# 2022 CCO 2.0 Value-Based Payment & Health Information Technology Pre-Interview Questionnaire

# Introduction

Coordinated Care Organization (CCO) leadership interviews on value-based payment (VBP), per Exhibit H, will be scheduled in June 2022. Please [schedule here](https://www.signupgenius.com/go/10C0C4BACA82DA3FAC52-2022).

Staff from the OHSU Center for Health Systems Effectiveness (CHSE) will be conducting the CCO VBP interviews again this year. Similarly, they will be using information collected as part of the larger evaluation effort of the CCO 2.0 VBP Roadmap.

Please complete **Section I** of this document and return it as a Microsoft Word document to OHA.VBP@dhsoha.state.or.us by **Saturday, May 7, 2022**.

All the information provided in Section I is subject to the redaction process prior to public posting. OHA will communicate the deadline for submitting redactions after the VPB interviews have been completed.

**Section II** of this document describes the oral interview topic areas and suggestions for CCO preparation. CCO responses to oral interview questions will be de-identified in publicly reported evaluation results.

If you have questions or need additional information, please contact:

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## Section I. Written VBP Interview Questions

**Your responses will help the Oregon Health Authority (OHA) better understand your CCO Value-based payment (VBP) activities this year, including detailed information about VBP arrangements and HCP-LAN categories.**

**A prior version of this questionnaire was collected from your CCO in May 2021. Unless a question specifically instructs otherwise, please focus your responses on new information not previously reported.**

1. **In May 2021, you reported the following information about how your CCO engages partners (including providers) in developing, monitoring or evaluating VBP models.**

Insert previous response

**Please note any changes to this information, including any new or modified activities or formal organizational structures such as committees or advisory groups.**

Click or tap here to enter text.

1. **Has your CCO taken any new or additional steps since May 2021 to modify existing VBP contracts in response to the COVID-19 public health emergency (PHE)? *[Select one]***

[ ]  CCO modified VBP contracts after May 2021 due to the COVID-19 PHE.

*[Proceed to question 3]*

[ ]  CCO did not modify VBP contracts after May 2021 due to the COVID-19 PHE.

*[Skip to question 4].*

1. **If you indicated in Question 2 that you modified VBP contracts after May 2021 in response to the COVID-19 PHE, please respond to a–f:**
2. **If the CCO modified *primary care* VBP arrangements due to the COVID-19 PHE, which if any changes were made? (select all that apply)**

[ ]  Waived performance targets

[ ]  Modified performance targets

[ ]  Waived cost targets

[ ]  Modified cost targets

[ ]  Waived reporting requirements

[ ]  Modified reporting requirements

[ ]  Modified the payment mode (e.g. from FFS to capitation)

[ ]  Modified the payment level or amount (e.g. increasing PMPM)

1. **If the CCO modified *behavioral health care* VBP arrangements due to the COVID-19 PHE, which if any changes were made? (select all that apply)**

[ ]  Waived performance targets

[ ]  Modified performance targets

[ ]  Waived cost targets

[ ]  Modified cost targets

[ ]  Waived reporting requirements

[ ]  Modified reporting requirements

[ ]  Modified the payment mode (e.g. from FFS to capitation)

[ ]  Modified the payment level or amount (e.g. increasing a PMPM)

1. **If the CCO modified *hospital* VBP arrangements due to the COVID-19 PHE, which if any changes were made? (select all that apply)**

[ ]  Waived performance targets

[ ]  Modified performance targets

[ ]  Waived cost targets

[ ]  Modified cost targets

[ ]  Waived reporting requirements

[ ]  Modified reporting requirements

[ ]  Modified the payment mode (e.g. from FFS to capitation)

[ ]  Modified the payment level or amount (e.g. increasing a PMPM)

1. **If the CCO modified *maternity care* VBP arrangements due to the COVID-19 PHE, which if any changes were made? (select all that apply)**

[ ]  Waived performance targets

[ ]  Modified performance targets

[ ]  Waived cost targets

[ ]  Modified cost targets

[ ]  Waived reporting requirements

[ ]  Modified reporting requirements

[ ]  Modified the payment mode (e.g. from FFS to capitation)

[ ]  Modified the payment level or amount (e.g. increasing a PMPM)

1. **If the CCO modified *oral health* VBP arrangements due to the COVID-19 PHE, which if any changes were made? (select all that apply)**

[ ]  Waived performance targets

[ ]  Modified performance targets

[ ]  Waived cost targets

[ ]  Modified cost targets

[ ]  Waived reporting requirements

[ ]  Modified reporting requirements

[ ]  Modified the payment mode (e.g. from FFS to capitation)

[ ]  Modified the payment level or amount (e.g. increasing a PMPM)

**The following questions are to better understand your CCO’s plan for mitigating adverse effects of VBPs and any modifications to your previously reported strategies. We are interested in plans developed or steps taken since CCOs last reported this information.**

1. **In May 2021 your CCO reported the following information about processes for mitigating adverse effects VBPs may have on health inequities or any adverse health-related outcomes for any specific population (including racial, ethnic and culturally based communities; LGBTQ people; people with disabilities; people with limited English proficiency; immigrants or refugees; members with complex health care needs; and populations at the intersections of these groups).**

Insert previous response

**Please note any changes to this information since May 2021, including any new or modified activities.**

Click or tap here to enter text.

1. **Is your CCO planning to incorporate risk adjustment for social factors in the design of new VBP models, or in the refinement of existing VBP models? [Note: OHA does not require CCOs to do so.]**

Click or tap here to enter text.

**The following questions are to better understand your CCO’s VBP planning and implementation efforts for VBP Roadmap requirements that will take effect in 2023 or later. This includes oral health and children’s health care areas. CCOs are required to implement a new or enhanced VBP in one of these areas by 2023. CCOs must implement a new or enhanced VBP model in the remaining area by 2024.**

1. **Describe your CCO’s plans for developing VBP arrangements specifically for oral health care payments.**
2. **What steps have you taken to develop VBP models for this care delivery area?**

Click or tap here to enter text.

1. **What attributes do you intend to incorporate into this payment model (e.g., a focus on specific provider types, certain quality measures, or a specific LAN tier).**

Click or tap here to enter text.

1. **When do you intend to implement this VBP model?**

Click or tap here to enter text.

1. **Describe your CCO’s plans for developing VBP arrangements specifically for children’s health care payments.**
2. **What steps have you taken to develop VBP models for this care delivery area?**

Click or tap here to enter text.

1. **What attributes do you intend to incorporate into this payment model (e.g., a focus on specific provider types, certain quality measures, or a specific LAN tier).**

Click or tap here to enter text.

1. **When do you intend to implement this VBP model?**

Click or tap here to enter text.

1. **CCOs will be required in 2023 to make 20% of payments to providers in arrangements classified as HCP-LAN category 3B or higher (i.e. downside risk arrangements). Describe the steps your CCO is taking in 2022 to prepare to meet this requirement.**

Click or tap here to enter text.

**The following questions are to better understand your CCO’s technical assistance (TA) needs and requests related to VBPs.**

1. **What TA can OHA provide that would support your CCO’s achievement of CCO 2.0 VBP requirements?**

Click or tap here to enter text.

1. **Aside from TA, what else could support your achievement of CCO 2.0 VBP requirements?**

Click or tap here to enter text.

## Health Information Technology (HIT) for VBP and Population Health Management

**Questions in this section were previously included in the CCO HIT Roadmap questionnaire and relate to your CCO’s HIT capabilities for the purposes of supporting VBP and population management. Please focus responses on new information since your last HIT Roadmap submission on March 15, 2021.**

Note: Your CCO will not be asked to report this information elsewhere. This section has been removed from the CCO HIT Roadmap questionnaire / requirement.

1. **You previously provided the following information about the HIT tools your CCO uses for VBP and population management including:**
	1. **HIT tool(s) to manage data and assess performance**

Insert previous response

**Please note any changes or updates to this information since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

* 1. **Analytics tool(s) and types of reports you generate routinely**

Insert previous response

**Please note any changes or updates to this information since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

1. **You previously provided the following information about your staffing model for VBP and population management analytics, including use of in-house staff, contractors or a combination of these positions who can write and run reports and help others understand the data.**

Insert previous response

**Please note any changes or updates to this information** **since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

**Questions in this section relate to your CCO’s plans for using HIT to administer VBP arrangements (for example, to calculate metrics and make payments consistent with its VBP models).**

1. **You previously provided the following information about your strategies for using HIT to administer VBP arrangements. This question included:**
	1. **how you will ensure you have the necessary HIT to scale your VBP arrangements rapidly over the course of the contract,**
	2. **spread VBP to different care settings, and**
	3. **include plans for enhancing or changing HIT if enhancements or changes are needed to administer VBP arrangements for the remainder of the contract.**

Insert previous response

**Please note any changes or updates for each section since your HIT Roadmap was previously submitted March 15, 2021.**

1. **how you will ensure you have the necessary HIT to scale your VBP arrangements rapidly over the course of the contract,**

Click or tap here to enter text.

1. **spread VBP to different care settings, and**

Click or tap here to enter text.

1. **include plans for enhancing or changing HIT if enhancements or changes are needed to administer VBP arrangements for the remainder of the contract.**

Click or tap here to enter text.

1. **You reported the following information about your specific activities and milestones related to using HIT to administer VBP arrangements.**

**For this question, please modify your previous response, using black font to easily identify updates from your previous HIT Roadmap submission on March 15, 2021. If the field below is blank, please provide specific milestones from your previous HIT Roadmap submission.**

Insert previous response

**Briefly summarize updates to the section above.**

Click or tap here to enter text.

1. **You provided the following information about successes or accomplishments related to using HIT to administer VBP arrangements.**

Insert previous response

**Please note any changes or updates to these successes and accomplishments since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

1. **You also provided the following information about challenges related to using HIT to administer VBP arrangements.**

Insert previous response

**Please note any changes or updates to these challenges since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

**Questions in this section relate to your CCO’s plans for using HIT to support providers.**

1. **You previously reported the following information about your strategies, activities and milestones for using HIT to effectively support provider participation in VBP arrangements. This included how your CCO ensures:**
	1. **Providers receive timely (e.g., at least quarterly) information on measures used in the VBP arrangements applicable to their contracts.**
	2. **Providers receive accurate and consistent information on patient attribution.**
	3. **If applicable, include specific HIT tools used to deliver information to providers.**

Insert previous response

**Please note any changes or updates to your strategies since your HIT Roadmap was previously submitted March 15, 2021.**

1. **Providers receive timely (e.g., at least quarterly) information on measures used in the VBP arrangements applicable to their contracts.**

Click or tap here to enter text.

1. **Providers receive accurate and consistent information on patient attribution.**

Click or tap here to enter text.

1. **If applicable, include specific HIT tools used to deliver information to providers.**

Click or tap here to enter text.

1. **You previously reported the following information about how your CCO uses data for population management to identify specific patients requiring intervention, including data on risk stratification and member characteristics that can inform the targeting of interventions to improve outcomes.**

Insert previous response

**Please note any changes or updates to this information since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

1. **You previously reported the following information about how your CCO shares data for population management to identify specific patients requiring intervention, including data on risk stratification and member characteristics that can inform the targeting of interventions to improve outcomes.**

Insert previous response

**Please note any changes or updates to this information since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

1. **You previously reported the following information about your accomplishments and successes related to using HIT to support providers.**

Insert previous response

**Please note any changes or updates to this information since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

1. **You previously reported the following information about your challenges related to using HIT to support providers.**

Insert previous response

**Please note any changes or updates to this information since your HIT Roadmap was previously submitted March 15, 2021.**

Click or tap here to enter text.

## ***Optional***

**These optional questions will help OHA prioritize our interview time.**

1. **Are there specific topics related to your CCO’s VBP efforts that you would like to cover during the interview? If so, what topics?**

Click or tap here to enter text.

1. **Do you have any suggestions for improving the collection of this information in subsequent years? If so, what changes would you recommend?**

Click or tap here to enter text.

Part II. Oral Interview

This information will help your CCO prepare for your VBP interview.

**Written responses are not required.**

Purpose

The purpose of the CCO 2.0 VBP interviews is to expand on the information CCOs report and have provided in the written questionnaire; provide CCOs an opportunity to share challenges and successes; and discuss technical assistance needs. OHSU staff will ask these questions of all CCOs, tailoring the questions to each CCO based on written interview responses.

Format

Oral interviews will be conducted via a video conference platform (such as Zoom) and will be recorded, transcribed and de-identified for further analysis. Analysis may include overarching themes and similarities or differences in how CCOs are engaging in VBP-related work. OHA may publicly report de-identified and aggregated results next year.

Before we begin, participants will have an opportunity to ask about the interview format. CCOs are encouraged to send questions to OHA *prior to* the interview, as discussion time will be limited.

Interview topics

Questions topics will include your CCO’s VBP activities and milestones in 2021, any early successes or challenges encountered in this work so far, and how your CCO’s plans for future years are taking shape. Questions will cover four primary areas:

1. Provider engagement and CCO progress toward VBP targets. These questions will explore what has been easy and difficult about your CCO’s VBP efforts so far, recognizing that each CCO operates within a unique context that must be considered when designing new payment arrangements. We may ask questions about your perception of provider readiness for or receptivity to VBP arrangements, factors affecting your progress toward VBP targets for future years (including overall VBP participation as well as downside risk arrangements), and how to make OHA technical assistance most relevant to your needs.
2. Implementation of VBP models required in 2022. These questions will address how your CCO is making decisions about and designing required VBP models. We may ask about factors influencing the design and scale of your PCPCH infrastructure payment model and models to meet the Care Delivery Area requirements. These questions may address your experience designing quality strategies in hospital, maternity and behavioral health VBP arrangements; and your progress developing HIT capabilities with providers to implement these VBP arrangements. We are particularly interested in understanding CCOs’ experiences promoting VBP arrangements with a) various hospital reporting groups (DRG, A/B, etc.), b) behavioral health providers operating independently as well as in integrated primary care settings, and c) maternity care providers reimbursed in standalone as well as bundled payment arrangements.
3. Planning and design of VBP models required in 2023 or later. These questions will follow-up on information you provide about your progress developing VBP arrangements in children’s health and oral health. We may ask about factors influencing your planning in these areas, perceived provider readiness, and assistance needed from OHA.
4. Promoting health equity through VBP models. These questions will explore how your CCO’s work on health equity relates to your VBP efforts. We may ask about your CCO’s progress with collecting social needs data; how health equity informs your VBP planning in specific areas such as maternity care; and whether you have identified opportunities to use VBPs to address other CCO 2.0 priorities or requirements.