# CERTIFIED MAIL, RETURN RECEIPT REQUESTED Tracking #:

Date Mailed:		

# STATE OF OREGON OREGON HEALTH AUTHORITY HEALTH POLICY AND ANALYTICS DIVISION SUSTAINABLE HEALTH CARE COST GROWTH TARGET PROGRAM

In the Matter of:

Bend Memorial Clinic, P.C., an Oregon Professional Corporation dba Summit Health

For the Cost Growth Target measurement period: 2022-2023

Agency No. CGT-2024-PROV-21

NOTICE OF PROPOSED DETERMINATION AND RIGHT TO REQUEST A HEARING

Oregon Health Authority's (OHA) Sustainable Health Care Cost Growth Target Program (CGT) is tasked with monitoring the cost of health care in Oregon and holding payers and provider organizations accountable for cost growth that exceeds the annual target with statistical confidence and without an acceptable reason. The CGT is governed by Oregon Revised Statutes (ORS) 442.385 through 442.386 and Oregon Administrative Rules (OAR) Chapter 409, Division 65.

Per ORS 442.386 and OAR 409-065-0035, OHA reviews underlying cost drivers and reasons for cost growth and makes a determination as to whether such conditions or factors, or combination of such conditions or factors, suffices as reasonable cause for an entity to exceed the cost growth target for the measurement period.

Now, therefore, upon due consideration of the circumstances, including the mandatory cost growth target data submissions, supplemental information provided by the entity, and the entirety of OHA's record, OHA enters the following Notice of Proposed Determination.

#### <u>Procedural History and Findings of Fact</u>

- 1. OHA's CGT conducted its cost growth review under OAR 409-065-0035 which requires that OHA conduct analyses to understand potential systematic causes or other factors that might result in payers or provider organizations exceeding the cost growth target. The cost growth target for 2021 through 2025 is 3.4%.
- 2. Bend Memorial Clinic, P.C., an Oregon Professional Corporation dba Summit Health ("Summit Health") is a provider organization in Oregon and was identified as an accountable organization for the 2022-2023 measurement period. To be accountable to the target, provider organizations must have at least 10,000 unique patient lives or 5,000 lives within any one CGT market (Medicaid, Medicare Advantage, Commercial) attributed to them across CGT data submissions for the measurement period.<sup>2</sup>
  - a. On or around January 9, 2025, OHA notified Summit Health that they had sufficient attributed patient volume to be subject to the cost growth target program for the 2022-2023 cost growth period.
  - b. On or around January 23, 2025, OHA generated a data output summary and shared it with Summit Health on or around January 29, 2025.

https://www.oregon.gov/oha/HPA/HP/HCCGBDocs/Cost%20Growth%20Target%20Committee%20Recommend ations%20Report%20FINAL%2001.25.21.pdf. OHA publishes the list of provider organizations that meet inclusion criteria every year.

https://www.oregon.gov/oha/HPA/HP/Cost%20Growth%20Target%20documents/Provider-list-2024-final-1.8.2025.pdf

<sup>&</sup>lt;sup>1</sup> The cost growth target value for 2021-2025 was established by the Cost Growth Target Implementation Committee, as documented in their January 2021 Recommendations Report. <a href="https://www.oregon.gov/oha/HPA/HP/HCCGBDocs/Cost%20Growth%20Target%20Committee%20Recommendations%20Report%20FINAL%2001.25.21.pdf">https://www.oregon.gov/oha/HPA/HP/HCCGBDocs/Cost%20Growth%20Target%20Committee%20Recommendations%20Report%20FINAL%2001.25.21.pdf</a>

<sup>&</sup>lt;sup>2</sup> Provider inclusion criteria were established by the Cost Growth Target Implementation Committee, as documented in their January 2021 Recommendations Report.

- c. OHA held a data validation meeting with Summit Health on February 12, 2025 to review data output for the 2024 data cycle and discuss and resolve any data validation concerns.
- d. OHA completed CGT-1 data validation with Summit Health on or around February 13, 2025.
- e. During OHA's CGT-1 data validation with provider organizations in Spring 2025, several questions arose about the payer submitted CGT-1 data that led to Providence resubmitting their final and accepted data on or around March 14, 2025 and United Health resubmitting their final and accepted data on or around June 24, 2025.
- f. On or around July 23, 2025, OHA shared an updated version of Summit Health's cost growth target data, following resubmissions of 2022-2023 cost growth target data by several cost growth target payers.
- 3. OHA identified Summit Health as having cost growth over the target between calendar years 2022 and 2023 for the following markets: **Commercial**, **13.5%** and **Medicaid**, **6.5%**.
- 4. Per OAR 409-065-0035(3), on or around July 23, 2025, OHA notified Summit Health that:
  - a. it had exceeded the cost growth target for the 2022-2023 measurement period;
  - a determination of reasonableness process for the Medicaid market was not required following an initial review of cost growth target data and other available information; and
  - c. a determination of reasonable process for the Commercial market was required following an initial review of cost growth target data and other available information.
- 5. On August 13, 2025, OHA met with Summit Health to discuss potential reasons for its excess cost growth for Commercial from 2022-2023. Attached as Exhibit A, and incorporated herein by reference, is a list of meeting information and participants.

6. Following the August 13, 2025, meeting, Summit Health submitted additional documentation to OHA containing details and supplemental information on the reasons for its growth.

### **Findings of Determining Reasonableness Process**

- 1. Investments to improve population health and/or address health equity. Summit Health made investments in expanded services to improve population health and/or address health equity, this may include investments that provide funding to communities, improve access to care, invest in underserved areas, and strengthen provider networks and technology infrastructure. During the measurement period under review, these investments led to an increase in cost and/or utilization.
- 2. **Limited, high-cost hospital network.** The Summit Health service region has limited access to hospital facilities which received higher contracting increases in the second year of measurement resulting in avoidable increases to hospital inpatient and outpatient costs.
- 3. **Rising cost of pharmacy (retail and medical).** A significant portion of the growth in per member per month costs between 2022-2023 was due to an increase in the amount spent on retail and medical pharmacy for Summit Health patients. The cost of pharmaceuticals is an ongoing concern in Oregon and nationally. The latest Centers for Medicare and Medicaid Services (CMS) National Health Expenditure data reports prescription drug expenditures grew 11.4% in 2023, faster than the rate increase of other health care expenditures<sup>3</sup>.
- 4. Increased payments for behavioral health services. OHA implemented its Behavioral Health Directed Payment program in 2023, as planned. This program increased the allowed amount (contracted rate) for reimbursement across a broad

Five Oak Building 421 SW Oak Street, Suite 875, Portland, OR 97204 oregon.gov/OHA

<sup>&</sup>lt;sup>3</sup> National Health Expenditures, Table 2, National Health Expenditures; Aggregate, Annual Percent Change, Percent Distribution and Per Capita Amounts, by Type of Expenditure: Selected Calendar Years 1960-2023. Centers for Medicare & Medicaid Services. <a href="https://www.cms.gov/data-research/statistics-trends-and-reports/national-health-expenditure-data/nhe-fact-sheet">https://www.cms.gov/data-research/statistics-trends-and-reports/national-health-expenditure-data/nhe-fact-sheet</a>

array of behavioral health services. Behavioral health rate increases were made to improve workforce shortages and expand behavioral health care in the region. The increased payments drove up the amount paid for Summit Health patient care on a per member per month basis.

5. Hospital facility rate increase (Medicaid). OHA mandated temporary rate increases for diagnosis-related group (DRG) hospitals for CY 2023 due to the upward cost pressures faced by hospitals during COVID-19. Summit Health received these increased rates, which drove the cost of care upward in this measurement period.

#### PROPOSED DETERMINATION

1. Following a review of CGT data and additional information on health care spending, OHA has determined that Summit Health's health care cost growth for the Commercial and Medicaid from 2022-2023 was due to acceptable reason(s). Summit Health will not be held accountable for cost growth in this measurement period and no further action is required for this measurement period. Attached as Exhibit B, and incorporated herein by reference, is a running summary of Summit Health's cost growth performance over time

Dated this 31 day of October 2025.

San a & Bather

By:

Sarah Bartelmann, MPH
Cost Programs Manager
Oregon Health Authority

#### **IMPORTANT NOTICES**

**PETITION FOR RECONSIDERATION:** You may file a Petition for Reconsideration ("Petition") pursuant to OAR 409-065-0050 within 30 days from the date this proposed order was mailed (See the "Date Mailed" on the first page). The Petition must include the specific grounds for reconsideration, and may be supported by written argument or attachments explaining why you believe OHA erred in its decision. This Petition will initiate an informal review process under OAR 409-065-0050.

The Petition must be submitted via email to <a href="mailto:HealthCare.CostTarget@oha.oregon.gov">HealthCare.CostTarget@oha.oregon.gov</a>.

NOTICE OF RIGHT TO REQUEST A HEARING: You are entitled to a hearing as provided by the Administrative Procedures Act (chapter 183, Oregon Revised Statutes), OAR 409-065-0050 and OAR 137-070-0075. You are entitled to be represented by an attorney at the hearing. Legal aid organizations may be able to assist a party with limited resources. The Oregon Health Authority will be represented by an Assistant Attorney General from the Oregon Department of Justice.

To request a contested case hearing, your request must be in writing and must be received within twenty (20) calendar days from the date this Order was personally served, mailed, or electronically transmitted to you, based on the date at the top of this document.

A request sent by U.S. mail is "received" on the date it is postmarked. Your request may also be emailed. Your request should be sent to:

HealthCare.CostTarget@oha.oregon.gov

or

421 SW Oak Street, Suite 875
Attn: Cost Growth Target Program
Portland, OR 97204

If you submit a request for a contested case hearing, you will be notified of the time and place of the hearing. Information on the hearing process will be provided to you in accordance with ORS 183.413(2). Any hearing will be conducted by an administrative law judge from the Office of Administrative Hearings, assigned as required by ORS 183.635.

If you fail to request a hearing within the time allowed, if you request a hearing and subsequently withdraw your request for a hearing, if you request a hearing and fail to appear for the hearing, or if a hearing is scheduled and you later notify OHA that you will not appear at the specified time and place, you will have waived your right to a hearing, and this proposed order will become a final order by default. If OHA issues a final order by default, it designates its file on this matter, including all materials that you have submitted relating to this matter, as the record in this case for purposes of proving a prima facie case.

NOTICE TO ACTIVE DUTY SERVICEMEMBERS: Active-duty service members have a right to stay these proceedings under the federal service members Civil Relief Act. For more information contact the Oregon State Bar at 800-452-8260, the Oregon Military Department at 503-584-3571, or the nearest United States Armed Forces Legal Assistance Office through http://legalassistance.law.af.mil. The Oregon Military Department does not have a toll-free telephone number.

# **Exhibit A: Meeting Dates and Participants**

Meeting Date	Participants	
August 13, 2025	OHA: Sarah Bartelmann, Sam Smith	
	Summit Health: Debbie Foster, Katie Howell	

# **Exhibit B: Cost Growth Target Performance Over Time**

## Summit Health Commercial Cost Growth

Measurement Year	Cost Growth %	Status	Determination
2021-2022	9.8%%	Not Met	Reasonable
2022-2023	13.5%	Not met	Reasonable

#### Summit Health Medicaid Cost Growth

Measurement Year	Cost Growth %	Status	Determination
2021-2022	-2.4%	Met	N/A
2022-2023	6.5%	Not met	Reasonable