| DEBT SERVICE               | 14,900.00            | 398.39            | 4,780.70            | 10,119.30              | 32.1         |
| TRANSFERS OUT              | 1,230,044.00         | .00               | .00                 | 1,230,044.00           | .0           |
| CONTINGENCIES AND RESERVES | 314,332.00           | .00               | .00                 | 314,332.00             | .0           |
|                            | <u>2,687,590.00</u>  | <u>79,146.04</u>  | <u>958,997.34</u>   | <u>1,728,592.66</u>    | <u>35.7</u>  |
|                            | <u>3,639,300.00</u>  | <u>117,403.63</u> | <u>1,582,208.34</u> | <u>2,057,091.66</u>    | <u>43.5</u>  |
|                            | <u>( 504,500.00)</u> | <u>145,355.58</u> | <u>1,560,372.15</u> | <u>( 2,064,872.15)</u> | <u>309.3</u> |

CITY OF BROOKINGS  
FUND SUMMARY  
FOR THE 12 MONTHS ENDING JUNE 30, 2018

DRAFT

URBAN RENEWAL AGENCY FUND

|                            | BUDGET               | PERIOD ACTUAL    | YTD ACTUAL        | REMAINING<br>BUDGET  | PCNT         |
|----------------------------|----------------------|------------------|-------------------|----------------------|--------------|
| <u>REVENUE</u>             |                      |                  |                   |                      |              |
| TAXES                      | 534,592.00           | 22,376.06        | 573,452.03        | ( 38,860.03)         | 107.3        |
| INTERGOVERNMENTAL          | .00                  | .00              | .00               | .00                  | .0           |
| OTHER REVENUE              | 3,000.00             | 1.18             | 8,841.48          | ( 5,841.48)          | 294.7        |
| TRANSFERS IN               | .00                  | .00              | .00               | .00                  | .0           |
|                            | <u>537,592.00</u>    | <u>22,377.24</u> | <u>582,293.51</u> | <u>( 44,701.51)</u>  | <u>108.3</u> |
| <u>EXPENDITURES</u>        |                      |                  |                   |                      |              |
| GENERAL:                   |                      |                  |                   |                      |              |
| PERSONAL SERVICES          | .00                  | .00              | .00               | .00                  | .0           |
| MATERIAL AND SERVICES      | 35,000.00            | 387.00           | 3,663.96          | 31,336.04            | 10.5         |
| CAPITAL OUTLAY             | 391,853.00           | .00              | .00               | 391,853.00           | .0           |
| DEBT SERVICE               | .00                  | .00              | .00               | .00                  | .0           |
| TRANSFERS OUT              | 450,739.00           | .00              | .00               | 450,739.00           | .0           |
| CONTINGENCIES AND RESERVES | .00                  | .00              | .00               | .00                  | .0           |
|                            | <u>877,592.00</u>    | <u>387.00</u>    | <u>3,663.96</u>   | <u>873,928.04</u>    | <u>.4</u>    |
| DEPARTMENT 20:             |                      |                  |                   |                      |              |
| CAPITAL OUTLAY             | .00                  | .00              | .00               | .00                  | .0           |
|                            | <u>.00</u>           | <u>.00</u>       | <u>.00</u>        | <u>.00</u>           | <u>.0</u>    |
| DEPARTMENT 22:             |                      |                  |                   |                      |              |
| MATERIAL AND SERVICES      | .00                  | .00              | .00               | .00                  | .0           |
| DEBT SERVICE               | .00                  | .00              | .00               | .00                  | .0           |
|                            | <u>.00</u>           | <u>.00</u>       | <u>.00</u>        | <u>.00</u>           | <u>.0</u>    |
| DEPARTMENT 24:             |                      |                  |                   |                      |              |
| CONTINGENCIES AND RESERVES | .00                  | .00              | .00               | .00                  | .0           |
|                            | <u>.00</u>           | <u>.00</u>       | <u>.00</u>        | <u>.00</u>           | <u>.0</u>    |
|                            | <u>877,592.00</u>    | <u>387.00</u>    | <u>3,663.96</u>   | <u>873,928.04</u>    | <u>.4</u>    |
|                            | <u>( 340,000.00)</u> | <u>21,990.24</u> | <u>578,629.55</u> | <u>( 918,629.55)</u> | <u>170.2</u> |



## OREGON RECEIVED WORST RANKING FOR MENTAL HEALTH!

Over the years in Curry County, as an advocate for *sufficient* quality mental health care services, folks may have heard me talk about working in Arizona for Phoenix Behavioral Health Foundation--the development/foundation arm of Phoenix South Community Mental Health Center (the largest community health center in the state during the mid-eighties). Arizona funded less for mental health than every other state in the union and even less than Puerto Rico. So, what does this have to do with the State of Oregon?

As of November, 2015, the State of Oregon received this same dubious distinction of being ranked number 51 (worst ranking) with regards to mental health. The State of Oregon funds significantly but there are a large number of mental health patients/clients in Oregon and that is the bottom line—Oregon's funding currently has not been able to keep up with the numbers in order to address the need. *What did we do in Arizona to impact this ranking and turn things around?*

We formed a coalition of community-based mental health providers and sued the State of Arizona on behalf of individuals (because the clients of the various providers were not getting their needs met after a national emphasis to "de-institutionalize" mental health services).

In Arizona, lawsuits were won on behalf of individuals. The result is that the courts ordered the State of Arizona to fund more for mental health. Additionally, some of those individual test case law suits were on behalf of veterans. *How did this landmark decision affect State and federal policy with regards to veterans and mental health?* Regardless of a regional Veterans Healthcare System's nonperformance, ultimately, the responsibility fell back on the State of Arizona. That is the legal precedent for the rationale behind the V.A. Healthcare Reform Act of 2014 and the current federal legislation that was passed this summer as the V.A. Mission Act. Rural counties will be better provided for under this new legislation.

Back in the day, mentally ill clients were considered CMI--chronically mentally ill. Now, the term used is SMI for Serious Mental Illness which is defined by the National Survey on Drug Use and Health (NSDUH) as:



- A mental, behavioral, or emotional disorder (excluding developmental and substance use disorders);
- Diagnosable currently or within the past year;
- Of sufficient duration to meet diagnostic criteria specified within the 4th edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV); and,
- Resulting in serious functional impairment, which substantially interferes with or limits one or more major life activities.

Locally, Curry Community Health has done a great job to grow seriously needed mental health services in our isolated rural county. Their Mental Health and Addictions Advisory Board chose creating and developing community partner roles, increased addiction programs, suicide prevention and building staff and providers for peer support and increased training for peer support specialists as our main goals. The current conundrum surrounding Curry Health Network's ability to provide a mental health bed demonstrates another hole in the local efforts to provide for mental and behavioral health needs.

Through this ongoing community conversation at the upcoming V.A. Healthcare Summit 2.0, stakeholders will have an opportunity to provide input and gather information regarding how the V.A. can work better with our rural county. During this summit, we can affect the State of Oregon's public policy in a huge way as well. We have the opportunity to initiate a concerted effort among community-based providers to coalesce in support of our U.S. military veterans, their family members and our other servicemembers—active duty, reservists and our National Guard. Don't forget that we have 26.7 % of our Curry County citizens are veterans—while in south Curry County where population is densest, the numbers are closer to 1 in 3 people are veterans. Only 1 in 3 veterans have enrolled in the Veterans Benefits Administration and are receiving benefits from the federal Veterans Administration.

Because of our continued advocacy, much work is being done to affect the State of Oregon's public policy with regards to mental health and funding for mental health programs.

Locally, we must continue our advocacy to both the State of Oregon and the V.A. in order to address the gaps in care and to provide a continuum of care of mental health services. We must work together to insist that the State of Oregon should



encourage/support/develop and implement community-based partnerships with the V.A. Healthcare System. Our efforts in Curry County are really the nuts and bolts of a model that could affect the way the State and the V.A. do business.

We have been successful thus far in Oregon, to get the Oregon Health Authority, in its efforts to provide community support through its Coordinated Care System, to prioritize mental health in its policy development, which means funding is not that far behind. Oregon Department of Veterans Affairs is providing additional funding for veterans through lotter funds. For example, Lane County Council of Governments applied for a grant under these new funding opportunities and received a grant for just under \$50,000 for case management for veterans' healthcare. We need to look at ways to bring that funding our way.

It is up to community stakeholders to insist that the implementation of the new strategies and innovation policy of the Veterans Administration's be implemented locally. And, that is the reason for a stakeholders' meeting with V.A. Roseburg's Healthcare Systems—V.A. Healthcare Summit 2.0 with an emphasis on mental health--to be held at Curry Campus of Southwestern Oregon Community College on 21 September 2018 from 9:00 a.m. – 2:00 p.m.

I will keep you updated as this comes together over the next few weeks. Please RSVP if you would like to participate in the event as a stakeholder and/or as a community partner. Please contact me via cell 602-541-5903 or by Email: [Connie.Hunter@outlook.com](mailto:Connie.Hunter@outlook.com)

Connie Hunter

Vice President, Mental Health and Addictions Citizens Advisory Board  
Curry Community Health

Community Ambassador, Mental Health Executive Council  
V.A. Healthcare Network, Roseburg Catchment Area

Capital Campaign Committee Chair and Board Member  
Brookings-Harbor Community Helpers Emergency Foodbank

Community Engagement Committee  
Advanced Health (Coordinated Care Organization)



## ***Mental Health Issues on Campus: Understanding Data, Recognizing Red Flags & Assisting Students in Distress*** webinar

**Monday, July 30, 12:00-1:30pm PST**

**To Register:** Go to <https://www.innovativeeducators.org/pages/events>



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Webinar Calendar - All times listed are Eastern. About IE. FAQs; Webinars; Go2Knowledge; Go2Orientation; StudentLingo; ParentLingo; TutorLingo

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## **Webinar Overview**

### **Key Takeaway**

- Participants will learn to recognize signs of emotional distress, both subtle and overt cues
- Participants will be able to articulate the primary steps in offering help and making a successful referral for a student in distress
- Participants will gain an understanding of the common mental health issues college & university students face using data from multiple sources

### **Challenge**

Students come to campus reporting more mental health issues and with more experience with therapy. Faculty and staff report dealing with an increase in mental health issues in the classroom, residence halls and when interacting with students. This webinar will equip the participants to understand the broader issues of mental health in student populations, how to recognize distress and how to make the next steps to help the struggling students.



## **Overview**

This webinar will begin with current data on college mental health trends including center usage rates, underserved populations, diagnostic and medication trends, primary issues facing college mental health providers and “red flags” that indicate possible mental health concerns. Issues of staffing, the importance of prevention outreach, utilizing case management (in and outside of Counseling Services) and BIT work will be explored in relation to how to navigate the distraught emotional student. Basic intervention skills and developing a vocabulary to help a student will be reviewed.

## **Objectives**

- Identify signs of emotional distress, both subtle and overt cues
- Articulate the primary steps in offering help and making a successful referral for a student in distress
- Explore common mental health issues that college & university students face using current data from multiple sources
- Improve your ability to assist a student in crisis

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# Lane County Passes Stepping Up Resolution and Continues Leading Role In Mental Health-Public Safety Partnership Effort to Reduce the Number of Mentally Ill in Jail

## *Lane Joins 13 Oregon Counties That Have Already Passed Stepping Up Resolutions*

On a unanimous vote, Lane County Commissioners, passed a Stepping Up Resolution on May 23, 2017. The resolution formalized ongoing efforts to reduce the number of people with mental illnesses in the Lane County Jail.

“Stepping Up” is a national initiative, aimed at reducing the number of people with mental illness in jails. It is estimated that Oregon jails serve an estimated 25,000 people with serious mental illnesses each year and that the prevalence of people with serious mental illnesses in jails is three to six times higher than for the general population. Once incarcerated, they tend to stay longer in jail and upon release are at a higher risk of returning than individuals without these disorders.

Lane County has been an innovative leader in building collaborative between their local mental health and public safety system partners in recent years.

“We know that a startlingly large portion – as much as 60 percent – of our inmate population is suffering from mental illness,” said Chair Pat Farr. “Creating a safe and healthy county is a priority of the Board and Stepping Up will complement and help us strengthen our current efforts to better serve those with mental illness in our community.”

Lane County joins 365 other counties from across the country in joining the Stepping Up Initiative. The resolution was brought forward at the request of Commissioner Jay Bozievich.

Current mental health-public safety partnership efforts of Lane County include:

- The addition of three mental health specialists in the jail dedicated to providing case management services and discharge planning to reduce recidivism rates.
- A Circuit Court Mental Health Court, linking individuals to treatment resources instead of incarceration. This offering joins other alternative

court models including Drug Court, Veteran's Court and a Municipal Mental Health Court.

- The opening of the Hourglass Community Crisis Center, which offers 24/7 mental health crisis services to the local community and providing links to ongoing mental health and substance abuse treatment needs.
- The implementation of the Lane County Behavioral Health Jail Intercept program aimed at removing individuals with mental illness from jail and providing ongoing mental health treatment services.
- Support of the development of the Oaks at 14th housing complex, instituted by Sponsors, to provide 54 units of affordable, long-term permanent housing for individuals with criminal histories, including veterans, seniors, and people with disabilities.
- The implementation of the LEDS Mental Health Database providing law enforcement with information to assist qualifying individuals in obtaining medical, mental health and social services.

Under the leadership of AOC President and Lincoln County Commissioner Bill Hall, AOC has made the Stepping Up initiative a priority during 2017. President Hall noted, "People with mental illness rarely belong in our public safety systems. We rarely see good results, and sometimes the outcomes are tragic. It doesn't have to be this way. We have the tools to improve public safety, help people toward recovery, and save money in the process."

On May 9, AOC hosted a day long Stepping Up Summit to promote continued and expanded local efforts to address the problem. 14 Oregon counties have passed their own Stepping Up Resolutions. "It would be great to see Oregon become the first state to reach 100 percent participation in this effort," said Commissioner Hall.

Stepping Up was launched in May 2015, NACo and partners at the CSG Justice Center and APA Foundation launched **Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails** and announced a Call to Action demonstrating strong county and state leadership and a shared commitment to a multi-step planning process that can achieve concrete results for jails in counties of all sizes. As part of this Call to Action, county elected officials have the opportunity to work with other local leaders (e.g., the sheriff, judges, district attorney, treatment providers, and state and local policymakers), people with mental illnesses and their advocates and other stakeholders to reduce the number of people with mental illnesses in their local jail.

Contributed by: **Andy Smith** | AOC Veterans Policy Manager

AOC President Bill Hall and Leaders of Lane County Mental Health-Public Safety Partnership Efforts



*Left to Right: Sheriff Byron Trapp; Alicia Hays, Director of Health and Human Services; Carla Ayres, Division Manager, Health and Human Services; Lisa Nichols, Assistant Director of Health and Human Services; Sheriff; AOC President and Lincoln County Commissioner Bill Hall; Andy Smith, AOC staff; Captain Dan Buckwald, Jail Commander.*





# HOUSE COMMITTEE ON **VETERANS' AFFAIRS**

*Chairman Phil Roe, M.D.*

## THE VA MISSION ACT OF 2018

(VA Maintaining Systems and Strengthening Integrated Outside Networks Act)

### Title I - the Caring For Our Veterans Act of 2018

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#### Subtitle A—Developing an Integrated High-Performing Network

#### Chapter 1 - Establishing Community Care Programs

#### ***Sec. 101. Establishment of Veterans Community Care Program.***

Section 101 would establish the Veterans Community Care Program to provide care in the community to veterans who are enrolled in the VA healthcare system or otherwise entitled to VA care.

Under this section, VA would be required to coordinate veterans' care and would be required to:

- Ensure the scheduling of medical appointments in a timely manner.
- Ensure continuity of care and services.
- Coordinate coverage for veterans who utilize care outside of a region from where they reside.
- Ensure veterans do not experience a lapse in health care services.

This section *requires* access to community care if VA does not offer the care or services the veteran requires, VA does not operate a full-service medical facility in the state a veteran resides, the veteran was eligible for care in the community under the 40-mile rule in the Veterans Choice Program and meets certain other criteria, VA is not able to furnish care within the designated access standards established by VA, or a veteran and the veteran's referring clinician agree that furnishing care or services in the community would be in the best medical interest of the veteran after considering criteria, including:

- The distance between the veteran and the facility that provides the care or services the veteran needs.
- The nature of the care or services required.
- The frequency that care or services needs to be furnished.
- The timeliness of available appointments for the care or services the veteran needs.
- Whether the covered veteran faces an unusual or excessive burden to

accessing care or services from the VA medical facility where the covered veteran seeks care or services, which would include consideration of the following:

- Whether the covered veteran faces an excessive driving distance, geographical challenge, or environmental factor that impedes access.
- Whether the care or services sought by the veteran is provided by a VA medical facility that is reasonably accessible.
- Whether a medical condition of the covered veteran affects his/her ability to travel.
- Whether there is a compelling reason that the covered veteran needs to receive care or services from a medical facility other than a VA medical facility.
- Any other considerations VA considers appropriate.

This section would also *authorize* VA to furnish care to veterans in the community when quality measures are deficient.

- Deficient timeliness would be determined when compared with the same medical service line at different VA facilities.
- Deficient quality would be measured when compared with two or more distinct and appropriate quality measures at non-VA medical service lines.

VA would be limited in exercising this authority at no more than 36 service lines nationally and 3 service lines per facility.

This section requires that any decision review shall be subject to the Department's clinical appeal process and may not be appealed via the Board of Veterans Appeals.

This section would authorize tiered networks so long as VA does not prioritize providers in one tier over another in a manner that limits a veteran's choice of providers.

This section would require VA to enter into contracts establishing health care provider networks and would assign VA specific requirements and authorizations related to this process. For example, to the extent practicable, VA would be responsible for scheduling appointments for hospital care, medical services, or extended care services.

This section would establish payment rates for community care as, to the extent practicable, the Medicare rate. It would authorize VA to pay higher rates in highly rural areas. For Alaska, the Alaskan Fee Schedule would be followed. For states with All-Payer Model Agreements, the Medicare rate would be calculated based on the payment rates of those Agreements. VA would be allowed to incorporate, to the extent practicable, value-based reimbursement models to promote high-quality care.

This section would require that a veteran not pay more for utilizing non-VA care than the veteran would pay for comparable care or services at VA.

This section would require that in a case in which a veteran is eligible for and requires an organ or bone marrow transplant, and the veteran has, in the opinion of the primary

care provider of the veteran, a medically compelling reason to travel outside the region of the Organ Procurement and Transplantation Network, established under section 372 of the National Organ Transplantation Act (Public Law 98–507; 42 U.S.C. 274), the Secretary shall consider authorization of such transplant at a non-Department facility.’

This section would also require VA to monitor network care and report to Congress on the care provided to veterans.

This section would also allow for the continuity of existing memorandums of understanding and memorandums of agreement that were in effect on the day before enactment of this bill between VA and the American Indian and Alaska Native health care systems as established under the terms of the Department of Veterans Affairs and Indian Health Service Memorandum of Understanding, signed October 1, 2010, the National Reimbursement Agreement, signed December 5, 2012, arrangements under section 405 of the Indian Health Care Improvement Act, and agreements entered into under sections 102 and 103 of the 2014 Choice law to enhance the collaboration between VA and the Native Hawaiian health care system.

***Sec. 102. Authorization of agreements between Department of Veterans Affairs and non-Department providers.***

Section 102 would authorize VA to enter into Veterans Care Agreements (VCAs) that are not subject to competition or other requirements associated with federal contracts, so that they can more easily meet veterans’ demands for care in the community.

Eligibility for care would be subject to the same terms as VA care itself and the rates paid under VCAs, to the extent practicable, would be in accordance with rates paid under the Veterans Community Care Program established in section 101 of this bill. VA would be responsible for development of a certification process for VCAs and a system for monitoring the quality of care.

This section would also establish the terms VCAs must agree to in order to become a provider in the Community Care program.

***Sec. 103. Conforming amendments for State Veterans Homes.***

Section 103 would authorize VA to enter into VCAs with State Veterans Homes and eliminate competitive contracting actions and other requirements associated with federal contracts. State Veterans Homes, while not considered federal contractors for the purposes of this section, would still be required to follow federal laws related to fraud, waste, and abuse as well as employment law.

***Sec. 104. Access standards and standards for quality.***

Section 104 would require VA to establish access standards, after consulting with pertinent federal entities, the private sector, and nongovernmental entities, so that

veterans can make informed decisions about their health care. This section would allow a covered veteran to request a determination regarding whether the veteran is eligible to receive care or services from a community provider due to VA being unable to meet certain designated access standards as established by VA. This section would direct VA to publish the designated access standards in both the Federal Register and VA's website and to review the access standards every three years at a minimum.

This section would also require VA to establish quality standards, after consulting with pertinent federal entities, the private sector, and nongovernmental entities, and would direct VA to collect measures on the following:

- Veterans' satisfaction with service and the quality of care at VA medical facilities within the past two years.
- Timely care.
- Effective care.
- Safety – including at a minimum: complications, readmissions, and death.
- Efficiency.

This section would require VA to publish data on these quality measures on the Hospital Compare website through the Centers for Medicare and Medicaid to give veterans the information necessary to compare performance measures between VA and community health care providers.

This section would also require VA to consider any potential changes to the quality measures within two years of enactment and open this process to public comment to ensure the measures are up-to-date and rely on applicable industry measures.

#### ***Sec. 105. Access to Walk-In Care.***

Section 105 would authorize access to walk-in care for enrolled veterans who have used VA health care services in the 24-month period before seeking walk-in services. Community providers that have entered into a contract or agreement to provide services under this section and Federally-qualified health centers (FQHC) would provide these services.

Veterans who are not required to make a copayment at VA would be entitled to two visits without a copayment and then VA would be authorized to charge an adjustable copayment determined in regulations by VA. Veterans who are required to make a copayment at VA could pay that copayment for the first two visits and then VA would be authorized to charge an adjusted copayment after those two visits.

VA would be required to ensure continuity of care under this section, including through the establishment of a mechanism to receive medical records from walk-in care providers and to share pertinent patient medical records with walk-in care providers.

#### ***Sec. 106. Strategy regarding the Department of Veterans Affairs High-Performing Integrated Health Care Network.***

Section 106 would require VA to perform market area assessments at least once every four years and would prescribe the elements that need to be included in the assessments, to include:

- Demand, disaggregated by geographic market areas determined by VA, including requests for VA services.
- An inventory of VA's health care capacity across all medical facilities.
- An assessment of the capacity provided by contracted private providers, including the number of providers, the geographic location of the providers, and the categories or types of health care services provided by the providers.
- An assessment obtained from other Federal direct delivery systems of their capacity to provide health care to veterans.
- An assessment of the health care capacity of non-contracted providers where there is insufficient network supply.
- An assessment of the health care capacity of academic affiliates and other VA collaborations as it relates to providing health care to veterans.
- An assessment of the effects on VA health care capacity by the access and quality standards established under this bill.
- The number of appointments for health care services, disaggregated by VA medical facilities and non-Department health care providers.

This section would require VA to submit the market area assessments to Congress and use the market area assessments to determine the capacity of the health care provider networks established in section 101 of this bill, to inform VA's budget, to assess the appropriateness of the access and quality standards established under this bill, and to develop recommendations for changes to those standards as needed.

This section would also require VA to submit a strategic plan to Congress, no later than one year after the date of enactment and at least every four years thereafter and to specify:

- Demand, disaggregated by geographic market areas determined by VA.
- The health care capacity to be provided at each VA medical center.
- The health care capacity to be provided through community care providers.

This section would direct VA to take a number of elements into consideration in the strategic plan, including veterans' satisfaction, the access and quality standards established under this bill, and conditions and needs of veterans with service-connected disabilities. In preparing the strategic plan, it would also direct VA to identify emerging issues, challenges, and opportunities; develop long-term and short-term recommendations to address them; conduct a comprehensive examination of VA programs and policies; and assess the remediation of medical services lines described in section 1706A.

This section would require VA to be responsible for overseeing the transformation and

organizational change to achieve a high performing integrated health care network, developing the capital infrastructure planning and procurement processes required, and developing a multi-year budget process that is capable of forecasting future budget year requirements.

***Sec. 107. Applicability of directive of Office of Federal Contract Compliance Programs.***

Section 107 would apply the same affirmative action moratorium on VCA contractors and subcontractors as is applied to TRICARE contractors and subcontractors in Directive 2014–01 of the Office of Federal Contract Compliance Programs of the Department of Labor.

***Sec. 108. Prevention of certain health care providers from providing non-Department health care services to veterans.***

Section 108 would allow VA to deny, suspend, or revoke the eligibility of a non-Department health care provider to participate in the community care program if that the provider was previously removed from VA employment or had their medical license revoked. GAO will report on the implementation of this section two years after enactment.

***Sec. 109. Remediation of medical services lines.***

Section 109 would require VA to submit to Congress a plan to remediate medical service lines with specific actions, including but not limited to:

- Increasing personnel or temporary personnel assistance, including mobile deployment teams.
- Utilizing special hiring incentives, including the Education Debt Reduction Program (EDRP) and recruitment, relocation, and retention incentives.
- Utilizing direct hiring authority.
- Providing improved training opportunities for staff.
- Acquiring improved equipment.
- Making structural modifications to the facility used by the medical service line.
- Such other actions as VA considers appropriate.

Individuals at the facility, VISN and central office levels would be identified as being responsible for overseeing the progress of that medical service line in complying with the quality standards established by VA.

This section would require interim and annual reports with an analysis of the remediation actions and the costs of such actions.

## **Chapter 2 - Paying Providers and Improving Collections**

***Sec. 111. Prompt payment to providers.***



Section 111 would establish a prompt payment process that requires VA to pay for, or deny payment for, services within 30 calendar days of receipt of a clean electronic claim or within 45 calendar days of receipt of a clean paper claim. In the case of a denial, VA would have to notify the provider of the reason for denying the claim and what, if any, additional information would be required to process the claim. Upon the receipt of the additional information, VA would have to pay, deny, or otherwise adjudicate the claim within 30 calendar days. These requirements would only apply to payments made on an invoice basis and would not apply to capitation or other forms of periodic payments to entities or providers. Non-Department entities or providers would be required to submit a claim to VA within 180 days of providing care or services.

Any claim that has not been denied, made pending, or paid within the specified time periods would be considered overdue and subject to interest payment penalties. VA would also be directed to report annually on the number of and the amount paid in overdue claims. VA would be authorized to deduct the amount of any overpayment from payments due to an entity or provider under certain conditions. The Secretary would also be required to publish regulations for the administration of this section.

Claims processing may be performed by either a contracted third party administrator or other entity to conduct these administrative functions. This section would require an independent review of claims that includes the capacity of VA to process such claims in a timely manner and a cost benefit analysis comparing the capacity of VA to a third party entity capable of processing such claims. This section would also require that VA conduct a study on whether to establish a funding mechanism for a Department contractor to act as a fiscal intermediary for the Federal Government to pay claims.

***Sec. 112. Authority to pay for authorized care not subject to an agreement.***

Section 112 would authorize VA to pay for services not subject to a contract or agreement. It would also give VA the flexibility to pay for services deemed necessary and would direct VA to take reasonable efforts to enter into a formal agreement and contract, or other legal arrangement, to ensure that future care and services are covered.

***Sec. 113. Improvement of authority to recover the cost of services furnished for non-service-connected disabilities.***

Section 113 would authorize VA to collect from a third party for care provided to non-veterans by amending statute to refer to "individuals" instead of "veterans." It would also authorize VA to seek collections when VA pays for care, rather than furnishes it, and remove duplicative language regarding VA's authority to collect from other health insurance for treatment of a non-service-connected disability.

***Sec. 114. Processing of claims for reimbursement through electronic interface.***

Section 114 would allow VA to enter into an agreement with a third party entity to electronically process health care claims from community providers.

### **Chapter 3 - Education and Training Programs**

#### ***Sec. 121. Education program on health care options.***

Section 121 would require VA to develop and administer an education program to inform veterans about their VA health care options, the interaction between health insurance and VA health care, and how to utilize the access and quality standards established in section 104. It would also require VA to evaluate and report on the program annually.

#### ***Sec. 122. Training program for administration of non-Department of Veterans Affairs health care.***

Section 122 would require VA to develop and administer a training program for VA employees and contractors on how to administer non-Department health care programs and the management of prescriptions for opioids as established under section 131. It also would require VA to evaluate and report on the program annually.

#### ***Sec. 123. Continuing medical education for non-Department medical professionals.***

Section 123 would establish a program to provide continuing medical education material to non-Department medical professionals at no cost to them. The program would focus on educating these non-Department medical professionals on identifying and treating common mental and physical conditions of veterans and their family members. It would also require VA to evaluate and report on the program annually.

### **Chapter 4 - Other Matters Relating to Non-Department of Veterans Affairs Providers**

#### ***Sec. 131. Establishment of processes to ensure safe opioid prescribing practices by non-Department of Veterans Affairs health care providers.***

Section 131 would ensure that contracted providers have reviewed the evidence-based guidelines for prescribing opioids set forth in the Opioid Safety Initiative before providing care through the community care program. This section would also require VA to implement a process to make certain that community care providers have access to available and relevant medical history of the patient, including a list of all medication prescribed to the veteran as known by VA.

This section would require that contracted providers submit medical records of any care or services furnished, including records of any prescriptions for opioids, to VA in a

timeframe and format specified by VA. VA would be responsible for the recording those prescriptions in the electronic health record and enable other monitoring of the prescription as outlined in the Opioid Safety Initiative.

This section would require a report each year evaluating the compliance of contracted providers with the requirements of this subsection. If VA determines that a community provider is not complying with the Opioid Safety Initiative, VA is authorized to refuse authorization of care by such provider and direct their removal from the community care network.

***Sec. 132. Improving information sharing with community providers.***

Section 132 would clarify that VA could share medical record information with non-Department entities for the purpose of providing health care to patients or performing other health care related activities and remove certain restrictions on VA's ability to recover funds from third parties for the cost of non-service-connected care.

***Sec. 133. Competency standards for non-Department of Veterans Affairs health care providers.***

Section 133 would require VA to establish competency standards for non-Department providers in treating veterans for injuries and illnesses that VA has a special expertise in, such as post-traumatic stress disorder, traumatic brain injury, and military sexual trauma. This section would also direct that all non-Department providers, to the extent practicable as determined by VA, meet these standards before furnishing care.

***Sec. 134. Department of Veterans Affairs participation in national network of State-based prescription drug monitoring program.***

Section 134 would allow any licensed health care provider or delegate to be considered an authorized recipient and user for the purposes of querying and receiving data from the national network of State-based prescription drug monitoring programs. Under this authority, licensed health care providers or delegates would be required to query the network in accordance with applicable VA regulations and policies and no State would be authorized to restrict the access of licensed health care providers or delegates from accessing that State's prescription drug monitoring programs.

**Chapter 5 - Other Non-Department Health Care Matters**

***Sec. 141. Plans for Use of Supplemental Appropriations Required.***

Section 141 would require VA to submit to Congress a justification for any new supplemental appropriations request submitted outside of the standard budget process no later than 45 days before the date on which a budgetary issue would start affecting a program or service. It would also require a detailed strategic plan on how VA intends to

use the requested appropriation and for how long the requested funds are expected to meet the need.

***Sec. 142. Veterans Choice Fund flexibility.***

Section 142 would amend section 802 of the Choice Act to authorize VA, beginning March 1, 2019, to use the remaining Veterans Choice Fund to pay for any health care services under Chapter 17 of Title 38 at non-Department facilities or through non-Department providers furnishing care in VA facilities.

***Sec. 143. Sunset of Veterans Choice Program.***

Section 143 would provide a sunset date for the Veterans Choice Program one year after the date of enactment of this Act.

***Sec. 144. Conforming amendments.***

Section 144 would repeal and replace existing authorities to account for changes made by section 101 of the bill to consolidate and create the Veterans Community Care program.

**Subtitle B - Improving Department of Veterans Affairs Health Care Delivery**

***Sec. 151. Licensure of health care professionals of the Department of Veterans Affairs providing treatment via telemedicine.***

Section 151 would create a new authority to allow VA health care professionals to practice telemedicine regardless of the location of the provider or patient during the treatment. The section would also make clear that telemedicine does not need to be delivered in a Federal facility.

The section would also invoke Federal supremacy regarding state telemedicine delivery laws and regulations to ensure uniform care delivery nationally. It would define a “covered health care professional” as a VA employee who is authorized to furnish health care and is required to adhere to all quality standards relating to the provision of medicine in accordance with VA policies. It would require VA to submit a report to Congress within 1 year of enactment, providing data on provider and patient satisfaction, the effect of telemedicine on patient wait-times, health care utilization, and other measures.

***Sec. 152. Authority for Department of Veterans Affairs Center for Innovation for Care and Payment.***

Section 152 would establish a VA Center for Innovation for Care and Payment. VA, acting through the Center, would be authorized to carry out such pilot programs as appropriate to develop new, innovative approaches to testing payment and service

delivery models to reduce expenditures while preserving or enhancing the quality of and access to care furnished by VA. VA, acting through the Center, would be required to test payment and service delivery models to determine whether such models improve the quality of, access to, or patient satisfaction of such care and services, as well as the cost savings associated with such models. VA would be required to test models where VA determines that there is evidence that the model addresses a defined population for which there are deficits in care leading to poor clinical outcomes or potentially avoidable expenditures. VA would be required to focus on models expected to reduce program costs while preserving or enhancing the quality of or access to care VA provides. VA would be authorized to consider a number of different factors in selecting models to test. The models tested under this program could not be designed in such a way as to allow the United States to recover or collect reasonable charges from a Federal health care program (including Medicare, Medicaid, and TRICARE) for care or services furnished by VA to veterans.

Pilot programs would be authorized to last no longer than 5 years and VA would be prohibited from carrying out more than 10 programs concurrently.

VA would be required to ensure that pilot programs are carried out in different areas that are appropriate for the purposes of the pilot program and must include both urban and rural areas and both large and small VA medical centers.

Funding for the pilot programs would be derived from appropriations provided in advance in appropriations acts for VHA and from appropriations provided for information technology systems. VA would be prohibited from expending more than \$50 million per fiscal year. This could be increased with written consent from HVAC/SVAC Chairmen.

VA would be required to publish information about such pilot programs in the Federal Register and take reasonable actions to provide direct notice to veterans eligible to participate in a pilot program and advocates for veterans, to ensure veterans have information about such pilot programs.

In implementing the pilot programs under this section, VA would be authorized to waive such requirements in subchapters I, II, and III of chapter 17 of title 38, U.S.C., as may be necessary solely for the purpose of carrying out this section with respect to testing models under this program. Before VA could waive any of these authorities, VA would have to submit a report to Congress explaining the authorities to be waived and the reasons for such waivers, along with other information. Upon receipt of a report from VA, Congress would be required to submit the report to each standing committee with jurisdiction to report a bill to amend the provision or provisions of law that would be waived. If Congress enacted a bill or joint resolution approving the requested waiver in its entirety, VA would be allowed to act upon that waiver.

The waiver provisions would not be available unless VA submits the first proposal for waiver for a pilot program within 18 months of the date of the enactment.



If VA determines that a pilot program is not improving the quality of or access to care or producing cost savings, VA would have authority to propose a modification to the pilot program or terminate the program within 30 days of submitting an interim report to Congress.

VA would be required to conduct an evaluation of each model tested, to include, at a minimum, an analysis of the quality of and access to care furnished and the changes in spending by reason of that model. VA would be required to make each evaluation available to the public in a timely fashion.

VA would be required to obtain advice from the Special Medical Advisory Group in the development and implementation of any pilot program operated under this section.

VA would be authorized to expand, through rulemaking, the duration and scope of successful pilot programs to the extent VA determines that such expansion is expected to reduce spending without reducing the quality of or access to care or improve the quality of or access to care without increasing spending; VA would also have to determine that such expansion would not deny or limit the coverage or provision of benefits for applicable individuals.

***Sec. 153. Authorization to provide for operations on live donors for purposes of conducting transplant procedures for veterans.***

Section 153 would also authorize VA to support the cost of a donor transplant operation (including peri-operative care) for a live donor who is not a veteran but who is donating an organ for a veteran in a VA facility or community facility.

**Subtitle C - Family Caregivers**

***Sec. 161. Expansion of Family Caregiver Program of Department of Veterans Affairs.***

Section 161 would expand eligibility for VA's Program of Comprehensive Assistance for Family Caregivers to veterans with a serious injury incurred or aggravated in the line of duty in the active military, naval, or air service on or before May 7, 1975, during the 2-year period following the date on which the VA Secretary submits to Congress a certification that VA has fully implemented the information technology system required by section 302(a) of the bill. After the date that is 2 years after the date on which the certification is submitted, eligibility would be expanded to also include veterans with a serious injury incurred or aggravated in the line of duty in the active military, naval, or air service after May 7, 1975, and before September 11, 2001.

***Sec. 162. Implementation of information technology system of Department of Veterans Affairs to assess and improve the family caregiver program.***

Section 162 would require VA to implement an information technology system that fully supports the Family Caregiver Program and allows for data assessment and comprehensive monitoring by not later than October 1, 2018.

***Sec. 163. Modifications to annual evaluation report on caregiver program of Department of Veterans Affairs.***

Section 163 would amend requirements in Public Law 111-163 for VA's annual evaluation report on the Program of Comprehensive Assistance for Family Caregivers and the Program of General Caregiver Support to include a description of any barriers to accessing and receiving care and services. The report on the Program of Comprehensive Assistance for Family Caregivers would also include an evaluation of the sufficiency and consistency of the training provided to family caregivers.

**Title II - the VA Asset and Infrastructure (AIR) Review Act**

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**Subtitle A - Asset and Infrastructure Review**

***Sec. 202. The Commission***

Section 202 would establish a nine member Asset and Infrastructure Review (AIR) Commission.

The President would be required to:

- Appoint AIR Commissioners with the advice and consent of the Senate, and to transmit nominations to the Senate by May 31, 2021.
- Consult with the Speaker and Minority Leader of the House of Representatives, and the Majority and Minority Leaders of the Senate in selecting individuals for Commission nomination and congressionally chartered, membership-based veterans service organizations (VSOs) specifically concerning the appointment of three members.
- Nominate one person to serve as the Chair of the Commission and one person to serve as the Vice Chair of the Commission.
- In nominating individuals for appointment to the Commission, to ensure: that veterans (reflecting current demographics of veterans enrolled in the VA health care system) are adequately represented in the membership of the Commission; that at least one member of the Commission has experience with a private integrated health care system that has annual gross revenue of more than \$50 million; that at least one member has experience as a senior manager for a FQHC, the Department of Defense, or the Indian Health Service; that at least one member has experience with capital asset management for the Federal government and is familiar with trades related to building and real property (including construction, engineering, architecture, leasing, and strategic partnerships); and, that at least three members represent congressionally-chartered, membership-based VSOs.

The Commission would meet during calendar years 2022 and 2023 and be terminated on December 31, 2023.

Each meeting of the Commission would be required to be open and all proceedings, information, and deliberations of the Commission would be available for review. A vacancy in the Commission would be filled in the same manner as the original appointment, but the individual appointed to fill the vacancy would serve only for the unexpired portion of the term for which the individual's predecessor was appointed.

Commissioners would be required to serve without pay and each member of the Commission who is an officer/employee of the United States would only receive compensation for their services as an officer/employee of the U.S. Commissioners would be allowed to receive travel expenses, including per diem.

The Commission would be required to appoint a Staff Director who has not served as a VA employee during the one-year period preceding the date of appointment and who is not otherwise barred or prohibited from serving as Director under Federal ethics law and regulations by reason of post-employment conflict of interest and require the Director to be paid at the rate of basic pay payable for level IV of the Executive Schedule. The Staff Director would be required, with the approval of the Commission, to appoint and fix the pay of additional personnel and to make such appointments without regard to the provisions of title 5 U.S.C. governing appointments in the competitive service and any personnel so appointed to be paid without regard to provisions relating to the classification and General Schedule pay rates except that an individual so appointed may not receive pay in excess of the annual rate of basic pay payable for GS-15. Not more than two-thirds of the personnel employed by or detailed to the Commission to be on detail from VA and not more half of the professional analysts to be detailed from VA.

A person would be prohibited from being detailed to the Commission from VA if, within 6 months before the detail is set to begin, the person participated personally or substantially in any matter concerning the preparation of recommendations regarding VA medical facilities. Any Federal department or agency would be authorized to detail personnel to the Commission upon request.

The Commission would be allowed to secure necessary information from Federal agencies and Federal agencies to furnish such information upon request; to procure, by contract to the extent funds are available, the temporary or intermittent services or experts of consultants; and to the extent funds are available, to lease real property and acquire personal property either of its own accord or in consultation with the General Services Administration (GSA).

The restriction of lawful communication from a VA employee to the Commission would be prohibited.

***Sec. 203. Procedure for Making Recommendations.***

Section 203 would require VA, not later than February 1, 2021, and after consulting with VSOs, to publish in the Federal Register and transmit to the Committees on Veterans' Affairs of the House of Representatives and the Senate (HVAC/SVAC) the criteria proposed by VA to be used in assessment and making recommendations regarding the modernization or realignment of VHA facilities and require such criteria to include the veterans preference regarding access to VA health care. There would be a 90-day public comment period for VA's proposed criteria.

Not later than May 31, 2021 - VA would be required to publish in the Federal Register and transmit to HVAC/SVAC, the final criteria to be used in making recommendations regarding the modernization or realignment of VHA facilities.

Not later than January 31, 2022 - and after consulting with VSOs - VA would be required to publish in the Federal Register and transmit to HVAC/SVAC a report detailing recommendations regarding the modernization or realignment of VHA facilities. VA would be required to consider the following factors in making recommendations regarding the modernization or realignment of VHA facilities: the degree to which health care delivery or other site for providing services to veterans reflect VA's metrics regarding market area health system planning; the provision of effective and efficient access to high-quality health care and services to veterans; the extent to which real property that no longer meets the needs of the Federal Government could be reconfigured, repurposed, consolidated, realigned, exchanged, outleased, replaced, sold, or disposed; VHA's need to acquire infrastructure or facilities that will be used for the provision of health care and service to veterans; the extent to which operation and maintenance costs are reduced through consolidating, colocating, and reconfiguring space and through realizing other operational efficiencies; the extent and timing of potential costs and savings, including the number of years such costs and savings will be incurred, beginning with the date of completion of the proposed recommendation; the extent to which the real property aligns with VA's mission; the extent to which any action would impact other VA missions including education, research, or emergency preparedness; local stakeholder inputs and any factors identified through public field hearings; capacity and commercial market assessments; and, any other factors VA determines appropriate.

VA would be further required to assess the capacity of each Veterans Integrated Service Network (VISN) and VA medical facility to furnish hospital care or medical services to veterans and each assessment would be required to:

- Identify existing deficiencies in the furnishing of care and services to veterans and how such deficiencies may be filled by entering into contracts or agreements with community health care providers or other entities under other provisions of law and changing the way care and services are furnished at such VISNs or VA medical facilities (including through extending hours of operation, adding personnel, and expanding treatment space through construction, leasing, or sharing of health care facilities);

- Forecast both the short-term and long-term demand in furnishing care and services at such VISN or VA medical facility;
- Consider how demand affects the need to enter into contracts or agreements;
- Consider the commercial health care market of designated catchment areas conducted by a non-governmental entity; and
- Consider the unique ability of the Federal government to retain a presence in a rural area otherwise devoid of commercial health care providers or from which such providers are at risk of leaving.

In carrying out the assessments, VA would be required to consult with VSOs and veterans served by each VISN and medical facility affected by the assessment. VA would also be required to:

- Submit the local capacity and commercial market assessments to HVAC/SVAC with the recommendations regarding the modernization or realignment of VHA facilities and to make the assessments publically available.
- Include with the recommendations regarding the modernization or realignment of VHA facilities a summary of the selection process that resulted in the recommendation for each VHA facility and a justification for each recommendation and to transmit the summaries and justifications not later than 7 days after the date of transmittal to HVAC/SVAC.
- Consider all facilities equally without regard to whether the facility has been previously considered or proposed for reuse, modernization, or realignment.
- Make all information used by VA to prepare a recommendation available to the Commission and the Comptroller General.

Each VA Under Secretary, VISN director, VA medical center director, VA program office director, and each person who is in a position of duties which includes personal and substantial involvement in the preparation and submission of information and recommendations concerning the modernization or realignment of VHA facilities would be required to certify that information submitted to VA or to the Commission concerning the modernization or realignment of VHA facilities is accurate and complete to the best of that person's knowledge and belief.

The Commission would be required to: conduct public hearings on the Secretary's recommendations regarding the modernization or realignment of VHA facilities, to include required public hearings in regions affected by a VA recommendation for the closure of a facility and, to the greatest extent practicable, public hearings in regions affected by a recommendation for another (non-closure) action by VA. Each public hearing would be required to include, at a minimum, a local veteran who is enrolled in the VA healthcare system and identified by a local VSO and a local elected official.

The Commission – not later than January 31, 2023 – would be required to transmit to the President a report and analysis of the recommendations made by VA together with the Commission's recommendations for the modernization or realignment of VHA



facilities. The Commission would be authorized to change a recommendation made by VA for the modernization or realignment of a VHA facility only if the Commission: determines that VA deviated substantially from VA's final criteria in making such recommendation; determines that the change is consistent with the final criteria; publishes a notice of the proposed change in the Federal Register not less than 45 days before transmitting the Commission's recommendations to the President; and, conducts public hearings on the proposed change. The Commission would be required to explain and justify any recommendation made by the Commission that is different from the recommendations made by VA in the Commission's report that is transmitted to the President and to transmit the copy of such report to HVAC/SVAC on the same day that it is transmitted to the President. The Commission – after January 31, 2023 – would be required to promptly provide information used by the Commission in making its recommendations to any Member of Congress upon request.

The President – not later than February 15, 2023 – would be required to transmit to the Commission and to Congress a report containing the President's approval or disapproval of the Commission's recommendations. If the President approves of the Commission's recommendations, the President would be required to transmit a copy of the Commission's recommendations together with a certification of approval. If the President disapproves of the Commission's recommendations in whole or in part, the President would be required to transmit to the Commission and the Congress the reasons for that disapproval and require the Commission – not later than March 15, 2023 – to transmit a report containing the Commission's findings and conclusions based on a review and analysis of those reasons for disapproval provided by the President, with recommendations the Commission determines appropriate to the President. If the President approves of the Commission's revised recommendations, the President would be required to transmit a copy of the revised recommendations to Congress together with a certification of such approval. The process for modernization or realignment of VHA facilities would terminate if the President does not transmit a certification of approval to Congress by March 30, 2023.

#### ***Section 204. Actions regarding Infrastructure and Facilities of the Veterans Health Administration.***

Section 204 would require VA to initiate or begin the planning of all actions recommended by the Commission in the report transmitted to Congress by the President no later than three years after the date in which the President transmits such report. VA must provide detailed information on the budget for such modernizations or realignments in documents submitted to Congress by the Secretary in support of the President's budget for that fiscal year in which any implementation takes place. VA would be prohibited from carrying out any action recommended by the Commission in the report transmitted to Congress by the President if a joint resolution is enacted in accordance with section 107 before the earlier of the end of the 45-day period beginning on the date in which the President transmits such report or the adjournment of Congress sine die for the session during which the report is transmitted. The days in

which either House of Congress is not in session because of an adjournment of more than three days would be excluded from the 45-day period.

***Section 205. Implementation.***

Section 205 would authorize VA to:

- Take such action as may be necessary to modernize or realign any VHA facility (including the acquisition of such land, construction of replacement facilities, the performance of such activities, and the conduct of such advance planning and design as may be required to transfer functions from a VHA facility to another facility) and may use funds in the account or funds appropriated to VA for such purposes;
- Carry out such activities for the purposes of environmental restoration and mitigation at any VHA facilities and use funds in the Account for such purposes;
- Reimburse other Federal agencies for actions performed at VA's request with respect to such closure or realignment and use for such purposes funds in the Account or otherwise appropriated to VA and available; and
- Exercise the authority under chapter 81 of title 38 U.S.C.

VA would be required to:

- Carry out environmental abatement, mitigation, and restoration and compliance with historical preservation requirements with regard to any property made excess to VA's needs as a result of modernization or realignment.
- Consult with the Governor of a State and the heads of local governments concerned for purposes of considering any plan for the use of such property by the local community concerned before any action is taken with respect to disposal or any surplus real property or infrastructure.
- Consult with the Governor of a State and the heads of local government for the purpose of considering the continued availability of a road for public access through, into, or around a VHA facility that is to be modernized or realigned.

VA would be authorized to transfer the title of a VA medical facility approved for closure or realignment, which will be retained by VA or another Federal agency, to a redevelopment authority who agrees to lease, directly upon transfer and without requiring rental payments, one or more portions of the transferred property to VA or the head of another Federal department or agency for a term not to exceed 50 years (but which may provide options for renewal or extension). Such a lease would be required to include a provision specifying that, if the concerned entity ceases requiring the use of the leased property before the expiration of the lease, the remainder of the lease term may be satisfied by the same or a different Federal department or agency for a similar use in consultation with the redevelopment authority. The Federal department or agency

lessee would be authorized to obtain facility services for the leased property and common area maintenance (to include municipal services and firefighting or security guard functions) from the redevelopment authority or assignee at a rate no higher than the rate charged to a non-Federal tenant and to exclude those services that the State or local government is required by law to provide without direct charge.

VA would be authorized to close or realign VA medical facilities under this title without regard to any provision of law restricting the use of funds for such actions included in any appropriations or authorization Act. VA would also be authorized to enter into an agreement to transfer by deed a VA medical facility with any person who agrees to perform all environmental restoration, waste management, and environmental compliance activities that are required under Federal and State laws, administrative decisions, agreements, and concurrences and to require additional terms and agreements as appropriate. Such transfer agreement would only be authorized if VA certifies to Congress that all costs otherwise paid by VA with respect to that facility are equal to or greater than the fair market value of the property of facility to be transferred or, if such costs are lower, the recipient of such transfer agrees to pay the difference and authorize VA to pay the recipient an amount equal to the lesser of the two such amounts.

VA would be required to disclose information regarding environmental restoration, waste management, and environmental compliance activities before entering into a deed transfer.

***Section 206. Department of Veterans Affairs Asset and Infrastructure Review Account.***

Section 206 would establish a VA AIR Account to be administered by VA. The following would be credited to the Account: funds authorized and appropriated to the Account; funds transferred to the Account for any purpose except that funds may only be transferred after the latter of the dates in which VA transmits written notice of and justification for such transfer to HVAC/SVAC and receives approval of such transfer from the House and Senate Committees on Appropriations; and, proceeds received from the lease, transfer, or disposal of any VHA property.

VA would be authorized to use the Account to carry out the AIR Act; to cover property management and disposal costs incurred at VHA facilities; to cover costs associated with the supervision, inspection, overhead, engineering, and design of construction projects undertaken under the AIR Act and subsequent claims related to such activities; and, other purposes the VA determines support the mission and operations of VA.

VA would be required to establish and include in the budget submission a consolidated budget justification display in support of the Account for each fiscal year that details the amount and nature of credits to and expenditures from the Account during the preceding fiscal year, separately details the environmental remediation costs associated with the VHA facility for which a budget request is made, specifies the transfers into the

Account and the purposes for which those transferred funds will be further obligated (to include caretaker and environmental remediation costs), and details any intra-budget activity transfers with the Account that exceeded \$1 million. VA would also be required to transmit to Congress a report containing an accounting of all the funds credited to and expended from the Account or otherwise expended and any funds remaining in the Account. The Account would be required to be closed at the time and in the manner provided under section 1555 of title 31 U.S.C. and unobligated funds to be held by the Treasury until transferred to VA.

### ***Section 207. Congressional consideration of Commission Report.***

Section 207 would define certain expedited procedures for the Congressional consideration of the AIR Commission report.

### ***Section 208. Other Matters.***

Section 208 would require VA to publish any information transmitted or received by VA, the Commission, or the President regarding the AIR Act online within 24 hours. VA would be prohibited from pausing major or minor construction activities as a result of the AIR Act. VA would be authorized – after consulting with VSOs – to include a recommendation for a future AIR Commission or other capital asset realignment and management process in a budget submission.

### ***Section 209. Definitions.***

Section 109 would define:

- “Account” as the VA AIR Account established by section 106.
- “Commission” as the AIR Commission established by section 102.
- “date of approval” with respect to a modernization or realignment of a VHA facility as the date on which the authority of Congress to disapprove a recommendation of under this title expires.
- “VHA facility” as: (1) any land, building, structure, or infrastructure (including any medical center, nursing home, domiciliary facility, outpatient clinic, center that provides readjustment counseling, or leased facility) that is under VA’s jurisdiction, under VHA’s control, and not under GSA’s control; and, (2) with respect to a collocated VA facility, includes any land, building, or structure that is under VA’s jurisdiction, under control of another VA administration, and not under GSA’s control.
- “infrastructure” as improvements to land other than buildings or structures.
- “modernization” as any action required to align the form and function of a VHA facility to the provision of modern day health care (including utilities and environmental control systems), the closure, construction purchase, lease, or sharing of a VHA facility, and realignments, disposals,

exchanges, collaborations, between VA and other Federal entities and strategic collaborations between VA and non-Federal entities.

- “realignment” with respect to a VHA facility to include any action that changes the number of or relocates services, functions, and personnel positions; disposals or exchanges between VA and other Federal entities including DOD; and, strategic collaborations between VA and non-Federal entities.
- “Secretary” to mean the Secretary of Veterans Affairs.
- “redevelopment authority” to mean, in the case of a VHA facility closed or modernized under this title, any entity (including an entity established by a State or local government) recognized by VA as the entity responsible for developing the redevelopment plan with respect to the facility or for directing the implementation of such a plan.
- “redevelopment plan” in the case of a VHA facility to be closed or realigned to mean a plan that is agreed to by the local redevelopment authority with respect to the facility and provides for the reuse or redevelopment of the real property and personal property of the facility that is available for such reuse and redevelopment as a result of the closure or realignment of a facility.

## **Subtitle B - Other Infrastructure Matters**

### ***Sec. 211. Improvement to training of construction personnel.***

Section 211 would require VA to implement a training and certification program for construction and facilities management personnel. VA would be required to create the training and certification program within one year of enactment, to ensure a majority of covered employees are certified within two years of enactment, and to ensure that all covered employees are certified as quickly as possible thereafter. VA would be required to model the training and certification program on existing curricula and certification programs in title 10 U.S.C. (namely, the existing Defense Acquisition Workforce Improvement Act program). VA would be authorized to provide the training in-person, online, provided by another Federal department or agency, or a combination of the above. VA would be authorized to offer one or more than one level of certification and to enter into a contract with an appropriate entity to provide the training curriculum and certification. All VA employees who are members of occupational series relating to construction or facilities management or VA employees who award or administer contracts for major construction, minor construction, or non-recurring maintenance (including contract specialists or contracting officers’ representatives) would be included.

### ***Sec. 212. Review of enhanced use leases.***

Section 212 would require the Office of Management and Budget to review each enhanced-use lease (EUL) before it goes into effect to determine whether it is in compliance with relevant statutes.



***Section 213. Assessment of health care furnished by the Department to veterans who live in the Pacific territories.***

Section 213 would require VA to submit a report to Congress on the care provided to veterans in Pacific territories, to include whether it would be feasible for VA to establish a medical facility in any Pacific territory that does not contain such a facility.

***Title III - Improvements to Recruitment of Health Care Professionals***

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***Sec. 301. Designated scholarships for physicians and dentists under Department of Veterans Affairs Health Professional Scholarship Program.***

Section 301 would provide scholarships to medical students in exchange for service to VA. A minimum of two to four year scholarships for medical and dental students would be required so long as the shortage of those positions exceed 500. Once the number falls below 500, the minimum number of scholarships provided annually would be at least ten percent of the number of positions deemed in shortage. The obligation requirement for the scholarship is successful completion of residency training leading to board eligibility in a specialty and 18 months of clinical service at a VA facility for each year of scholarship support. Section 301 would also authorize VA to provide preference to veterans and require VA to conduct annual advertising to educational institutions.

***Sec. 302. Increase in maximum amount of debt that may be reduced under Education Debt Reduction Program of Department of Veterans Affairs.***

Section 302 would increase the amount of education debt reduction available through the Education Debt Reduction Program from \$120,000 to \$200,000 over five years and \$24,000 to \$40,000 annually.

***Sec. 303. Establishing the Department of Veterans Affairs Specialty Education Loan Repayment Program.***

Section 302 would establish a new loan repayment program for medical or osteopathic student educational loans for newly graduated medical students, or residents with at least 2 years of training remaining, who are training in specialties deemed by VA to be experiencing a shortage.

The loan repayment would be \$40,000 per year for a maximum of \$160,000. In exchange for the loan repayment, the recipient would agree to obtain a license to practice medicine, complete training leading to board eligibility in a specialty, and to serve in clinical practice at a VA facility for a period of 12 months for each \$40,000 of loan repayment with a minimum of 24 months of obligated service. Because resident salaries are much lower than salaries for fully trained clinicians, this would make the loan repayment is more economically meaningful and allow VA to fund specialty positions in shortage areas, develop a predictable future physician workforce, and ensure a cadre of young physicians are able to join VA's physician workforce.

***Sec. 304. Veterans healing veterans medical access and scholarship program.***

Section 303 would establish a pilot program for supporting four years of medical school education costs for two veterans at each of the five Teague-Cranston Schools and the four traditional black medical schools. The covered medical schools would include Texas A&M College of Medicine, Quillen College of Medicine at East Tennessee State University, Boonshoft School of Medicine at Wright State University, Edwards School of Medicine at Marshall University, the University of South Carolina School of Medicine, Drew University of Medicine and Science, Howard University of Medicine, Meharry Medical College, and Morehouse School of Medicine. The medical schools that opt to participate in the program would be required to reserve two seats each in the class of 2019. Eligible veteran scholarship recipients would be those within ten years of military discharge who are not eligible for GI Bill benefits but who meet the minimum admission requirement for medical school and apply for the entering class of 2019. The scholarship recipients would agree to successfully complete medical school, obtain a license to practice medicine, complete post-graduate training leading to board eligibility in a specialty applicable to VA, and after training, serve in clinical practice at a VA facility for four years.

***Sec.305. Bonuses for recruitment, relocation, and retention.***

Section 305 would repeal the recruitment, retention, and relocation bonus offset from CARA.

***Sec. 306. Inclusion of Vet Center employees in Education Debt Reduction Program of Department of Veterans Affairs.***

Section 306 would require VA to ensure that clinical staff working at Vet Centers are eligible to participate in the Education Debt Reduction Program.

***Title IV - Health Care in Underserved Areas***

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***Sec. 401. Development of criteria for designation of certain medical facilities of the Department of Veterans Affairs as underserved facilities and plan to address problem of underserved facilities.***

Section 401 would require VA to: (1) develop criteria to designate VA medical facilities as underserved facilities; (2) consider a number of factors with respect to such facilities, including the ratio of veterans to providers; the range of specialties covered; whether the local community is medically underserved; the type, number, and age of open consults; and whether the facility is meeting VA's wait time goals; (3) perform an analysis not less than annually to determine which facilities qualify as underserved; and (4) submit a plan to Congress, within one year of enactment and not less frequently than annually, to address underserved facilities.

***Sec. 402. Pilot program to furnish medical deployment teams to underserved facilities.***

Section 402 would require VA to carry out a three year pilot program to furnish mobile deployment teams of medical personnel to underserved facilities and to consider the medical positions of greatest need at such facilities and the size and composition of teams to be deployed. VA would be required to use the analysis required under section 401 to form the mobile deployment teams and required to report to Congress on VA's progress with implementing the pilot program and recommendations with respect to extending or expanding the pilot and making it permanent.

***Sec. 403. Pilot program on graduate medical education and residency.***

Section 403 would require VA to establish a pilot program to establish medical residency programs at covered facilities, including VA facilities, a facility operated by an Indian tribe or tribal organization, an Indian Health Service facility, a Federally-qualified health center, or a DOD facility. It would also require VA to consider a number of factors with respect to clinical need for providers when determining facilities to place residents and to report regularly to Congress on the implementation of the pilot.

**Title V - Other Matters**

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***Sec. 501. Annual report on performance awards and bonuses awarded to certain high-level employees of the department.***

Section 501 would require VA to submit an annual report to Congress on performance awards and bonuses presented to Regional Office Directors, VAMC Directors, VISN Directors, and SES positions, including the amount of each award or bonus, the job title of the individual receiving the award or bonus, and the location where each individual works.

***Sec. 502. Role of podiatrists in Department of Veterans Affairs.***

Section 2 of the bill would stipulate that a VA podiatrist is eligible to be appointed to a supervisory position to the same degree that a VA physician is eligible to be appointed to such a position. To ensure appropriate supervision of specialty providers within the VA healthcare system, section 2 of the bill would also require VA to work with appropriate stakeholders to establish standards to ensure that specialists appointed to supervisory positions do not provide direct clinical oversight for purposes of peer review or practice evaluation for providers of other clinical specialties. Further, section 2 of the bill would make DPMs equal to Doctors of Osteopathy (DOs) and VA Medical Doctors (MDs) in terms of pay within the VA healthcare system.

***Sec. 503. Definition of major medical facility project.***

Section 503 would modify the definition of a VA major medical facility project as a

project for the construction, alteration, or acquisition of a medical facility involving a total expenditure of \$20 million (was previously \$10 million) excluding the construction, alteration, or acquisition of a shared medical facility or acquisitions by exchange, non-recurring maintenance, and shared facilities in which VA's estimated costs do not exceed \$20 million.

***Sec. 504. Authorization of certain major medical facility projects of the Department of Veterans Affairs.***

Section 504 would authorize a VA major medical facility projects in Livermore, California, in an amount not to exceed \$117.3 million.

***Sec. 505. Department of Veterans Affairs personnel transparency.***

Section 505 would require VA to make information regarding vacancies, accessions and separation actions, new hires, and personnel encumbering positions publically available on a VA website; require an Inspector General review of the website on a semi-annual basis; and require VA to report to Congress annually on the steps VA is taking to achieve full staffing capacity, including the amount of additional funds necessary to enable VA to reach full staffing capacity.

***Sec. 506. Program on establishment of peer specialists in patient aligned care team settings within medical centers of Department of Veterans Affairs.***

Section 506 would require VA to carry out a program to place at least 2 peer specialists within patient aligned care teams in certain VAMCs to promote the use and integration services for mental health, substance use disorder, and behavioral health in a primary care setting.

***Sec. 507. Department of Veterans Affairs medical scribe pilot program.***

Section 2 of the bill would create a two-year pilot program under which VA will increase the use of medical scribes in emergency department and specialty care settings at 10 VA medical centers. To provide transparency on staffing methodology for medical scribes at the Department, this pilot would have half of the participating scribes be employed by the Department, with half employed under contract with a private-sector provider of medical scribes. Under this legislation, VA would be required to report to Congress every 180 days regarding the effects the pilot program has had on provider efficiency, patient satisfaction, average wait time, the number of patients seen per day and the amount of time required to train an employee to perform medical scribe functions under the pilot program. A report from the Comptroller General is also required not more than 90 days after the conclusion of the pilot.

***Sec. 508. Loans guaranteed under home loan program of Department of Veterans Affairs.***

Section 508 would extend VA's authority to collect certain funding fees for housing loans guaranteed by the VA through September 30, 2028.

***Sec. 509. Extension of reduction in amount of pension furnished by Department of Veterans Affairs for certain veterans covered by Medicaid plans for serviced furnished by nursing facilities.***

Section 509 would extend current eligibility restrictions for recipients of a VA pension who receive Medicaid-covered nursing home care through September 30, 2028.

***Sec. 510. Appropriation of amounts.***

Section 510 would authorize and appropriate \$5.2 billion to the Veterans Choice Fund.

***Sec. 511. Technical correction.***

Section 511 would redesignate section 1712I of title 38 U.S.C. as section 1720I of title 38 U.S.C.



## CCO 2.0 Policy Development Draft Policy Options – For Review by OHPB 6/5/18

Following is a list of the guiding questions, policy goals or themes, and potential options and strategies that have been explored as part of the CCO 2.0 policy development process. These policies have been publicly reviewed by experts, stakeholders, and partners from January to May 2018, and public input has been incorporated whenever possible. This list will be discussed at the June 5 Oregon Health Policy Board meeting.

### Behavioral Health

| BH – Guiding Questions           | Policy Options/Goals   | Potential Strategies   | Key    |
|----------------------------------|--|--|--------|
| How will we measure integration? | Improve integration of behavioral health care by 1) <b>establishing a definition</b> of integration; 2) <b>identifying metrics</b> to track milestones of integration; 3) <b>identifying expected outcomes</b> and measures. | <ul style="list-style-type: none"> <li>OHA to refine definition of integration and add to the CCO contract</li> <li>Identify metrics to track milestones of integration by completing an active review of each CCOs plan to integrate services that incorporates a score for progress</li> <li>Increase technical assistance resources for CCOs to assist them in integrating care and meeting metrics.</li> </ul>   | ∞      |
|                                  | <b>Enhance electronic health record (EHR) and health information technology (HIT) to improve integration</b>   | <ul style="list-style-type: none"> <li>Develop an incentive program to support BH providers' investments in EHR</li> <li>Require CCOs support EHR adoption across behavioral health contracted providers</li> <li>Require CCOs ensure contracted BH providers have access to technology that enables sharing patient information for care coordination</li> <li>Require CCOs ensure contracted BH providers have access to timely hospital event notifications, and require CCO utilization of hospital event notifications</li> </ul> | ♦      |
| How can we encourage             | <b>Implement Behavioral Health Home recognition program.</b>   | <ul style="list-style-type: none"> <li>Identify, promote and expand programs that integrate primary care in behavioral health settings</li> </ul>  | 5<br>∞ |

5 = P-5 opportunity or focus

∞ = opportunity for standardizing

‡ = state or federal requirement

♦ = incentive pool impact

\* = impact on reporting/measurement

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| BH – Guiding Questions  | Policy Options/Goals  | Potential Strategies  | Key         |
|---|---|---|-------------|
| investment in behavioral health and hold CCOs accountable for these investments?  | Address billing barriers between physical and behavioral health   | <ul style="list-style-type: none"> <li>Identify billing system and policy barriers that prevent BH providers from billing from a physical health setting</li> <li>Develop payment methodologies to reimburse for warm handoffs, impromptu consultations and integrated care management services</li> <li>Examine equality in BH and PH reimbursement</li> <li>Implement strategies from existing workgroups that are addressing integrated billing barriers</li> </ul>                                    | 5           |
|   | Align CCO procurement process and contracting with Oregon Performance Plan (OPP), Behavioral Health Collaborative (BHC) and Medicaid Waiver                         | <ul style="list-style-type: none"> <li>Clear ownership of BH benefit by the CCO</li> <li>OPP to be included in 2019 CCO contract extension</li> <li>BHC alignment will include standardized assessments, workforce retention and recruitment, core competencies for workforce, risk sharing with Oregon State Hospital</li> <li>Mental health residential benefit and capacity management</li> </ul>  | ∞<br>*<br>‡ |
|   | Establish care coordination standards for integrated care   | <ul style="list-style-type: none"> <li>Require CCOs to ensure a care coordinator is identified for individuals with Severe and Persistent Mental Illness (SPMI) and for children with Serious Emotional Disturbances (SED)</li> <li>Develop standards for care coordination</li> <li>Establish outcome measure tool for Care Coordination</li> </ul>  | 5<br>∞<br>* |
| How can we ensure that the system has the workforce to achieve expected outcomes? | Direct service providers are using evidence-based practices and emerging practices  | <ul style="list-style-type: none"> <li>Update OHAs recommended clinical practices</li> <li>Require outcome measures or metrics for research based practices</li> <li>CCOs provide clinical trainings or funding to their provider network</li> <li>Incentivize use of best practices and emerging practices</li> </ul>  | ∞<br>*      |
|   | Identify and implement culturally and linguistically specific best practices to ensure access to and utilization of culturally and linguistically specific programs | <ul style="list-style-type: none"> <li>Implement the Behavioral Health Collaborative recommendations: assessment of the BH workforce; update BH Mapping tool; recruitment and retention plan; competencies for integrated BH workforce; standardized suicide risk assessment</li> <li>Require CCOs develop best practices to outreach to culturally specific populations</li> <li>Develop a diverse behavioral health workforce who can provide culturally and linguistically appropriate care</li> </ul> | 5<br>∞      |

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| BH– Guiding Questions  | Policy Options/Goals  | Potential Strategies  | Key    |
|--|---|---|--------|
|  |   | <ul style="list-style-type: none"> <li>Implement the recommendations of the Traditional Health Workers Commission</li> </ul>  |        |
| How do we ensure that children receive comprehensive behavioral health services no matter where they live in Oregon? | Ensure access to a behavioral health continuum of care across the lifespan  | <ul style="list-style-type: none"> <li>Prioritize access to early intervention (0-5)</li> <li>Develop mechanism to assess adequacy services across the continuum of care</li> <li>Require CCOs ensure gaps in the continuum of care are addressed and that consumers have access to a diverse provider network</li> </ul>   | 5<br>∞ |
|  | Ensure there are ample incentives and opportunities to work across systems  | <ul style="list-style-type: none"> <li>System of Care to be fully implemented for the children's system</li> <li>Require Wraparound is available to all children and young adults who meet criteria</li> <li>Incentivize CCOs to develop approaches to meeting the complex health needs of children and young adults</li> </ul>   | 5<br>∞ |
|  | Ensure there is a children's behavioral health system to achieve measurable symptom reduction   | <ul style="list-style-type: none"> <li>CCOs require outcome measures tools from providers and have the ability to collect and report out on data</li> <li>Fund CCOs for prevention services for children</li> <li>OHA and CCOs develop a Train the Trainer investment in behavioral health models of care</li> <li>CCOs, with the support of OHA, to incentivize providers to implement trauma informed care practices</li> </ul> | 5<br>* |
|  | Ensure special populations, prioritizing children in Child Welfare, have their physical and behavioral health needs met by CCO and system of care | <ul style="list-style-type: none"> <li>Enforce contract requirement for care coordination for all children in Child Welfare, state custody and other prioritized populations (I/DD)</li> <li>CCOs require providers to utilize ACEs score or trauma screening tools to develop individual service and support plans</li> </ul>  | 5<br>∞ |

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## Social Determinants of Health and Health Equity

| Health Equity/SDOH Questions  | Policy Options/Goals  | Potential Strategies  | Key              |
|---|---|---|------------------|
| How can OHA encourage CCOs to spend more in social determinants of health & health equity work, and hold CCOs accountable for their spending? | Increase strategic spending by CCOs on social determinants of health and health equity/disparities in communities, including encouraging effective community partnership. | <ul style="list-style-type: none"> <li>Implement HB 4018: Require CCOs to spend portion of savings on SDOH, population health policy and systems change &amp; health equity/health disparities, consistent with the CCO community health improvement plan (CHP)               <ul style="list-style-type: none"> <li>Require CCOs to hold contracts with and direct portion of required SDOH &amp; HE spending to SDOH partners through transparent process</li> <li>Require CCOs to designate role for CAC</li> <li>Years 1 &amp; 2 infrastructure grants: State provide two years of "seed money" to help CCOs meet spending requirement on SDOH in partnership with community SDOH and CHP providers</li> <li>Require one statewide priority – housing-related supports and services – plus community priority(ies)</li> </ul> </li> </ul> | 5<br>♦<br>*<br>‡ |
|   | Increase strategic spending by CCOs on health-related services (HRS) as a mechanism to invest in the social determinants of health and equity in communities.             | <ul style="list-style-type: none"> <li>Encourage HRS community benefit initiatives to align with community priorities, such as those from the Community Health Assessment and Community Health Improvement Plans</li> <li>Require CCOs' HRS policies to include a role for the CAC in making decisions about how community benefit HRS investments are made.</li> </ul>   | 5<br>*           |
|   | Increase CCO's focus on SDOH and equity and ensure community partners are engaged and resourced to support this focus.  | <ul style="list-style-type: none"> <li>Encourage adoption of SDOH, Health equity, and population health incentive measures to the Health Plan Quality Metrics Committee and Metrics &amp; Scoring Committee for inclusion in the CCO quality pool</li> <li>Encourage CCOs to share financial resources with non-clinical and public health providers for their contributions to incentive measures, through clarifying the intent that CCOs offer aligned incentives to both clinical AND non-clinical providers with quality pool measure areas</li> </ul>   | 5<br>♦<br>∞<br>* |

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| Health Equity/SDOH Questions  | Policy Options/Goals  | Potential Strategies   | Key         |
|---|---|--|-------------|
|   | Provide clear, common definition of social determinants of health, health equity, and related concepts to ensure clear boundaries for CCO spending and engagement in these areas. | <ul style="list-style-type: none"> <li>Consider, adopt and operationalize definitions of social determinants of health and social determinants of health equity, as developed by the Oregon Medicaid Advisory Committee</li> <li>Work with the OHPB Health Equity Committee to consider/develop definitions of health equity and health disparities</li> </ul>   | ∞           |
| How do we strengthen CCO partnerships and ensure meaningful engagement to support social determinants of health & health equity work? | Strengthen Community Advisory Council (CAC)/CCO partnerships and ensure meaningful engagement of diverse consumers to support social determinants of health & equity work.        | <ul style="list-style-type: none"> <li>Require CCOs to align CAC member composition with demographics of Medicaid members in their communities, report to OHA, and explain barriers to and efforts to increase alignment</li> <li>Require CCOs to report CAC member representation alignment with CHP priorities (e.g. public health, housing, etc.) and percentage of CAC comprised of OHP consumers</li> <li>Require CCOs share with OHA (to be shared publicly) a clear organizational structure that shows how the CAC connects to the CCO board</li> <li>Require CCOs have 2 CAC representatives, at least one being an OHP consumer, on CCO board</li> </ul> | 5<br>∞<br>* |
|   | Improve health outcomes through community health assessment (CHA) and community health improvement plan (CHP) collaboration and investment.                                       | <ul style="list-style-type: none"> <li>Require CCOs to develop shared CHAs with local public health authorities and non-profit hospitals</li> <li>Require CCOs to collaborate with local public health authorities and non-profit hospitals to develop shared CHPs to the extent feasible</li> <li>Ensure CCOs include organizations that address the social determinants of health and health equity in the development of the CHA/CHP</li> <li>Require CCOs to submit their CHA to OHA</li> <li>Require that CHPs address at least two State Health Improvement Plan (SHIP) priorities, based on local need</li> </ul>   | 5<br>∞<br>* |
| How do we better ensure provider  | Development of CCO internal infrastructure and investment to coordinate and support CCO equity activities and build   | <ul style="list-style-type: none"> <li>Each CCO will establish permanent structures to advance health equity, including: <ul style="list-style-type: none"> <li>Single point of accountability for health equity with budgetary decision making authority and health equity expertise.</li> </ul> </li> </ul>  | 5<br>∞<br>* |

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| Health Equity/SDOH Questions   | Policy Options/Goals   | Potential Strategies   | Key         |
|--|--|--|-------------|
| cultural competency, language accessibility, a diversified workforce, and access to critical services across the state within a CCO and its provider network that reflects the population served by the CCO? | organizational capacity to advance health equity.  | <ul style="list-style-type: none"> <li>Adoption of a Health Equity plan to institutionalize organizational commitment to health equity.</li> <li>Organization-wide cultural responsiveness and implicit bias training fundamentals training plan and timeline for implementation</li> </ul>  |             |
|  | Enhance integration and utilization of Traditional Health Workers to ensure delivery of high quality, and culturally and linguistically appropriate care to improve health outcomes    | <ul style="list-style-type: none"> <li>Implement recommendations of the THW Commission, including requiring CCOs to:               <ul style="list-style-type: none"> <li>Create plan for integration and utilization of THWs</li> <li>Incorporate alternative payment methods to establish sustainable payment rates for THW services</li> <li>Integrate best practices for THW services in consultation with THW commission</li> <li>Designate a CCO liaison as a central contact for THWs</li> <li>Identify and include THW affiliated with organizations listed under ORS 414.627 in the development of CHAs and CHPs</li> </ul> </li> </ul> | 5<br>∞<br>* |
|  | Reduce barriers to access for health services through standardization of telehealth reimbursement requirements across all CCOs.  | <ul style="list-style-type: none"> <li>Require CCOs to reimburse for telehealth services, including two-way video conferencing and asynchronous methods if certain conditions are met               <ul style="list-style-type: none"> <li>Require reimbursement regardless of patient being in a rural or urban setting</li> </ul> </li> </ul>  | 5<br>∞      |
| What changes in data collection/use can we make to improve our understanding of social determinants of health & equity initiatives and disparities?  | To be determined during Phase 2 and 3 of CCO 2.0 Policy Development Timeline (June-November 2018) based upon further development and planning related to recommended strategies above. |  | 5<br>∞<br>* |

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## Cost Containment and Sustainable Spending

### Guiding Questions:

- Is 3.4% still the proper growth target for the entire CCO 2.0 contract period?
- What cost drivers threaten achievement of sustainable growth rate (3.4%) in future years?
- What cost drivers warrant additional analysis to help OHA and CCO partners continue to meet growth targets?
- What strategies could increase CCO financial accountability while preserving flexibility to operate within global budget?

| Cost - Policy Categories                 | Policy Goals   | Potential Strategies  | Key |
|--|--|---|-----|
| Spending Targets and Cost Containment    | Maintain an aggressive spending target in CCO contracts and promote cost containment by sharing savings with CCOs  | <ol style="list-style-type: none"> <li>1. Ongoing evaluation of Oregon's sustainable spending target based on national trends and emerging data</li> <li>2. Shared-savings arrangements for achievement of lower-than-targeted spending growth <ul style="list-style-type: none"> <li>• Designed in part to ensure CCOs have funding stream to continue investments that reduce underlying health care spending</li> </ul> </li> <li>3. Include sustainable growth target as a contract requirement to increase CCO accountability</li> </ol> |     |
| Promoting Efficiency and High Value Care | <p>Overall policy goal:<br/>Incentivize CCO efficiency and promote the use of health care services with highest clinical value</p> <p><b>Supporting rationale:</b><br/>Payments to CCOs,</p> | <ol style="list-style-type: none"> <li>1. Evaluate efficiency and total costs of care to establish variable profit margins based on CCO performance <ul style="list-style-type: none"> <li>• Potential tools include using episode groupers to evaluate care for specific conditions to identify waste and inefficiency in the system and using "total cost of care" tools to evaluate costs and service intensity/utilization across the system and compared to multiple benchmarks</li> </ul> </li> </ol>                                   |     |

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|  | <i>hospitals and other providers should reward and incentivize efficient delivery of care and use of services with highest clinical value</i>  | <p>2. Incentivize health care services with highest clinical value by rewarding their use in rate setting</p> <ul style="list-style-type: none"> <li>Identify health care services and bundles of care with highest and lowest clinical value through formal process that builds on our prioritized list</li> <li>Give additional “credit” in capitation rate setting for higher clinical value care and less credit for lower-value services.               <ul style="list-style-type: none"> <li>High value examples: medication-assisted treatment for opioid use disorder, diabetes prevention programs, integrated behavioral health, contraceptive placement, breastfeeding counseling &amp; supplies, and tobacco cessation</li> <li>Low-value examples: opioid use treatment w/o medication, stress tests in stable coronary disease, elective orthopedic surgery, and inappropriate tests and/or screenings outside clinical guidelines.</li> </ul> </li> </ul> <p>3. Increase the portion of hospital payments that are based on quality and value</p> <ul style="list-style-type: none"> <li>Incorporate quality and value measures in calculating reimbursement to hospitals (includes CCO and OHA directed payments).</li> </ul> |
| <b>Quality Pool Payments &amp; Structure</b> | Incentivize CCOs to invest quality pool funds on programs, providers and partners that improve quality and enable CCOs to achieve selected metrics, while ensuring accountability and reducing cost growth | <p>1. Adjust the operation of the CCO Quality Pool to allow consideration of expenditures in CCO rate development in order to:</p> <ul style="list-style-type: none"> <li>Align incentives for CCOs, providers, and communities to achieve quality metrics</li> <li>Create consistent reporting of all CCO expenses related to medical costs, incentive arrangements, and other payments regardless of funding source (Quality Pool or global budget)</li> </ul>   |

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| <b>Mitigating Financial Risk &amp; Outlier Costs</b> | Spread and manage risk related to low frequency, high-cost conditions and treatments                                      | <ol style="list-style-type: none"> <li>1. Establish a statewide reinsurance pool for CCOs administered by OHA to spread the impact of low frequency, high cost conditions and treatments across entire program</li> <li>2. Expand / revise existing risk corridor programs <ul style="list-style-type: none"> <li>• Value potentially limited to targeted conditions and/or services</li> </ul> </li> <li>3. Address increasing pharmacy costs and the impact of high-cost and new medications <ul style="list-style-type: none"> <li>• Ongoing policy development &amp; follow-up based on future OHPB committee</li> </ul> </li> </ol>  |
| <b>Financial Reporting and Reserves</b>              | Enhance alignment of CCOs risk and financial requirements to ensure CCO solvency, accountability, and consistency of data | <ol style="list-style-type: none"> <li>2. Enhance current reporting tools: <ol style="list-style-type: none"> <li>A. Building on existing reporting templates (i.e., Exhibit L) and reevaluate reserve requirements and calculations to better account for risks CCOs bear <ul style="list-style-type: none"> <li>○ Home-grown and flexible to meet needs of CCOs with varying structures</li> <li>○ Reconciliation to rate-setting process incorporated in reporting</li> <li>○ Consistency across CCOs can be lacking due to inherent flexibility</li> </ul> </li> <li>B. Move to reporting standards used by commercial insurers and developed by the National Association of Insurance Commissioners (NAIC) and use Risk Based Capital (RBC) approach to evaluate solvency <ul style="list-style-type: none"> <li>○ NAIC provides consistent national standards used by many insurers</li> <li>○ RBC provides robust oversight framework</li> <li>○ Additional reconciliation needed to inform CCO rate development</li> </ul> </li> <li>C. Combination approach if possible</li> </ol> </li> <li>3. Create a statewide reserve pool in addition to CCO-specific reserve requirements in the event of an insolvency <ul style="list-style-type: none"> <li>• Such a pool could avoid the need to CCOs receive additional funding to build up reserves, but could require up-front state funds.</li> </ul> </li> </ol> |

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| <p><b>Ensuring Accurate and Sufficient Encounter Data</b></p> | <p>Consistent and accurate reporting of services provided and their associated costs</p> | <p>1. Institute a validation study that samples CCO encounter data and reviews against provider charts for accuracy (AZ Model) with financial implications</p> <ul style="list-style-type: none"> <li>• Goal is to ensure the accuracy of encounter data, which is an important tool for the development of actuarially sound capitalization rates for CCOs</li> </ul> <p>2. Require complete encounter data with contract amounts and additional detail for value-based payment arrangements</p> <ul style="list-style-type: none"> <li>• With greater use of value-based payments and other alternative payment methodologies, new tools will be needed to ensure rate development processes take into account the services provided and the underlying costs of those services.</li> <li>• In absence of additional reporting, proxy values must be used and may not be as accurately reflective of the costs/value of services provided</li> </ul> |
|---|--|--|

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## Value-based Payments

| VBP Guiding Questions   | Policy Options/Goals   | Potential Strategies  | Key              |
|---|--|---|------------------|
| How can OHA use VBP targets to encourage VBPs between CCOs and their providers, and hold CCOs accountable? <i>CCO payments to providers: Targets</i>                | Increase CCOs' use of VBPs with their contracted providers                     | <ul style="list-style-type: none"> <li>Require CCOs to develop Patient-centered Primary Care Home VBPs (i.e., payments based on PCPCH tier level)</li> <li>Require CCO-specific VBP targets in support of achieving a statewide VBP goal</li> </ul>   | ∞<br>*           |
| How can OHA encourage VBPs that foster improvements in key care delivery areas to achieve better health outcomes?<br><i>CCO payments to providers: Policy areas</i> | Increase the use of VBPs to improve health outcomes in key care delivery areas | <ul style="list-style-type: none"> <li>Require CCOs to implement one VBP focused on these key care delivery focus areas: <ul style="list-style-type: none"> <li>Primary care</li> <li>Behavioral health integration</li> <li>Oral health integration</li> <li>Specialty care</li> <li>Hospitals</li> <li>Children's health care</li> <li>Maternity care</li> </ul> </li> <li>Publish CCO data on these VBPs</li> <li>Provide technical assistance to CCOs</li> <li>Potentially develop more robust VBP requirements in later years</li> </ul> | 5<br>♦<br>∞<br>* |
| What changes to data collection are necessary to track progress on, and improve our   | Assess CCOs' progress toward the statewide VBP                                 | <ul style="list-style-type: none"> <li>Require CCOs to demonstrate necessary information technology (IT) infrastructure for VBP reporting</li> <li>Streamline reporting by using All Payer All Claims (APAC) database for VBP reporting</li> </ul>  | ∞<br>*           |

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| VBP Guiding Questions  | Policy Options/Goals              | Potential Strategies  | Key |
|--|-----------------------------------|---|-----|
| understanding of, VBP utilization?<br><i>CCO payments to providers: Data</i> | goal and CCO-specific VBP targets | <ul style="list-style-type: none"> <li>APAC already collects non-claims payments from commercial carriers. Modifying APAC to better align with the VBP effort and having CCOs report to APAC will allow for comparing VBP progress across the health system, including CCOs.</li> <li>Collect supplemental data and / or interviews <ul style="list-style-type: none"> <li>Information not captured in quantitative data collection such as how CCOs' are addressing racial/ethnic health disparities, what informed their models, longer term VBP goals, etc.</li> </ul> </li> </ul> |     |

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