

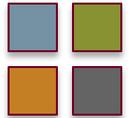
# Oregon Business Plan Health Care Strategic Framework

Updating the Strategies  
Input Sessions, Fall 2015



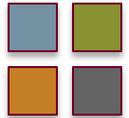
## **Planning Goals for 2015**

- Provide clear and useful discussion material on the current state of health care reform in Oregon. What have we accomplished and where are there still significant challenges?
- Articulate a clear Oregon Business Plan strategic framework for the next 3+ years that capitalizes on past reforms. Where do we focus public and private resources going forward?
- Create policy documents and presentations that are useful for policymakers and business leaders to build on momentum and initiatives.



## **OBP strategies have focused on...**

- 1) Ensuring affordable insurance coverage for all Oregonians.
- 2) Creating a healthy, competitive market where everyone is motivated to improve health, deliver quality, and controls costs.
- 3) Ensuring all Oregonians have access to high quality, coordinated care
- 4) Developing the right data tools and resources so consumers, employers, providers, and insurers can make the best health, purchasing, clinical, and coverage decisions.
- 5) Engaging in collaborative efforts in Oregon's communities to embrace healthy lifestyles.
- 6) Articulating how Oregon's businesses can provide leadership in health reform, collaborate on initiatives, and advocate for policies and funding that support and further the OBP goals.

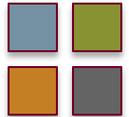


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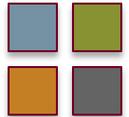
We're going to get your input on these two strategies first, hitting on others if time allows.

# Oregon Business Plan Health Care Strategies



**Goal 3. All Oregonians have access to high quality, coordinated care when they need it that supports their physical health, as well as mental health and social well-being.**

Oregon Business Plan Strategies	Oregon's Progress	Oregon's Challenges?	2016-2020 Priorities?
<p>Implement medical home and other innovative approaches that support integrated care, increase quality, and reduced unnecessary services</p> <p>Ensure access to providers for Oregon Health Plan patients by increasing provider payments and reduce the cost shift to privately-insured patients</p> <p>Support the implementation of OHP Coordinated Care Organizations</p>	<p>Extensive medical home implementation</p> <p>Coordinated care model implementation through Medicaid Coordinated Care Organizations (CCOs) and PEBB state employee coverage</p> <p>Implementation and regular update of CCO performance metrics</p>	<p>CCOs are not fully implemented. Further integration of mental health, addiction, and dental health services needed</p> <p>Continued access concerns for Medicaid enrollees, rural, and traditionally underserved residents overall</p>	<p>Evaluation of efficacy and financial sustainability of delivery system reforms (e.g., medical home for everyone)</p> <p>Full implementation of CCO model (mental health, addiction, dental services)</p> <p>Continued focus on outcome metrics and staying within budget</p> <p>New models of care for complicated social and behavioral health concerns</p> <p>Increased health care workforce capacity (primary care/ underserved pops)</p>



## Goal 4. Consumers, employers, providers, and insurers have the right tools and information to make informed service, purchasing, clinical and coverage decisions.

Oregon Business Plan Strategies	Oregon's Progress	Oregon's Challenges	2016-2020 Priorities?
<p>Meaningful information and metrics on costs and quality readily available for consumers, employers, providers, and insurers</p> <p>Strategies to improve consumer health literacy and support more informed decision making (e.g. Advance Care Planning, Palliative care)</p> <p>Improve health care information infrastructure (electronic health records, secure exchange of health data among providers)</p>	<p>Progress standardizing and fostering the electronic exchange of health care data (e.g., EDIE/ PreManage, OneHealthPort)</p> <p>Many efforts to make meaningful cost and quality data available across physicians, hospitals, and insurers.</p>	<p>Dashboards and quality metrics are not fully aligned across public and private payers</p> <p>Transparent health care cost data still very difficult to obtain and use in many cases</p> <p>A sustainable model for cost and quality reporting is still needed</p>	<p>Continue expansion of electronic health records and electronic information exchange</p> <p>Truly align outcome metrics and dashboards across stakeholders</p> <p>Develop a model for collaborative and impartial cost and quality reporting that can be sustained and adequately involves necessary stakeholders</p>