

**Oregon Health Policy Board
Health Incentives and Outcomes Committee**

Approved by OHPB on February 9, 2010

I. Authority

The Oregon Health Policy Board, under House Bill 2009, Section 8(1) may establish advisory and technical committees as the Board considers necessary to aid and advise in performance of its functions. The Board establishes the Health Incentives and Outcomes Committee to recommend to the Board and continually refine uniform, statewide health care quality standards for use by all purchasers of health care, third-party payers, health care providers and consumers. The Committee will be guided by the Triple Aim of improving population health, improving the individual's experience of care and reducing per capita costs. The Committee will also be guided by the Oregon Health Fund Board's final report, "Aim High: Building a Healthy Oregon," (November 2008), particularly in reference to Building Block 2: Setting High Standards:

Improve population health by:

- Developing a complete picture of where Oregon is doing well and where there is room for improvement so that effective, targeted initiatives aimed at improving population health can be developed
- Coordinating a statewide strategy to improve quality of care
- Providing communities with information about resource utilization that is needed to make health planning decisions that maximize population health

Improve the individual's experience of care by:

- Giving people the information they need to compare available health plans
- Allowing health care consumers to make informed decisions about the providers they see based on the quality of care they provide

Reduce per capita costs by:

- Providing a clear picture of how resources are used in health care
- Allowing for the identification of providers/regions that are providing cost-effective and high-value care and those that are utilizing more resources without achieving better outcomes, thereby reducing variations in care patterns and the provision of unnecessary care
- Increasing public accountability for the way health dollars are spent
- Encouraging competition between health plans and between providers based on the value of services provided and thus allowing health care purchasers to make informed purchasing decisions
- Giving providers the information they need to benchmark their performance, identify opportunities for quality improvement, and design effective quality improvement initiatives that allow for better health outcomes at a lower cost

This charter shall be reviewed annually to ensure that the work of the committee is aligned with the Oregon Health Policy Board's strategic direction.

II. Committee and Sub-Committee Makeup

The Health Incentives and Outcomes Committee will have two subcommittees: one focusing on recommendations for payment policy and standards and the second focusing on standards and metrics related to value: both quality and cost in health care. The two subcommittees together will constitute the Committee. Each subcommittee may bring in additional content experts to assist them in developing their recommendations for methodologies, standards and metrics. Recommendations to the Board require a majority vote of the full Health Incentives and Outcomes Committee.

III. Deliverables

The Health Incentives and Outcomes Committee is established to investigate, evaluate and develop recommendations to the Board for transparent payment methodologies that provide incentives for cost-effective, patient-centered care and reduce variations in cost and quality of care. The Committee will provide technical performance measurement and reporting expertise and make recommendations to the Board about and continually refine uniform, statewide health care quality standards in support of a high performing health system and the further development of value-based benefit design for use by all purchasers of health care, third-party payers and health care providers.

Short Term

1. A report recommending to the Board transparent payment methodologies that may be incorporated in health care purchasing programs of state and local government and private sector entities and that provide incentives for the efficient delivery of care which (April 2010).
2. A report recommending to the Board a set of core quality and efficiency measures that align with the priorities of the State Health Improvement Plan, the Patient-Centered Primary Care Advisory Committee and are based on nationally validated, evidence-based metrics addressing variations in utilization and cost. The report will include recommendations for statistically valid levels of reporting by geography and/or provider level (e.g., hospital, hospital system, accountable care organization, clinic, etc.). Once adopted by the Board, the Oregon Health Authority will produce a performance dashboard which includes the recommended core measures. (Core measures recommendation: April 2010, OHA dashboard: September 2010)

Long Term

1. Based on data from the Oregon Health Authority on utilization, outcomes and cost, a report recommending areas for attention by the Board by procedure, condition and geography by June 2011.
2. Recommend and develop an Oregon Health Systems Scorecard that includes key quality, cost/efficiency metrics. The scorecard will include standardized, comparable measures of quality, cost and efficiency and will include geographic and provider-level analysis where statistically appropriate. The first Oregon Health System Scorecard will be completed no later than June 2011.

The Committee will also perform other duties and responsibilities, consistent with this Charter and governing by-laws, as may be delegated to the Committee by the Board.

IV. Committee Dependencies

The Health Incentives and Outcomes Committee will seek information from:

- a. Patient-Centered Primary Care Advisory Committee
- b. State Health Improvement Plan Steering Committee
- c. Health Care Workforce Committee
- d. Health Resources Commission
- e. Health Services Commission
- f. The Oregon Health Care Quality Corporation
- g. The Health Leadership Taskforce
- h. The Oregon Coalition of Healthcare Purchasers

The Health Incentives and Outcomes Committee will provide information to:

- a. Public Employers Health Care Purchasers Committee
- b. Health Resources Commission
- c. Health Services Commission
- d. The Oregon Health Care Quality Corporation
- e. The Health Leadership Taskforce
- f. The Oregon Coalition of Healthcare Purchasers

The Health Incentives and Outcomes Committee will provide draft recommendations for input to:

- a. OHA senior staff
- b. Public Employers Health Care Purchasers Committee
- c. Oregon Health Policy Board

Quality standards will be developed and reviewed by the Committee on an ongoing basis. Updates and recommendations will be made to the Board on a quarterly basis.

V. Staff Resources

Quality and Efficiency Subcommittee: Gretchen Morley

Payment Reform Subcommittee: Jeanene Smith, Barney Speight, Rob Stenger

VI. Committee Membership

		Name	Institution
Payment Reform Subcommittee	1	Chris DeMars, Program Officer	Northwest Health Foundation
	2	David Dorr, Professor	OHSU BICC
	3	Stephanie Dreyfuss, President, Provider Services	Regence BlueCross BlueShield
	4	Megan Haase, FNP	Mosaic Medical (FQHC)
	5	Denise Honzel, Consultant (CO-CHAIR)	Health Leadership Taskforce (HLTF)
	6	Steve Jaspersen, Hospital Administrator	Samaritan Health
	7	James Kahan, Policy Analyst	Self Employed
	8	David Labby, Medical Director	Care Oregon
	9	Robert Marsalli, Chief Executive Officer	Klamath Health Partnership, Inc.
	10	Bart McMullan (CHAIR)	Retired
	11	Morgan O'Toole, CEO	Kartini Clinic for Disordered Eating
	12	William Olson, Chief Financial Officer	OR Region Hospitals, Providence Health and Services
	13	Sujata Sanghvi, COO	PacificSource Health Plan
	14	Rick Wopat, Physician	Samaritan Health
	15	John Worcester, Manager, Benefits and Compensation (CO-CHAIR)	Oregon Steel Mills
Efficiency & Quality Subcommittee	1	Seth Bernstein, Executive Director	Accountable Behavioral Health Alliance
	2	Nancy Clarke, Executive Director	Oregon Health Care Quality Corporation
	3	Laura Etherton, Public Interest Advocate	OSPIRG
	4	Ken House, Director, Quality Management	Cascade Health Care Community
	5	Mary Minniti, Director of Quality	PeaceHealth Medical Group
	6	Glenn Rodriguez, Chief Medical Officer (CHAIR)	Providence Health & Services
	7	Jim Russell, Mental Health Care Administrator	Mid-Valley Behavioral Care Network
	8	Brett Sheppard, Physician	OHSU General Surgery
	9	Rachel Solotaroff, Medical Director	Central City Concern
	10	Thomas Syltebo, Physician	Northwest Permanente, Physicians & Surgeons, PC
	11	Joe Zaerr, Retired	Consumer/Archimedes