

**HCMO Notice Question 15 - Exhibit 2:
Summary of Accountability Goals and Measures**

Integrated Public University Health System Measurement and Accountability Framework

Measures			Measure Readiness	Measure Detail
#	Pillar Focus Areas	Goal	Potential Metric and/or Indicator	Additional information
1	Quality, Equity and Access	Improve access to quality behavioral health care and improve behavioral health equity outcomes	SBIRT (screening, brief intervention, referral to treatment for substance use) SBIRT: Screening Completed SBIRT: Intervention Received	● Ready Coordinated Care Organization (CCO) metric, maintain or increase 2023 baseline values
2	Quality and Equity	Disaggregate demographic info in current data systems and prioritize identified Equity indicators/ measures included in this framework	Percentage of records achieving required data quality standards	● In Development Focus on data system improvement in years one and two
3	Quality and Equity	Improve the quality of culturally responsive services	Meaningful language access to culturally responsive services	● Ready CCO metric; Maintain or increase 2023 baseline values
4	Access and Equity	Increase number of people in clinical trials	TBD	● Needs Development Integration process to determine or develop a metric as well as baseline and benchmark targets within 24 months of the combination
5	Access	Improve access to acute adult inpatient beds	TBD; May rely on other goals and potential metrics from the Access Pillar Focus Area	● In Development Integration process will determine baseline and benchmark targets within 24 months of closing
6	Access	Decrease number of boarders in Emergency Departments and ICUs	Number of ED boarders, number of ICU boarders	● Ready Integration process will determine baseline and benchmark targets within 18 months of closing
7	Access	Decrease boarder hours in Emergency Departments and ICUs	ICU boarding hours, adult Emergency Department boarding hours	● Ready Integration process will determine baseline and benchmark targets within 18 months of closing

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8	Access	Reduce average wait times for transfer to the integrated public university health system from community hospitals throughout Oregon	Average hours accept to admission	● Ready Integration process will determine baseline and benchmark targets within 18 months of closing
9	Access	Reduce wait times for surgeries and procedures	Surgeries pending, procedures pending	● Ready Integration process will determine baseline and benchmark targets within 18 months of closing
10	Access	Reduce average wait times for new patient appointments for primary care	New patient median lag	● Ready Integration process will determine baseline and benchmark targets within 12 months of closing
11	Access	Reduce average wait times for new patient appointments for specialty care	New patients seen in 10 days, new patient median lag	● Ready Integration process will determine baseline and benchmark targets within 12 months of closing
12	Access	Improve recruitment and retention of primary care clinicians	HR time to fill	● Ready Integration process will determine baseline and benchmark targets within 24 months of closing
13	Access	Increase the number of assigned patients in primary care	HR turnover	● Ready Integration process will determine baseline and benchmark targets within 24 months of closing
14	Access	Increase access to inpatient virtual care	TBD	● Needs Development Integration process will determine a metric as well as baseline and benchmark targets within 24 months of closing
15	Access	Increase access to outpatient virtual care	TBD	● Needs Development Integration process will determine a metric as well as baseline and benchmark targets within 24 months of closing

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16	Access	Maintain or improve access to reproductive health care	Percentage people with a postpartum visit after a delivery	● Needs Development Integration process will determine a metric as well as baseline and benchmark targets within 12 months of closing
17	Access	Maintain or expand access to reproductive health care	Percentage of integrated public university health system pharmacies stocking the full complement of medications for reproductive health care, such as mifepristone, misoprostol, ulipristal acetate, Pre-Exposure Prophylaxis (PrEP)	● Needs Development Integration process will determine a metric as well as baseline and benchmark targets within 18 months of closing
18	Quality	Improve the quality of preventative care	Well child visits (3–6 years old)	● Ready Healthcare Effectiveness Data and Information Set (HEDIS) metric; Maintain or increase 2023 baseline values
			Adolescent immunizations	● Ready CCO metric; Maintain or increase 2023 baseline values
			Childhood immunization status	● Ready CCO metric; Maintain or increase 2023 baseline values
			Breast cancer screening	● Ready HEDIS metric; Maintain or increase 2023 baseline values
			Cervical cancer screening	● Ready HEDIS metric; Maintain or increase 2023 baseline values
			Colorectal cancer screening	● Ready HEDIS metric; Maintain or increase 2023 baseline values
			Depression screenings and follow up	● Ready CCO metric; Maintain or increase 2023 baseline values

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19	Quality	Improve the quality of pediatric care	Cardiothoracic mortality per index case, with a focus on STAT 4 and 5 (the most complex procedures with a higher risk of complications)	● Ready	Potential metric from Society for Thoracic Surgery
			Rates of necrotizing enterocolitis in very low birthweight babies	● In Development	Potential metric from Vermont Oxford
20	Quality	Improve the quality of care for people with chronic diseases	Hemoglobin A1c control	● Ready	CCO metric; Maintain or increase 2023 baseline values
			Hypertension control	● Ready	HEDIS metric; Maintain or increase 2023 baseline values
21	Quality	Improve the quality of reproductive health care	PC02, which is the rate of cesarean births among uncomplicated pregnancies	● Ready	Oregon Maternal Data Center metric; Maintain or decrease 2023 baseline values
22	Quality	Reduce preventable hospital harm	CMS PSI 90, which is a composite score based on 10 component measures of hospital patient safety	● Ready	Potential metric from Hospital Acquired Condition Reduction Program
23	Equity	Improve community engagement and partnership	Consider annual survey developed in collaboration with community partners	● Needs Development	Goal of this metric is to accountably track and improve community engagement; Integration process will consider, develop and determine baseline and benchmark for improvement, in collaboration with community, within 12 months of the combination.

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24	Equity	Improve health outcomes underserved people	Breast cancer screening	● In Development	The goal of these metrics is to curate valid and reliable disaggregated data to enable meaningful tracking of these metrics for underserved populations; Investments in “off-the-shelf” metrics frameworks exist for this goal and are aligned with broad population measures identified within the quality pillar area; Some information is already available for some populations; The integration process will consider, develop, determine and prioritize implementation of appropriate metrics, benchmarks and baseline information for each potential indicator identified within 24 months of the combination; Community engagement must be a component of this work
			Reproductive health	● In Development	
			Colorectal cancer screening	● In Development	
			Maternal care	● In Development	
			Diabetes control	● In Development	
			Hypertension control	● In Development	
			Children’s health	● In Development	
25	Cost	Sustainable average cost growth	A target for the average annual growth of health care spending per case mix and outpatient adjusted admission at OHSU	● Ready	Reports regarding OHSU’s performance and the Oregon Cost Growth Target can be found here

Key

Framework Design Objective

This framework aims to systematically track and evaluate goals, plans, and commitments concerning health care access, quality, cost and health equity as outlined in the 2024 OHSU HCMO Notice. It provides information about measure implementation readiness, baseline data, and timelines for the design and development of measurements, along with other relevant specifics.

Framework Accountability Plan

OHSU is the only hospital in Oregon subject to public records requests and open meetings laws. Additionally, OHSU will identify accountable offices and officers for each goal. OHSU will retain an objective third party to review progress toward goals, and OHSU may review this framework annually to consider and implement changes to specific goals and measures. The OHSU Board of Directors will hear a report regarding the current status of the framework during a public meeting each year. OHSU will report the status of the integration, including metrics and measurements, to the Governor of Oregon one, two, and five years after the transaction is approved.

Readiness Assessment



Ready

This measure criteria is likely ready to be considered in integration planning and for implementation.



In Development

This measure needs further work to identify specific details like baseline or benchmark. Time will be needed to prepare for implementation.



Needs Development

This measure needs more work to determine basic information related to implementation. Significantly more time will be required to develop the measure.

Readiness Assessment Detail

Readiness is determined based on review of specific indicators including: evidence basis, relevant benchmark available, feasibility to collect, sufficient denominator, transformative potential, burden to clinicians and alignment with the definitive agreement.