



About the Oregon Health Fund Board

Created by SB 329 (the Healthy Oregon Act), the Oregon Health Fund Board is a 7 member board appointed by the Governor and confirmed by the Oregon Senate. The Board is developing a comprehensive plan to ensure access to health care for all Oregonians, contain health care costs, and address issues of quality in health care. The members of the Board have experience, knowledge and expertise in the areas of consumer advocacy, management, finance, labor and health care, and represent the geographic and ethnic diversity of the state. Barney Speight, Executive Director, and the staff of the Office for Oregon Health Policy and Research assist the Board.

OHFB Board Members

- **Bill Thorndike, Chair**
CEO, Medford Fabrication
- **Jonathan Ater, Vice-Chair**
Chair and Senior Partner, Ater Wynne LLP
- **Eileen Brady, Vice-Chair**
Co-Owner, New Seasons Market
- **Tom Chamberlain**
President, Oregon AFL-CIO
- **Charles Hofmann, MD**
Physician
- **Ray Miao**
State President
AARP Oregon
- **Marcus Mundy**
President, Urban League of Portland

Delivery Committee Presents Recommendations to the Board

By Barney Speight, Executive Director

After six months of hard work, the Delivery Systems Committee presented its recommendations for delivery system reform to the Health Fund Board in May. The Delivery Systems Committee was given the difficult task of providing the Board with policy recommendations to create high-performing health delivery systems in Oregon that produce optimal value through the provision of high quality, timely, efficient, effective, and safe health care.

The Delivery Systems Committee recommendations fall into eight main topic areas.

- *Primary Care and Chronic Disease Management* - Encourage the revitalization of primary care through a focus on providing Oregonians with integrated health homes to manage and coordinate their care;
- *Improving Quality and Transparency* – Enhance the availability of information about health care quality and costs, and report it in a clear and easily accessible manner;
- *Payment Reform Models* – Support the development of new reimbursement models that encourage providers to be more accountable for the quality and costs of the care they provide;
- *Comparative Effectiveness and Medical Technology Assessment* – Develop a public-private collaborative effort to ensure that treatment and coverage decisions are based on the best available research and data;
- *Shared Decision Making* – Identify opportunities for patients to be more involved in decisions made about their care;
- *Public Health Prevention and Wellness* – Develop more unified, community-driven efforts to improve population health through prevention;
- *Administrative Simplification and Standardization* – Identify opportunities to decrease health care spending through more streamlined administrative processes;
- *Reduced Pharmaceutical Spending* – Encourage bulk purchasing to decrease spending on prescription drugs.

The Committee attempted to identify opportunities to contain costs across the delivery system throughout its recommendations. A final version of the Committee recommendations will be available on the Health Fund Board website by the middle of the June.

The Health Fund Board would like to thank the Committee members for volunteering so much of their time to develop such a comprehensive report. The Board will spend the next few months transforming the Committee's framework into an action plan for delivery system reform.

[Board Meeting Calendar:](#)

Wednesday, June 25
9:30 am to 5 pm
Paradigm Conference Center
3009 Chestnut
Milwaukie, OR

[Committee Meeting Calendar:](#)

Benefits

Tuesday, June 11
11 :00 to 11:30 am
General Services Building
OHPR Conference Room
1225 Ferry St., SE
Salem, OR

Note: As meetings locations or time may change during the month, please check our website. Thank you!

The OHFB Committees and Work Groups have finished meeting, although one or more committees may meet in the future to respond to Board questions or requests for more information.

Committee and Work Group Updates

Benefits Committee

The Benefits Committee met on May 27. The Cost Sharing Staff Review Panel reported on two topics that were accepted by the Committee. First, the panel suggested that a list of discretionary services be identified and be subject to a yearly maximum and, potentially, other limitations as well. These were defined as: 1) non-emergent services which do not substantially avert downstream medical costs or adverse consequences of a disease or condition, and/or 2) services which have lower cost or more efficacious alternatives available. Second, the panel suggested that allowances be made to lower the cost sharing on services accessed outside of an integrated health home when no alternative is available. At the meeting's conclusion, the Committee unanimously approved, in principle, an Essential Benefit Package for recommendation to the Board. During the first week of June, staff will be working with Committee leadership to incorporate these and other changes discussed at the May 27 meeting. A brief conference call will then be conducted on June 11 for final approval of the recommendations to be presented to the Board at its June 25 meeting.

Delivery System Committee

The Delivery Systems Committee met twice in May to finalize its recommendations to the Health Fund Board. See Barney Speight's article for more detailed information about the recommendations.

Federal Laws Committee

The Committee met May 13 to review and discuss a draft report encompassing all topics heard by the Committee. Nicole Tapay, senior health care policy advisor to U. S. Senator Ron Wyden, joined the discussion via phone and gave feedback on the draft report. Next the Committee will review report revisions and approve the final draft report. The draft report will be presented to the Board at an upcoming Board meeting and will be included with the Board's draft report for public comment in meetings held around the state in September. The Committee will then reconvene to consider public comment and to ensure the recommendations of the Committee take into account the final recommendations of the Board. The final report of the Federal Laws Committee will be sent to Oregon's Congressional delegation. It will also be attached to the report of the Board and sent to the Oregon legislature. The Committee will hold one more meeting (in late August or early September) to discuss the final report.

Finance Committee

The Finance Committee met twice in May. On May 1, the Chair of the Exchange Work Group presented recommendations on the development of a health insurance exchange. The Finance Committee also reviewed and discussed both a proposed summary of the Committee's recommendations and a document outlining a "business case" for one possible tax scenario involving a payroll tax and a health services transaction tax. The second iteration of the economic modeling results were presented as well. On May 29, the Committee met for the last time. The members reviewed the draft of the Committee's report and suggested changes. The report will be finalized in June.

Contact Information

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