



2021 SHARE Initiative Spending Plan Report Evaluation Tool

CCO Name	
Reviewer	
Date of Review	
Score	X out of possible 10 points

Scale	
1	Meets expectations
0	Expectations not met

Background Information:

- In accordance with the requirements stated in [ORS 414.572\(1\)\(b\)\(C\)](#) and [OAR 410-141-3735](#), CCOs must designate a portion of annual net income or reserves that exceed the financial requirements for SHARE Initiative spending.
- For Contract Years 2020 and 2021, CCOs that exceed minimum financial requirements are expected to define their own SHARE Initiative portion in compliance with the statute and rules referenced above.
- By September 30¹ of each Contract Year, CCOs that exceed minimum financial requirements shall annually submit to OHA for review and approval its SHARE Initiative Spending Plan identifying how it intends to direct its SDOH-E spending based on net income or reserves from the prior year for the SHARE Initiative. This annual SHARE Initiative Spending Plan Report will capture from CCOs how they are meeting these contractual requirements.

For SHARE Initiative questions, please contact: SHARE.Initiative@dhsaha.state.or.us

¹ CCOs can submit their proposed Spending Plans at any time from 6/30/2021 through 9/30/2021. OHA will notify each CCO about the approval status of its plan within 30 days of receipt. In the event a CCO’s plan cannot be approved as submitted, OHA will work with the CCO to resolve the identified deficiencies as quickly as possible.

Section 1: SHARE Initiative Designation		Guidance Document Language	Required Components	Score
Report Template Question				
1	What is the dollar amount for your CCO's SHARE Initiative Designation?	<ul style="list-style-type: none"> For the first two years of the SHARE Initiative — that is, CCOs spending a portion of profits from Contract Years (CYs) 2020 and 2021— it is up to each CCO to decide how much of its profits it will contribute to the SHARE Initiative. A CCO reports this amount as part of Exhibit L, Report L6.7. If a CCO does not exceed minimum financial reserve requirements for CCOs, they are presumed exempt from the SHARE Initiative. OHA expects to set a formula to prescribe each CCO's annual SHARE Initiative requirement. This formula could be prescribed as early as CY 2022. 	<ul style="list-style-type: none"> CCO presents provides the dollar amount that has been recorded in cell E30 in Exhibit L – Report L6.7. (1 pt) 	

Section 2: SHARE Initiative Spending Plan		Guidance Document Language	Required Components	Score
SDOH-E Domains and CHP/Statewide Priorities				
Report Template Question				
2	Identify the SDOH-E domains applicable to your CCO's SHARE Initiative Spending.	<ul style="list-style-type: none"> SHARE Initiative spending must meet OHA's definition of SDOH-E and fall into one or more of four domains: economic stability, neighborhood and built environment, education and social and community health. 	<ul style="list-style-type: none"> CCO checks all applicable domains. (1 pt) 	
3	Describe how your SHARE Initiative spending aligns with your CCO's Community Health Improvement Plan (CHP).	<ul style="list-style-type: none"> SHARE spending priorities must be based on shared priorities from the community health improvement plans (CHPs) in a CCO's Service Area. Until a CCO has a fully shared CHP, CCOs must identify spending priorities by looking at priorities in the CHPs of community partners (including local 	<ul style="list-style-type: none"> CCO clearly describes how the domains indicated in question 2 align with the priorities included in their CHPs. (1 pt) <ul style="list-style-type: none"> If CCO's CHP isn't yet fully shared, CCO needs to clearly describe how domains indicated in question 2 align to priorities included in in the CHPs of their community 	

		<p>public health, hospitals, tribes, and CCOs in the area).</p> <ul style="list-style-type: none"> • CCO priorities might be fully aligned with other CHPs. For example, a CCO could identify supportive housing, which is a priority in all CHPs in its Service Area. However, alignment could also be based on: <ul style="list-style-type: none"> ○ A common health outcome: For example, a community priority is obesity and the CCO's SHARE spending priority is food insecurity to address obesity; or ○ A common priority population: For example, the community priority is children, and the CCO's SHARE spending priority is stable housing for children and families. 	<p>partners (including local public health, hospitals, tribes, and CCOs in the area).</p>	
4	Describe how your CCO's SHARE Initiative spending addresses the statewide priority of housing-related services and supports, including Supported Housing.	<ul style="list-style-type: none"> • A portion of a CCO's SHARE Initiative Spending must be spent on housing-related services and supports. <ul style="list-style-type: none"> ○ Housing-related services and supports can be offered at the individual level or at the community level. 	<ul style="list-style-type: none"> • CCO clearly describes spending that is addressing the statewide priority of housing related services. (1 pt) 	
SDOH-E Partners				
<i>Report Template Question</i>				
5	Identify each of the SDOH-E Partner(s) that will receive a portion of SHARE Initiative funding. (SDOH-E partners must have demonstrated experience delivering services or programs, or supporting policy	<ul style="list-style-type: none"> • SHARE Initiative efforts should leverage cross-sector partnerships with organizations that are already trusted in their communities to provide social services and work for policy and systems change. • A portion of SHARE dollars must go directly to SDOH-E Partners. • The definition of SDOH-E partner is broad enough to include many types of organizations. It includes partners that primarily address individual social needs (for example, social service agencies), as well 	<ul style="list-style-type: none"> • CCO lists the names of the SDOH-E Partners. (1 pt) 	

	and systems change, or both, related to SDOH-E.)	as organizations that work for policy and systems change to address SDOH-E (for example, regional health equity coalitions), and those that do both (for example, CBOs and local health departments).		
6	Describe how each of the SDOH-E Partners identified above were selected for SHARE Initiative project(s) or initiative(s).	<ul style="list-style-type: none"> While ideally CCOs also have strong partnerships with clinics and other health care provider partners to support SDOH-E efforts, 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) are also appropriate partners in this context. 	<ul style="list-style-type: none"> CCO clearly describes selection process for chosen SDOH-E Partners. (1 pt) <ul style="list-style-type: none"> If CCO's CAC was involved in the process, please also indicate in your description. 	
7	Do you have a formal agreement with each of the SDOH-E Partners described in item 5? (Please be sure to submit the formal agreement for each SDOH-E Partners.)	<p>CCOs must have a contract, which could include a grant agreement, or other agreement such as a memorandum of understanding (MOU) with each SDOH-E Partner that receives SHARE funding. Contracts must include all required elements according to OHA/CCO contracts. They should also include information appropriate to define the SDOH-E services and scope of work, including:</p> <ul style="list-style-type: none"> Specific services provided and populations and geographic areas to be served; Whether/how members will be referred between the CCO and SDOH-E Partner; How outcomes will be measured/evaluated; and How data will be shared, tracked and reported, including appropriate steps to protect patient privacy and compliance with HIPAA. <p>Per March 4, 2021, communication to CCOs entitled Clarification about SHARE Initiative SDOH-E Partner contract requirements:</p> <ul style="list-style-type: none"> CCOs shall enter into a contract, a Memorandum of Understanding, or other form of agreement including a grant agreement, with each SDOH-E Partner that defines the services to be provided and 	<ul style="list-style-type: none"> CCO indicates it has a formal agreement with each SDOH-E Partner. (1 pt) 	

		<p>the CCO's data collection methods as provided in the contract between the Authority and the CCO.</p>		
	<p>CCO must submit the formal agreement for each SDOH-E Partners.</p>	<p>Per March 4, 2021, communication to CCOs entitled Clarification about SHARE Initiative SDOH-E Partner contract requirements:</p> <p>The CCO shall ensure that its written agreement with each SDOH-E Partner, if not a Subcontract, meets the following minimum requirements:</p> <ul style="list-style-type: none"> (a) Contract term and budget; (b) Legal names for all entities; (c) SDOH-E domain(s), as specified in OAR 410-141-3735(3)(b), in which the SDOH-E Partner provides services; (d) How CCO will distribute funds to the SDOH-E Partner, including distribution schedule and allowable percentage of indirect costs; (e) The scope of work to be performed, including: <ul style="list-style-type: none"> i. Specific services to be provided; and ii. Which populations will be provided services (e.g., CCO Members, Community members, Tribal communities, communities of color, etc.). (f) How outcomes will be measured and evaluated, including: <ul style="list-style-type: none"> i. Specific, Measurable, Achievable, Relevant and Time-based (SMART) objectives; and ii. How outcomes align with community priorities from the CCO's 	<p>CCO must provide written agreement with each SDOH-E Partner that meets each of the minimum requirements. (1 pt)</p>	

		<p style="text-align: center;">Community Health Improvement Plan (CHP).</p> <p>(g) Data collection, sharing, and reporting obligations of both the SDOH-E Partner and the CCO, including:</p> <ol style="list-style-type: none"> i. The data elements to be collected by the SDOH-E Partner and/or the CCO; ii. How data is related to outcomes; and iii. Process and frequency of submission of reports and/or data exchange between SDOH-E Partner and CCO. 		
8	<p>Attach a budget proposal indicating the amount of funding from the SHARE Initiative that will be put toward each project or initiative, including the amount of funds that will be directed to each SDOH-E Partner.</p>	<p>In general, SHARE dollars may be spent in a variety of ways as long as spending complies with the overall requirements as outlined in this guidance document, in rule, and in the CCO contract. Because these dollars are part of a CCO’s annual net profits, they are not held to the same restrictions as the CCO’s Medicaid global budget. However, SHARE dollars may not be spent on:</p> <ul style="list-style-type: none"> • General administrative costs that are not directly related to a SDOH-E and/or health disparities initiative; • General administrative costs that are otherwise necessary for the regular business operations of the CCO and compliance with federal/state requirements (for example, providing interpreters), including any staffing required by contract (for example, Traditional Health Worker liaison); • Sponsorships or advertising; 	<p>CCO must attach a simple budget proposal with this submission that complies with the overall requirements as outlined in this guidance document. (1 pt)</p>	

		<ul style="list-style-type: none"> • Equipment or services to address an identified medical need (for example, corrective lenses, specialized clothing); • Member incentives (for example, gift cards for accessing preventive services); • Costs for SDOH-E related research in which findings are only used internally, only used by another private entity, or are proprietary; • Educational or promotional items or goods for general distribution through a health fair or other event not targeted at populations experiencing health disparities; • Political campaign contributions; • Advocacy specific to CCO operations and financing (as opposed to advocacy for policy that advances SDOH-E objectives); or • Expenses that have been reported separately, such as Medicaid-covered services or health-related services. 		
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Community Advisory Council (CAC)

Report Template Question

9	Describe the designated role for your CAC with regard to decision-making on SDOH-E spending under the SHARE Initiative. (As appropriate, please be sure to include in your description the ongoing engagement and feedback loop with the CAC as it relates to SDOH-E spending.)	<ul style="list-style-type: none"> • The CCO is responsible for providing a role for its CAC related to the SHARE Initiative. <p>Some examples of what this role could look like, include: The CAC <i>identifies</i> and/or approves SDOH-E priorities that are in line with community priorities in the CHP.</p> <ul style="list-style-type: none"> • The CAC reviews SHARE Initiative related proposals and makes recommendations to the CCO leadership or board. • The CCO designates a portion of funding for the CAC to direct to SHARE Initiative efforts. • The CAC tracks and monitors outcomes of SHARE Initiative spending. 	<ul style="list-style-type: none"> • CCO clearly describes the designated role for their CAC with regard to decision-making on SDOH-E spending under the SHARE Initiative (1 pt) <ul style="list-style-type: none"> ○ As appropriate, CCO to include in description the ongoing engagement and feedback loop with the CAC as it relates to SDOH-E spending. ○ No other description of the CCO's CAC is necessary. 	
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Section 3: Optional: Additional Details		Guidance Document Language	Required Components
Report Template Question			
10	Describe the evaluation plan for each project or initiative, including expected outcomes, the projected number of your CCO's Members, OHP members, and other Community Members served, and how the impact will be measured.	N/A	<ul style="list-style-type: none"> CCO's MOUs with SDOH-E Partners provided will include these elements. Please include any additional evaluation plans not captured in the MOUs.
11	If the project or initiative requires data sharing, attach a proposed or final data-sharing agreement that details the obligation for the SDOH-E Partner to comply with HIPAA, HITECH, and other Applicable Laws regarding privacy and security of personally identifiable information and Electronic Health Records and hard copies thereof. Does the project require data sharing?	N/A	<ul style="list-style-type: none"> CCO's MOUs with SDOH-E Partners provided will include these elements. Please include any data sharing agreements not captured in the MOUs.

General Observations	OHA Notes
Does the spending plan detail where the CCO is headed, what it plans to achieve, the methods it will use, and milestones to monitor progress?	
Did the CCO conduct a thorough analysis of the existing CHPs?	
Does the SHARE Initiative act as a catalyst to initiate meaningful community partnerships? What portion of money goes to Partners?	
Does the SHARE Initiative spending plan create the foundation to build capacity in the housing priority?	
Does the CCOs only submit materials pertinent to the SHARE Initiative?	

OHA Comments