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# 2024 Supporting Health for All through REinvestment (SHARE) Guidance Updates

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# Agenda

- SHARE Initiative overview
- Summary of guidance changes
- Changes that impact program planning
- Logistical and minor changes
- Frequently asked questions (FAQ)
- Question & answer

# SHARE Initiative overview

# SHARE overview

SHARE comes from the legislative requirement that coordinated care organizations (CCOs) invest some of their profits back into their communities to address the **social determinants of health and equity (SDOH-E)**.

## Goals of SHARE:

- Safeguard public dollars by requiring that a portion of CCO profits are reinvested in their communities.
- Improve CCO member and community health by requiring reinvestments go towards upstream non-health care factors that impact health (for example, housing and food).

# SHARE requirements

- Spending must fall within **SDOH-E domains** and include spending toward a **statewide housing priority**
- Align with community priorities from **community health improvement plans (CHPs)**
- A portion of funds must go to **SDOH-E partners**
- CCOs must designate a role for their **community advisory councils** (CACs) related to SHARE Initiative spending decisions

# SHARE domains

SHARE Initiative spending must target at least one of four **domains of SDOH-E**, including:

- ✓ Economic stability
- ✓ Neighborhood and built environment
- ✓ Education
- ✓ Social and community health

A portion of a CCO's SHARE Initiative spending must also be spent on **housing-related services and supports.**

# Spending formula and obligation

CCOs are subject to a formula that determines their required minimum SHARE obligation based on their prior calendar year financial reporting.

The SHARE obligation shall equal or exceed the greater of:

- **A percentage of average adjusted net income** for the prior three calendar years on a sliding scale based on the CCO's risk-based capital (RBC) percentage at the end of the prior calendar year (but prior to the SHARE portion calculation).
- **10% of dividends** recorded or similar payments or both to shareholders, **including adjusted net income earned by capitated affiliates.**

If a CCO does not exceed minimum financial reserve requirements, they are presumed exempt from the SHARE Initiative.



# Summary of SHARE guidance changes in 2024

## New

- Removed requirement to submit partner agreements
- Added spending plan template tables
- Folded budget into spending plan tables
- Added examples of community advisory council (CAC) role
- Aligned submission instructions with CCO deliverables portal
- Folded spending report into Exhibit L

## Updates

- Clarified health-related social needs (HRSN) benefit and community capacity building fund (CCBF) coordination
- Updated project examples
- Combined questions about partner selection process and CAC role
- Clarified question about partner selection process
- Clarified population reporting

**Changes impacting program planning**

# SDOH-E partner agreements

In 2024, CCOs no longer need to submit partner agreements to OHA.

OHA expects that per guidance, CCOs will have a written agreement with each SDOH-E partner that meets the following **minimum requirements** prior to disbursing funds:

- ✓ Legal names for all entities
- ✓ Contract term, budget and distribution plan/schedule
- ✓ The scope of work to be performed
- ✓ Plan for collecting and sharing data and reporting obligations of both the SDOH-E partner and the CCO, as applicable to each funded project

# Health-related social needs (HRSN) coordination

New section in guidance document: “**SHARE Initiative investments and Oregon’s 1115 Medicaid Waiver**” provides guidance on health-related social needs (HRSN) covered services and community capacity-building funding (CCBF) and their intersections with SHARE.

- SHARE investments may not be used to pay for Medicaid covered services or benefits, including HRSN covered services, but there are opportunities to braid funding to more fully support communities.
- **Note:** Some activities previously funded through SHARE are becoming HRSN covered services in 2024/2025, so CCOs will need to ensure activities, populations and timelines don't overlap.
- Once CCBF are available, CCOs are encouraged to use CCBF funds before SHARE funds for projects that are eligible for both types of funding, or braid together SHARE and CCBF if needed to support larger projects.

**Minor reporting changes**

# Spending plan tables

Streamlined the spending plan template by adding a **project summaries table** and **partner details table**.

**Project summaries table** includes:

- ✓ Project number and name
- ✓ Brief project description
- ✓ Housing category checkboxes, if applicable
- ✓ Populations served, using REALD categories when applicable
- ✓ SDOH-E domain

**Partner details table** includes:

- ✓ Dollar amount allocated to each partner (in place of stand-alone budget)
- ✓ Description of the specific items, activities or services being funded

# Other spending plan template changes

- Community health improvement plan (CHP) alignment – list areas of alignment and briefly describe
- Combined questions about partner selection process and community advisory council (CAC) decision-making role
  1. Clarified what OHA is looking for in the partner selection process description
  2. Added checkboxes for CAC role examples

# Partner selection

- Reworded question to focus on **how** partners were selected:

**Briefly describe what steps were taken to identify and select partners and who was involved (for example, CCO leadership, CCO staff, committee, advisory group, CAC). Be sure to include your CAC's designated role in SHARE Initiative spending decisions.**

- OHA is not asking for **why** the partner is a good partner or why they are good at what they do.



# Community advisory council (CAC) role

Below are some examples of CAC roles in SHARE. Check all boxes that apply.

- CAC determined SHARE priority areas.
- CAC created or approved the overall SHARE decision-making process.
- CAC developed a scoring rubric for reviewing SHARE proposals.
- CAC members recommended organizations to fund using SHARE dollars.
- CAC members reviewed SHARE proposals and made recommendations to CCO leadership.
- CAC made final SHARE project funding decisions.
- CAC will have a role in ongoing monitoring of SHARE projects.

# Submission method

## Welcome to the Contract Deliverables portal

Submit a deliverable now or use the menu above to see status updates, access training, or get more information.

Click on the 'Submit Document' button below to submit your deliverable documentation.

Submit Document

## Quick Links

[Contract Announcements](#)

[Contract Forms](#)

[Quality Assurance](#)

[CCO Weekly Updates](#)

Submission of spending plans is now via the [CCO deliverables portal](#), instead of via email.

# Detailed spending report folded into Exhibit L

Retired standalone detailed spending report due June 30.

CCOs will now report how much was spent on each SHARE partner each year within Exhibit L, Report L6.71, along with total spend year over year.



		Year Designated by CCO			
		2021 SHARE Initiative	2022 SHARE Initiative	2023 SHARE Initiative	2024 SHARE Initiative
<b>Designated</b>	Amount Designated by CCO per previously provided Designation Report	-	-	-	-
<b>Spent</b>	2021	-			
Amount paid by year to Community Partner(s) and/or services to address the social determinants of health and equity	2022	-	-		
	2023	-	-	-	
	2024	-	-	-	-
	2025	-	-	-	-
	2026	-	-	-	-
	2027		-	-	-
	2028			-	-
					-
<b>Remaining</b>	Amount	-	-	-	-
	Percent	0%	0%	0%	0%
Total Distribution to SHARE Partner by Year					
SHARE Partner	Total Designation - all years	2021	2022	2023	2024

# Project examples

**New** SDOH-E domain project examples from prior CCO investments, including braided funding examples for each of the domains:

Economic  
stability

Neighborhood  
and built  
environment

Education

Social and  
community  
health

# Minor reporting change for updating SHARE designations

## New section: “Changes to SHARE designations and plans”

If a CCO needs to change: 1. their total SHARE designation amount (and it is still above required minimum amount), 2. partners they’re funding or 3. major activities, they must notify OHA of the change through the following for review and approval:

- ✓ **An amended SHARE spending plan** submitted to the CCO Deliverables Portal
  - The amended plan must describe the change, rationale for the change and the community impact of the requested change, including specific partners affected.
- ✓ **Exhibit L** should only reflect SHARE designation changes that have been previously submitted and approved by OHA.

# Reminder

Alignment of spending plan amount and Exhibit L

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Total amount reported in SHARE spending plan should match designation amount reported in Exh. L

- SHARE spending plan amount (spending plan template Q1)
- Exh. L minimum obligation (cell G38) - how much CCO owes
- Exh. L designation (cell G40) - how much CCO decides to contribute

# Frequently asked questions (FAQ)



## FAQ: Capital expenses

**Q#17:** Can SHARE funds be used for capital expenses if the building will provide both medical services and SDOH-E?

**Answer:** Yes, if the CCO can clearly describe how the project and specific activities, items or services being funded support SDOH-E. SDOH-E partners are intended to be non-clinical partners. However, organizations that offer both clinical and non-clinical services (such as a housing organization with a clinic or a local public health authority) may also be appropriate partners.

# FAQ: Partner agreements

**Q#23:** Why are CCOs no longer required to submit partner agreements?

## Answer (paraphrased):

- Reduce administrative burden
- More flexibility in CCO timelines
- CCOs will report on specific funded activities and budgets for each partner within the spending plan template.
- Prior to disbursing funds, CCOs must have partner agreements in place that include all required elements from SHARE guidance.
- CCOs don't need to submit the agreements to OHA.

# FAQ: 1115 Medicaid waiver coordination

**Q#34:** How does the 1115 Medicaid waiver affect the SHARE Initiative?

**Answer (paraphrased):**

- 1115 Medicaid waiver presents additional opportunity for CCOs to address equity and the social determinants of health of their members.
- Please refer to the CCO contract documents and [2022–2027 Medicaid 1115 Demonstration Waiver webpage](#) for updates on HRSN benefit guidance.
- SHARE dollars may only be spent on these supports and services
  - prior to them becoming covered benefits, or
  - for populations not covered in the waiver.

## FAQ: Coordination with community capacity building funds (CCBF)

**Q#35:** Can SHARE funding be used for things that might be eligible later for HRSN capacity-building dollars?

**Answer (paraphrased):** Yes, SHARE funds may be used to support most HRSN community capacity-building work. As part of the 1115 Medicaid waiver, CCOs will administer CCBF grants to community partners (except those reserved for Tribal Governments). These funds are intended to prepare partners to deliver HRSN benefits and services.

For these activities to be eligible for SHARE funding, they will need a direct and clearly described connection to SDOH-E (as defined in SHARE guidance) and not include anything specifically excluded from SHARE (see list in guidance).

OHA encourages CCOs to be strategic in braiding funding to meet needs.

# FAQ: Climate-related supports and services

**Q#38:** Can SHARE funds be used for climate-related supports and services?

**A:** Not directly. Climate devices and related care coordination become covered services for specific populations in 2024 (date to be determined at time of this FAQ release), so therefore are ineligible for SHARE. For members not eligible for the benefit, CCOs would need to use health-related services (HRS) flexible funds because the climate device would be connected to a specific medical need. However, SHARE funds could likely be used to support capacity building or capital expenses for an organization meeting a variety of HRSN needs including climate-related needs. The CCO would need to describe how the activities fit into one of the SDOH-E domains or is part of permanent supportive housing.

# Questions?



# Resources

- [SHARE guidance document](#)
- [Spending plan template](#)
- [Spending plan evaluation form](#)
- [FAQ](#)
- [SHARE webpage](#) (hosts the above documents, webinar recordings and approved CCO spending plans)
- [2022-2027 1115 Medicaid waiver](#)
- [Community Capacity Building Funds](#)

# Contacts

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