

413.017 Public Health Benefit Purchasers Committee.

(1) The Oregon Health Policy Board shall establish the committees described in subsections (2) and (3) of this section.

(2)(a) The Public Health Benefit Purchasers Committee shall include individuals who purchase health care for the following:

- (A) The Public Employees' Benefit Board.**
- (B) The Oregon Educators Benefit Board.**
- (C) Trustees of the Public Employees Retirement System.**
- (D) A city government.**
- (E) A county government.**
- (F) A special district.**
- (G) Any private nonprofit organization that receives the majority of its funding from the state and requests to participate on the committee.**

(b) The Public Health Benefit Purchasers Committee shall:

(A) Identify and make specific recommendations to achieve uniformity across all public health benefit plan designs based on the best available clinical evidence, recognized best practices for health promotion and disease management, demonstrated cost-effectiveness and shared demographics among the enrollees within the pools covered by the benefit plans.

(B) Develop an action plan for ongoing collaboration to implement the benefit design alignment described in subparagraph (A) of this paragraph and shall leverage purchasing to achieve benefit uniformity if practicable.

(C) Continuously review and report to the Oregon Health Policy Board on the committee's progress in aligning benefits while minimizing the cost shift to individual purchasers of insurance without shifting costs to the private sector or the Oregon Health Insurance Exchange.

(c) The Oregon Health Policy Board shall work with the Public Health Benefit Purchasers Committee to identify uniform provisions for state and local public contracts for health benefit plans that achieve maximum quality and cost outcomes. The board shall collaborate with the committee to develop steps to implement joint contract provisions. The committee shall identify a schedule for the implementation of contract changes. The process for implementation of joint contract provisions must include a review process to protect against unintended cost shifts to enrollees or agencies.

(d) Proposals and plans developed in accordance with this subsection shall be completed by October 1, 2010, and shall be submitted to the Oregon Health Policy Board for its approval and possible referral to the Legislative Assembly no later than December 31, 2010.

(3)(a) The Health Care Workforce Committee shall include individuals who have the collective expertise, knowledge and experience in a broad range of health professions, health care education and health care workforce development initiatives.

(b) The Health Care Workforce Committee shall coordinate efforts to recruit and educate health care professionals and retain a quality workforce to meet the demand that will be created by the expansion in health care coverage, system transformations and an increasingly diverse population.

(c) The Health Care Workforce Committee shall conduct an inventory of all grants and other state resources available for addressing the need to expand the health care workforce to meet the needs of Oregonians for health care.

(4) Members of the committees described in subsections (2) and (3) of this section who are not members of the Oregon Health Policy Board are not entitled to compensation but shall be reimbursed from funds available to the board for actual and necessary travel and other expenses incurred by them by their attendance at committee meetings, in the manner and amount provided in ORS 292.495.

[2009 c.595 §7]

**Oregon Health Policy Board
Public Employers Health Purchasing Committee Charter**

Approved by OHPB on December 8, 2009

I. Authority

House Bill 2009 [Section 7(2)] directs The Oregon Health Policy Board (“Board”) to establish the Public Employers Health Purchasing Committee (“Committee”). The Committee shall include individuals who purchase health care for:

- Public Employees’ Benefit Board (PEBB);
- Oregon Educators Benefit Board (OEBB);
- Public Employees Retirement System (PERS);
- City governments;
- County governments;
- Special districts; and
- Private, non-profit organizations that receive the majority of funding from the State of Oregon and request to participate

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 3: Unify Purchasing Power:

Improve population health by:

- Promoting primary care, prevention, and wellness services through public contracting
- Expanding access to insurance coverage
- Promoting the use of evidence-based clinical standards

Improve the individual’s experience of care by:

- Increasing the use of patient-centered models of care that engage patients in decision making
- Using contract standards to increase the quality of care

Reduce per capita costs by:

- Building efficiency and value standards into public purchasers’ health care contracting
- Reducing pharmaceutical spending

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. Objectives

The Committee shall:

- Evaluate the aggregate market presence of public employer purchasers and other state-sponsored programs in local and regional Oregon markets.
- Compare and contrast the performance of local health care markets in Oregon in terms of utilization, cost and quality trends.
- Working with the Oregon Health Policy Board and relevant committees of the Board, develop uniform quality, cost and efficiency benchmarks that can be incorporated in health care purchasing programs of state and local governments and private sector entities.
- Develop purchasing policies, standards and model contract terms for health benefit programs that incorporate the best available clinical evidence (using evidence-based guidelines as a tool), recognized best practices and demonstrated cost-effectiveness for health promotion and disease management.
- Develop processes for collaboration among public employers and other interested purchasers of health benefits to foster the broad, statewide implementation of uniform and aligned purchasing policies and standards that emphasize value-based benefits.

III. Deliverables

The Committee shall deliver to the Board:

- A work plan that outlines specific, well-defined contracting policy and standards (focused on increasing quality and bending the cost curve) on which the Committee will be working, with supporting justifications.
- Reports that document the contracting policies, standards and model contract terms developed by the Committee, the implementation timeframes for health programs operating under the Oregon Health Authority and the actions taken to encourage other public and private employers to implement such policies, standards and model contract terms.
- An annual report recommending topics for investigation and study by the Board and its committees, or commissions and committees operating under the Authority, that would assist the Committee in future endeavors.

IV. Dependencies

The Public Employers Health Purchasing Committee will seek information from:

- Oregon Health Policy Board [policy]
- Patient-Centered, Primary Care Home Standards Advisory Committee [standards]
- The Health Leadership Task Force [value-based benefit, standards]
- Oregon Health Care Purchasers' Coalition [value-based purchasing, standards]

- Health Systems Performance Committee (OHPB) [quality standards, etc.]
- Health Services Commission (OHPR) [evidence-based guidelines]
- Health Resources Commission (OHPR) [comparative effectiveness studies]
- Office of Health Policy & Research [all-payer, all-claims data program]

The Public Employers Health Purchasing Committee will provide draft contracting policies, standards and model contracts for input to:

- OHA senior staff
- Oregon Health Policy Board

V. Timing

The Committee will provide its initial work plan to the Board no later than March, 2010; and its preliminary report, including recommendations for statutory changes, no later than June, 2010. A final report will be submitted in September 2010.

The Committee shall subsequently report to the Board on its activities and recommendations at least bi-annually.

VI. Staff Resources

Senior OHA Staff: Barney Speight
 Policy Staff: Kelly Harms

VII. Committee Membership

Organization	Name, Title
Public Employers' Benefit Board (PEBB)	Diane Lovell, Board Member Joan Kapowich, Administrator
Oregon Educators' Benefit Board (OEBB)	Steve McNannay, Board Member Joan Kapowich, Administrator
Public Employees Retirement System (PERS) Health Insurance Program	Zue Matchett, Manager
County Government	Madilyn Zike, Human Resources Manager, Marion County Caren Cox, Multnomah County Employee Benefits Office Ronda Conner, Deschutes County
City Government	Lynn McNamara, Director, City-County Insurance Services (CIS) Cathy Bless, City of Portland
Special Districts	Linda Shames, Port of Hood River
Private, Not-For-Profit	TBD
Oregon Coalition of Health Care Purchasers (OCHCP)	Barbara Prowe, Executive Director

**Oregon Health Policy Board
Public Employers Health Purchasing Committee
Committee By-Laws**

ARTICLE I

The Committee and its Members

- The Public Employers Health Purchasing Committee (“Committee”) is established by the Oregon Health Policy Board. The Committee’s function is to investigate, review, discuss, take public comment on and develop coordinated policy options and recommendations to the Board, consistent with the Committee’s scope of work as outlined by its Charter and further determined by the Board.
- The Members of the Committee will be appointed by, and serve at the pleasure of, the Board.
- Members of the Committee are not entitled to compensation for services but shall be reimbursed for actual and necessary travel expenses incurred by them by their attendance at committee meetings, in the manner and amount provided in ORS 292.495.

ARTICLE II

Committee Officers and Duties

- The Board will select the Chair of the Committee. At the option of the Committee, it may elect a Vice Chair of the Committee. The Chair and Vice Chair will serve for 24-months from the date of their selection or election.
- Duties of the Chair are:
 - Preside at all meetings of the Committee.
 - Coordinate meeting agendas after consultation with Committee staff.
 - Review all draft Committee meeting minutes prior to the meeting at which they are to be approved.
 - Be advised of all presentations or appearances of the Executive Director or staff before Legislative or Executive committees or agencies that relate to the work of the Committee.
 - The Chair may designate, in the absence of the Vice-Chair or when expedient for Committee business, other Committee Members to perform duties related to Committee business such as, but not limited to, attending other agency or public meetings, meetings of the Board, training programs, and approval and review of documents that require action of the Chair.
- Duties of the Vice Chair are:
 - Perform all of the Chair’s duties in his/her absence or inability to perform;

- Accompany the Chair to meetings of the Board at which recommendations of the Committee are presented; and
- Perform any other duties assigned by the Chair.

ARTICLE IV

Committee Meetings

- The Committee shall meet at the call of the Chair in consultation with the Committee Members and staff.
- The Committee shall conduct all business meetings in public and in conformity with Oregon Public Meetings Laws.
- The preliminary agenda will be available from the Committee staff and posted on the Board website [www.oregon.gov/oha/ohpb] at least two working days prior to the meeting. The final agenda will be established by Committee members at the beginning of each Committee meeting.
- A majority of Committee Members shall constitute a quorum for the transaction of business.
- All actions of the Committee shall be expressed by motion or resolution. Official action by the Committee requires the approval of a majority of a quorum of Members.
- On motions, resolutions, or other matters, a voice vote may be used. At the discretion of the Chair, or upon the request of a Committee Member, a roll call vote may be conducted. Proxy votes are not permitted.
- If a Committee Member is unable to attend a meeting in person, the Member may participate by conference telephone or internet conferencing provided that the absent Committee Member can be identified when speaking, all participants can hear each other and members of the public attending the meeting can hear any Member of the Committee who speaks during the meeting. A Committee Member participating by such electronic means shall be considered in constituting a quorum.
- Committee Members shall inform the Chair or Committee staff with as much notice as possible if unable to attend a scheduled Committee meeting. Committee staff preparing the minutes shall record the attendance of Committee Members at the meeting for the minutes.

- The Committee will conduct its business through discussion, consensus building and informal meeting procedures. The Chair may, from time to time, establish procedural processes to assure the orderly, timely and fair conduct of business.

ARTICLE V

Amendments to the By-Laws and Rules of Construction

- These By-laws may be amended upon the affirmative vote of five (5) Members of the Board.