# 2024 CCO 2.0 Value-Based Payment (VBP) Questionnaire

# Introduction

As described in Exhibit H, Section 6, Paragraph b of the 2024 contract, each Coordinated Care Organization (CCO) is required to complete this VBP Questionnaire (previously VBP Pre-Interview Questionnaire).

Beginning in 2024, OHA will no longer be conducting VBP Interviews with CCOs. This document will be submitted as a standalone deliverable that will not precede an interview.

**Your responses will help OHA better understand your CCO’s value-based payment (VBP) activities for 2023-2024, including detailed information about VBP arrangements and HCP-LAN categories.**

# Instructions

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A pre-filled version of this document containing previously submitted information will be sent to your CCO’s designated VBP contacts via email. Please complete and return it as a Microsoft Word document, via the Contract Deliverables portal located at <https://oha-cco.powerappsportals.us/>, by **May 3, 2024**. (The submitter must have an OHA account to access the portal.)

* When responses from previous years are provided, please provide an update on previously submitted information. Previous responses are provided as a reference point to ensure continuity in reporting.
* Please be thorough in completing each section of this document. Incomplete submissions will be returned for revision.
* Please provide responses for all required questions. Questions #3, #4, #10, and #32 are optional.
* All the information provided in this document is subject to redaction prior to public posting. OHA will communicate the deadline for submitting redactions after reviewing your submission.

If you have questions or need additional information, please contact:

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**Section 1: Annual VBP Targets**

**The following questions are to better understand your CCO’s VBP planning and implementation efforts for VBP Roadmap requirements.**

1. **In 2024, CCOs are required to make 70% of payments to providers in contracts that include a HCP-LAN category 2C or higher VBP arrangement.**

In 2022 and 2023, you were asked to describe the steps your CCO has taken to meet the annual VBP target requirement. Your response is displayed below:

Insert previous response.

**How confident are you in meeting the 2024 requirement?**

Very confident

Somewhat confident

Not at all confident

Other: Enter description

**Describe the steps your CCO has taken to meet the 2024 requirement since May 2023:**

Click or tap here to enter text.

**Please describe any challenges you have encountered:**

Click or tap here to enter text.

1. **In 2024, CCOs are required to make 25% of payments to providers in arrangements classified as HCP-LAN category 3B or higher (i.e., downside risk arrangements).**

In 2022 and 2023, you were asked to describe the steps your CCO has taken to meet the shared risk requirement. Your response is displayed below:

Insert previous response.

**How confident are you in meeting the 2024 requirement?**

Very confident

Somewhat confident

Not at all confident

Other: Enter description

**Describe the steps your CCO has taken to meet the 2024 requirement since May 2023:**

Click or tap here to enter text.

**Please describe any challenges you have encountered:**

Click or tap here to enter text.

1. **Optional: Can you provide an example of a VBP arrangement that you consider successful? What about that arrangement is working well for your CCO and for providers?**

Click or tap here to enter text.

1. **Optional: In questions 1-2, you described challenges that you have encountered in meeting annual VBP targets. How have you responded to and addressed those challenges as a CCO?**

Click or tap here to enter text.

**Section 2: Care Delivery Area VBP Requirements**

**The following questions are to better understand your CCO’s VBP planning and implementation efforts for VBP Roadmap requirements.**

1. **a. What is the current status of the new or enhanced VBP model your CCO is reporting for the hospital care delivery area requirement?** (mark one)

The model is under contract and services are being delivered and paid through it.

Design of the model is complete, but it is not yet under contract or being used to deliver services.

The model is still in negotiation with provider group(s).

Other: Enter description

**b. What attributes have you incorporated, or do you intend to incorporate, into this payment model (e.g., a focus on specific provider types, certain quality measures, or a specific LAN tier)?**

Insert previous response.

Click or tap here to enter text.

**c. If this model is not yet under contract, please describe the status of your negotiations with providers and anticipated timeline to implementation.**

Insert previous response.

Click or tap here to enter text.

1. **a. What is the current status of the new or enhanced VBP model your CCO is reporting for the maternity care delivery area requirement?** (mark one)

The model is under contract and services are being delivered and paid through it.

Design of the model is complete, but it is not yet under contract or being used to deliver services.

The model is still in negotiation with provider group(s).

Other: Enter description

**b. What attributes have you incorporated, or do you intend to incorporate, into this payment model (e.g., a focus on specific provider types, certain quality measures, or a specific LAN tier)?**

Insert previous response.

Click or tap here to enter text.

**c. If this model is not yet under contract, please describe the status of your negotiations with providers and anticipated timeline to implementation.**

Insert previous response.

Click or tap here to enter text.

1. **a. What is the current status of the new or enhanced VBP model your CCO is reporting for the behavioral health care delivery area requirement?** (mark one)

The model is under contract and services are being delivered and paid through it.

Design of the model is complete, but it is not yet under contract or being used to deliver services.

The model is still in negotiation with provider group(s).

Other: Enter description

**b. What attributes have you incorporated, or do you intend to incorporate, into this payment model (e.g., a focus on specific provider types, certain quality measures, or a specific LAN tier)?**

Insert previous response.

Click or tap here to enter text.

**c. If this model is not yet under contract, please describe the status of your negotiations with providers and anticipated timeline to implementation.**

Insert previous response.

Click or tap here to enter text.

1. **a. What is the current status of the new or enhanced VBP model your CCO is reporting for the oral health care delivery area requirement?** (mark one)

The model is under contract and services are being delivered and paid through it.

Design of the model is complete, but it is not yet under contract or being used to deliver services.

The model is still in negotiation with provider group(s).

Other: Enter description

**b. What attributes have you incorporated, or do you intend to incorporate, into this payment model (e.g., a focus on specific provider types, certain quality measures, or a specific LAN tier)?**

Insert previous response.

Click or tap here to enter text.

**c. If this model is not yet under contract, please describe the status of your negotiations with providers and anticipated timeline to implementation.**

Insert previous response.

Click or tap here to enter text.

1. **a. What is the current status of the new or enhanced VBP model your CCO is reporting for the children’s health care delivery area requirement?** (mark one)

The model is under contract and services are being delivered and paid through it.

Design of the model is complete, but it is not yet under contract or being used to deliver services.

The model is still in negotiation with provider group(s).

Other: Enter description

**b. What attributes have you incorporated, or do you intend to incorporate, into this payment model (e.g., a focus on specific provider types, certain quality measures, or a specific LAN tier)?**

Insert previous response.

Click or tap here to enter text.

**c. If this model is not yet under contract, please describe the status of your negotiations with providers and anticipated timeline to implementation.**

Insert previous response.

Click or tap here to enter text.

1. **Optional: In designing new or enhanced VBP models in additional care delivery areas, what have you found to be most challenging? What is working well?**

Click or tap here to enter text.

**Section 3: PCPCH Program Investments**

**The following questions are to better understand your CCO’s VBP planning and implementation efforts for VBP Roadmap requirements.**

1. **OHA requires that PCPCH PMPM payments made by CCOs to clinics are independent of any other payments that a clinic might receive, including VBP payments tied to quality. In September 2023, OHA provided updated guidance on this in the** [**VBP Technical Guide**](https://www.oregon.gov/oha/HPA/dsi-tc/Documents/VBP-Technical-Guide-for-CCOs.pdf)**.**

**Are the infrastructure payments made to your PCPCH clinics separable from other payments made to those clinics?**

Yes

No

**If no, please explain:**

Click or tap here to enter text.

**Section 4: Engaging with Providers on VBP**

These questions address your CCO’s work engaging with providers and other partners in developing, managing, and monitoring VBP arrangements.

1. **In May 2022 and 2023, you reported the following information about how your CCO engages partners (including providers) in developing, monitoring or evaluating VBP models.**

Insert previous response.

**Please note any changes to this information, including any new or modified activities or formal organizational structures such as committees or advisory groups.**

Click or tap here to enter text.

1. **In your work responding to requirements for the VBP Roadmap, how challenging have you found it to engage providers in negotiations on new VBP arrangements, based on the categories below?**

**Primary care:**

|  |  |  |
| --- | --- | --- |
| Very challenging | Somewhat challenging | Minimally challenging |

**Behavioral health care:**

|  |  |  |
| --- | --- | --- |
| Very challenging | Somewhat challenging | Minimally challenging |

**Oral health care:**

|  |  |  |
| --- | --- | --- |
| Very challenging | Somewhat challenging | Minimally challenging |

**Hospital care:**

|  |  |  |
| --- | --- | --- |
| Very challenging | Somewhat challenging | Minimally challenging |

**Specialty care**

|  |  |  |
| --- | --- | --- |
| Very challenging | Somewhat challenging | Minimally challenging |

**Describe what has been challenging [optional]:**

Click or tap here to enter text.

1. **Have you had any providers withdraw from VBP arrangements since May 2023?**

Yes

No

**If yes, please describe:**

Click or tap here to enter text.

**Section 5: Health Equity & VBP**

**The following questions are to better understand your CCO’s plan for ensuring that VBP arrangements do not have adverse effects on populations experiencing or at risk for health inequities.**

1. **In May 2022 and 2023, your CCO reported the following information about how you mitigate for the possible adverse effects VBPs may have on health outcomes for specific populations (including racial, ethnic and culturally-based communities, LGBTQIA2S+ people, people with disabilities, people with limited English proficiency, immigrants or refugees, members with complex health care needs, and populations at the intersections of these groups).**

Insert previous response.

**Please note any changes to this information since May 2023, including any new or modified activities.**

Click or tap here to enter text.

1. **Is your CCO employing medical/clinical risk adjustment in your VBP payment models?** [Note: OHA does not require CCOs to do so.]

Yes

No

**If yes, how would you describe your approach?**

Click or tap here to enter text.

**How would you describe what is working well and/or what is challenging about this approach?**

Click or tap here to enter text.

1. **Is your CCO planning to incorporate risk adjustment for social factors in the design of new VBP models, or in the refinement of existing VBP models?** [Note: OHA does not require CCOs to do so.]

Click or tap here to enter text.

**Section 6: Health Information Technology and VBP**

Questions in this section were previously included in the CCO Health Information Technology (HIT) Roadmap questionnaire and relate to your CCO’s HIT capabilities for the purposes of supporting VBP and population management. Please focus responses on new information since your last submission.

Note: Your CCO will not be asked to report this information elsewhere. This section has been removed from the CCO HIT Roadmap questionnaire/requirement.

1. **You previously provided the following information about the HIT tools your CCO uses for VBP and population management including:** 
   1. **HIT tool(s) to manage data and assess performance**

Insert previous response.

**Please note any changes or updates to this information since May 2023:**

Click or tap here to enter text.

* 1. **Analytics tool(s) and types of reports you generate routinely**

Insert previous response.

**Please note any changes or updates to this information since May 2023:**

Click or tap here to enter text.

1. **You previously provided the following information about your staffing model for VBP and population management analytics, including use of in-house staff, contractors or a combination of these positions who can write and run reports and help others understand the data.**

Insert previous response.

**Please note any changes or updates to this information** **since May 2023:**

Click or tap here to enter text.

1. **You previously provided the following information about your strategies for using HIT to administer VBP arrangements. This question included:** 
   1. **How you will ensure you have the necessary HIT to scale your VBP arrangements rapidly over the course of the contract**
   2. **How you will spread VBP to different care settings**
   3. **Plans for enhancing or changing HIT if enhancements or changes are needed to administer VBP arrangements for the remainder of the contract**

Insert previous response.

**Please note any changes or updates for each section since May 2023.**

1. **How you will ensure you have the necessary HIT to scale your VBP arrangements rapidly over the course of the contract.**

Click or tap here to enter text.

1. **How you will spread VBP to different care settings.**

Click or tap here to enter text.

1. **How you will include plans for enhancing or changing HIT if enhancements or changes are needed to administer VBP arrangements for the remainder of the contract:**

Click or tap here to enter text.

1. **You reported the following information about your specific activities and milestones related to using HIT to administer VBP arrangements.**

**For this question, please modify your previous response, using underlined text to add updates and strikethrough formatting to delete content from your previous responses from May of 2022 and 2023. If the field below is blank, please provide updates on specific milestones from your 2021 HIT Roadmap submission.**

Insert previous response.

**Briefly summarize updates to the section above:**

Click or tap here to enter text.

1. **You provided the following information about successes or accomplishments related to using HIT to administer VBP arrangements:**

Insert previous response.

**Please note any changes or updates to these successes and accomplishments since May of 2023.**

Click or tap here to enter text.

1. **You also provided the following information about challenges related to using HIT to administer VBP arrangements.**

Insert previous response.

**Please note any changes or updates to these challenges since May of 2023.**

Click or tap here to enter text.

1. **You previously reported the following information about your strategies, activities and milestones for using HIT to effectively support provider participation in VBP arrangements. This included how your CCO ensures:**
   1. **Providers receive timely (e.g., at least quarterly) information on measures used in the VBP arrangements applicable to their contracts.**
   2. **Providers receive accurate and consistent information on patient attribution.**
   3. **If applicable, include specific HIT tools used to deliver information to providers.**

Insert previous response.

**Please note any changes or updates to your strategies since May of 2023.**

1. **Providers receive timely (e.g., at least quarterly) information on measures used in the VBP arrangements applicable to their contracts.**

Click or tap here to enter text.

1. **Providers receive accurate and consistent information on patient attribution.**

Click or tap here to enter text.

1. **If applicable, include specific HIT tools used to deliver information to providers.**

Click or tap here to enter text.

**How frequently does your CCO share population health data with providers?**

Real-time/continuously

At least monthly

At least quarterly

Less than quarterly

CCO does not share population health data with providers

1. **You previously reported the following information about how your CCO uses data for population management to identify specific patients requiring intervention, including data on risk stratification and member characteristics that can inform the targeting of interventions to improve outcomes.**

Insert previous response.

**Please note any changes or updates to this information since May 2023.**

Click or tap here to enter text.

1. **You previously reported the following information about how your CCO shares data for population management to identify specific patients requiring intervention, including data on risk stratification and member characteristics that can inform the targeting of interventions to improve outcomes.**

Insert previous response.

**Please note any changes or updates to this information since May 2023.**

Click or tap here to enter text.

1. **Estimate the percentage of VBP-related performance reporting to providers that is shared through each of the following methods:**

|  |  |
| --- | --- |
| **Estimated**  **percentage** | **Reporting method** |
|  | Excel or other static reports |
|  | Online interactive dashboard that providers can configure to view performance reporting for different CCO populations, time periods, etc. |
|  | Shared bidirectional platform (example: Arcadia) that integrates electronic health record data from providers with CCO administrative data. |
|  | Other method(s): Click or tap here to enter text. |
| [Total percentages should sum to 100%] | |

**How does this look different for primary care vs. other types of providers (hospital care, behavioral health care, maternity care, oral health care, children’s health care)?**

Click or tap here to enter text.

1. **You previously reported the following information about your accomplishments and successes related to using HIT to support providers.**

Insert previous response.

**Please note any changes or updates to this information since May 2023.**

Click or tap here to enter text.

1. **You previously reported the following information about your challenges related to using HIT to support providers.**

Insert previous response.

**Please note any changes or updates to this information since May 2023.**

Click or tap here to enter text.

**Section 7: Technical Assistance**

**The following questions are to better understand your CCO’s technical assistance (TA) needs and requests related to VBPs.**

1. **What TA can OHA provide that would support your CCO’s achievement of CCO 2.0 VBP requirements?**

Click or tap here to enter text.

1. **Aside from TA, what else could support your achievement of CCO 2.0 VBP requirements?**

Click or tap here to enter text.

1. **Optional: Do you have any suggestions for improving the collection of this information in subsequent years? If so, what changes would you recommend?**

Click or tap here to enter text.