

## **Oregon's Request: Oregon Health Plan (OHP) 1115 Waiver Renewal for 2017-2022 Furthering Health System Transformation**

### **Oregon's Success to Date**

- Stood up new model of coordinated care with 16 Coordinated Care Organizations (CCOs), which integrate physical, behavioral, and oral health services in an integrated budget, with 5% of CCO budgets dedicated to a quality incentive program.
- Expanded Medicaid coverage to nearly 450,000 Oregonians and enrolled approximately 90% of all Medicaid members in CCOs. Nearly 95% of all Oregonians are now insured.
- Reduced rate of cost growth per capita by two percentage points, saving the federal government more than \$500 million to-date. Expected to save the federal government \$1.4 billion by the end of the current waiver.
- Maintained good access and patient satisfaction scores, while making improvements to quality and outcomes, including: decreased emergency department visits by 23%, decreased admissions for short-term complications with diabetes, decreased hospital readmissions and increased primary care home enrollment by 61%.

### **Vision for 2017-2022**

1. Expanded focus on integration of physical, behavioral, and oral health care through a performance driven system that makes continual improvements to health outcomes and continues to bend the cost curve.
2. Focus on social determinants of health and health equity across all low-income, vulnerable Oregonians with the goal of improving population health outcomes.
3. Commit to continuing to hold down costs through an integrated budget that grows at a sustainable rate and promotes improved value and outcomes, with additional federal investments at risk for not hitting the target for bending the cost curve.
4. Continue to expand the coordinated care model, including innovative strategies for ensuring better outcomes for Medicaid and Medicare dual eligible members.

### **Request for 2017-2022**

- Commitment to reach a high level agreement on the waiver renewal by this summer and finalize the waiver renewal in 2016.
- Continue the program in its current form for another five years, including an extension of a targeted federal investment tied to a sustainable rate of growth.
- Make some clarifications and provide additional flexibility within the waiver on issues that were always part of the design but that we would like to take to the next level, including:
  - Advancing the integrated budget concept to promote the use of more health-related services and improve social determinants of health.
  - Flexibility to provide better care coordination and outcomes for dual eligible members.
  - Support to continue to promote patient centered, primary care and improve workforce and access in underserved areas, including for American Indians and Alaska Natives.
  - Provide expanded behavioral health and substance use diversion services.