

Oregon Health Authority

Transformation Center

2018 Annual Report

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Executive summary

The Oregon Health Authority (OHA) Transformation Center is the hub of innovation and quality improvement for Oregon's health system transformation efforts. Its aim is to achieve better health, better care and lower costs for all. The center identifies, strategically supports and shares innovation at the system, community and practice levels. Through collaboration, the center promotes initiatives to advance the coordinated care model.

In 2018 the center continued to adopt new strategies to advance primary care, behavioral health integration, oral health integration, value-based payment, population health, incentive measure work and other cross-cutting supports. Center staff also helped develop policies in many of these areas for the next coordinated care organization (CCO) five-year contracts.

This year the center convened 36 multiple partner events and provided 38 one-on-one supports including trainings, webinars and other technical assistance (TA) to CCO staff, practice administrators, clinicians and other stakeholders across Oregon. Ninety percent of evaluation respondents found the support to be valuable, and 99% planned to take action as a result of participation.

This report briefly describes select initiatives.

Strategic areas of support

Primary care

Patient-Centered Primary Care Home Program

The Patient-Centered Primary Care Home (PCPCH) program recognizes and verifies clinics applying to become PCPCHs. By recognizing clinics that offer high-quality, patient-centered care – and providing technical assistance to help clinics improve – the program sets the standard for transformative, whole-person and evidence-based care. By the end of 2018, 655 clinics were recognized as PCPCHs. This is about three-quarters of all primary care practices in Oregon. Fifty-two PCPCHs achieved 5 STAR – the highest tier in the PCPCH model. Milestones this year include:

- 24 practices were newly recognized as PCPCHs.
- 178 practices renewed their PCPCH recognition.
- 53 practices moved to a higher tier of recognition.
- 21 practices were newly recognized as 5 STAR PCPCHs.

“The support from the OHA site visitors was game changing. Six months from now we will be leaps and bounds ahead of clinics who have not had a site visit.”

- PCPCH clinic staff

Across insurance payers, over 3 million Oregonians receive care from a PCPCH.

PCPCH technical assistance

The PCPCH program provides technical assistance to PCPCH clinics through verification site visits, follow-up and webinars. This year, staff completed site visits at 73 clinics across the state.

Behavioral health integration

Behavioral health integration is one of the top four priorities in Oregon’s health system transformation going forward. The center supports multiple initiatives in this area.

Behavioral Health Collaborative Governance and Finance Workgroup

The center staffs the Behavioral Health Collaborative Governance and Finance Workgroup, which is developing recommendations and action plans to help the Oregon Health Policy Board implement the collaborative's recommendations related to a single point of shared accountability and payment. The goal is an integrated behavioral health system that can provide better care at a lower cost.

In 2018 the center staffed five meetings of the risk sharing subgroup, which is developing recommendations for CCO risk sharing with the state hospital. Risk sharing will incentivize CCOs to treat members in the community and avoid hospitalization when appropriate.

Tri-county Regional Behavioral Health Collaborative

The center is helping staff a newly launched regional behavioral health collaborative in the Portland tri-county area. The collaborative's goal is to improve behavioral health outcomes through collective action across behavioral health organizations with an initial focus on peer delivered services, substance use disorders, and activities that can make an impact in 12–24 months. Seventy-eight stakeholders participated in the first meeting in November. Three work groups — communities of color, youth and families, and medical community collaboration — will identify goals for the first year.

Integrating Primary Care into Behavioral Health Settings conference

The Transformation Center and the Institute for Behavioral Health Integration held an all-day learning and networking opportunity for specialty behavioral health care providers, including Certified Community Behavioral Health Clinics and community mental health programs, focused on integrating primary care into behavioral health care settings. Topics included electronic health record needs, contracting, licensing, logistics, care coordination, culture, data collection and financing. As a result, several participants began meeting regularly to discuss behavioral health data.



Behavioral health clinic leaders discuss their experiences integrating primary care.

CCO technical assistance

The center supported custom behavioral health integration technical assistance (TA) for eight CCOs. Topics included integration across a community; value-based payment; efficient workflows; an embedded behaviorist model; quality and outcome measures that can be reported by clinics; and population health needs assessments. Ninety-five percent of evaluation respondents rated the support as valuable or very valuable to their work. All planned to take action as a result.

Oral health integration

One CCO completed an oral health integration project with a consultant through the Transformation Center and continues to contract independently with the consultant to deepen its oral health integration work.

The center also worked with a contractor to develop an FAQ and social network campaign to educate members, providers and community organizations about oral health benefits for Oregon Health Plan members. View the materials:

<https://www.oregon.gov/oha/HSD/OHP/Pages/dental-toolkit.aspx>

Value-based payment

Paying for value is a primary strategy for achieving the triple aim of better health, better care and lower costs for all Oregonians. Meeting this goal will require shifting health care reimbursement strategies away from a system that pays for volume of services to one that rewards quality and outcomes. The Transformation Center serves as a focal point for value-based payment (VBP) strategies.

Primary Care Payment Reform Collaborative

The center staffs the Primary Care Payment Reform Collaborative, a multi-stakeholder advisory group tasked with assisting OHA in developing and implementing a Primary Care Transformation Initiative. Central to the initiative is a primary care payment model emphasizing paying for quality of care rather than quantity, as well as integrating behavioral health and addressing social determinants of health. The 2018 progress report is available here:

<https://www.oregon.gov/oha/HPA/dsi-tc/SB231%20Meeting%20Docs/PCPRC2018Report-1.28.19.pdf>

Comprehensive Primary Care Plus (CPC+)

The Transformation Center manages Oregon's Medicaid fee-for-service implementation of CPC+. Per-member, per-month care management fees are a key component of the CPC+ payment model. In 2018 OHA launched the second key component, a performance-based incentive payment based on practice performance on quality and utilization metrics. In 2018, each practice that submitted data received an average of \$12,500.

Value-based payment roadmap

The center worked with stakeholders and national VBP experts to develop a VBP Roadmap for CCOs. The Roadmap is a required deliverable of Oregon's 1115 waiver and, beginning 2020, will include annual and five-year statewide VBP targets for CCOs and their contracted providers.

The center participated in extensive public engagement to solicit feedback on VBP definitions, policies, targets, and reporting and measurement strategies. This included convening a work group; statewide public meetings; and online surveys.

The CCO VBP Roadmap was approved by the Oregon Health Policy Board in October 2018. It is the foundation for VBP policies in the next CCO contracts (<https://www.oregon.gov/oha/OHPB/Pages/CCO-2-0.aspx>). The Roadmap will be released in early 2019, along with VBP categorization guidance for CCOs.

Population health

Community advisory council support

The center continues to provide targeted supports to CCO community advisory councils (CACs) focused on CAC member recruitment and engagement.

- The center held a one-day **CAC leadership event** for CAC chairs and coordinators. Over 80 attendees participated in sessions focusing on CAC best practices, community health assessments/community health improvement plans, and recruiting and retaining diverse CAC members. Read the story one CAC chair shared at the event about the importance of rural perspectives:

<http://www.oregonhealthstories.com/bringing-rural-perspective-health-system-decision-making/>



Char Reavis describes the importance of the rural perspective in CAC work.

- The center hosted **Monthly CAC Recruitment & Engagement Committee calls** with CAC leaders, focusing on peer-to-peer sharing on topics including CAC member recruitment and engagement, health equity, and CAC organizational development

Social determinants of health policy work

Transformation Center staff supported the OHA Office of Health Policy’s social determinants of health policy development in key areas, such as CCO community advisory councils, community health assessments and community health improvement plans.

Community health assessment (CHA) and community health improvement plan (CHP) trainings



Hermiston-area representatives of the local CCO CAC, health system and public health department attended a training about community health assessments and improvement plans.

Consultants and center staff led five CHA/CHP trainings with four CCO regions. These trainings provided an opportunity for CCOs to collaborate with local public health and tribal health departments, hospitals and local mental health authorities to develop shared health assessments and improvement plans. The curriculum is built on best practices from several industries. Ninety-eight percent of evaluation respondents found the trainings

valuable in supporting their work. The curriculum continues to be updated. The training is now available in two half-days and folds in tools for implementing House Bill 2675, which requires CHPs to include a plan for integrating physical, behavioral and oral health care.

Read about one CCO’s experience participating in the training here:

<http://www.oregonhealthstories.com/local-organizations-come-together-learn-improve-community-health/>

Incentive measure technical assistance

The Health Authority uses incentive measures to set goals and reward CCOs for improving health care quality and health outcomes of Medicaid members. In 2018, the Transformation Center provided technical assistance to CCOs and clinics on nine measures.

Adolescent well-care visits

CCOs have made improvements on overall adolescent well-care rates. However, preventive visits among young adults (ages 18–21) remain drastically lower than rates among younger adolescents. To support increasing adolescent well-care visits for 18–21-year-olds, the center hosted a webinar about Health Hack, a CCO-designed curriculum for teaching young adults to navigate the health system. A consultant adapted a Health Hack lesson plan for colleges and universities and piloted it with three community college health classes. Eighty-five percent of students said they were more likely to seek a well visit after participating, and 98% said this type of information should be included in other health classes.

Childhood immunizations

The center contracted with two consultants and partnered with the OHA Public Health Division’s Immunization Program to continue childhood immunization TA. The TA included evidence-based quality improvement activities to identify root causes of low immunization rates and prioritize CCO-level, clinic-level, and/or community-level interventions. One CCO participated in this TA offering, while five had in 2017. In 2017, all 15 CCOs met either their improvement target or the statewide benchmark.

Cigarette smoking prevalence

The center continued to provide CCO- and provider-level training through various methods.

- In collaboration with OHA’s Public Health Division (PHD), the center offered a CCO-focused webinar on how to use quit line data to support tobacco cessation quality improvement initiatives.
- A contractor developed a provider-focused e-module training on the Five A’s (the five major steps to intervention — ask, advise, assess, assist and arrange) and brief intervention, as well as cessation counseling during pregnancy. The training includes no-cost continuing medical education credits, and 45 people completed it in late 2018. The training is available at: <https://tcrc.rapidlearner.com/3462253711>

“Continue bringing groups/ CCOs/systems together to learn collaboratively from each other. [It’s] well worth the time and effort.”

- CCO staff from tobacco prevalence learning collaborative

- A contractor worked with seven CCOs to develop tailored tobacco cessation benefits communications for members.
- The center hosted a half-day learning collaborative for CCOs focused on best practices for reducing tobacco prevalence. The event included evidence-based clinical and community strategies. Thirty-one CCO staff and partners attended representing 12 CCOs. Ninety-five percent of evaluation respondents said the session was valuable in supporting their work, and 100% planned to take action as a result.
- The center also collaborated with OHA’s PHD to offer two in-person trainings that drew 71 participants. The trainings supported implementation of Oregon’s Freedom from Tobacco policy that requires residential mental health and addictions providers licensed by OHA to maintain residential properties free from tobacco use.



CCO staff learn about mass reach communication strategies for tobacco cessation.

Controlling high blood pressure

The center capitalized on lessons learned from the Centers for Disease Control and Prevention’s recent Million Hearts® campaign and developed technical assistance to help CCOs meet the controlling high blood pressure incentive metric. In 2018, the center:

- Created a catalog of materials from the Million Hearts® website.
- Developed a comparison of chronic disease management programs.
- Contracted with a local Million Hearts® champion to develop two webinars on best practices for increasing the rates of controlled blood pressure. One webinar for clinicians included continuing medical education credits. The second webinar for CCOs and other health systems addressed system-level support. More than 50 participants from nine CCOs, other health systems and clinics joined one or both of the webinars, with 94% of evaluation respondents rating them valuable and all planning to take action as a result.
- Provided follow-up TA calls to three CCOs that participated in the webinar.

Developmental screening and follow-up

In partnership with a local subject-matter expert and contractor, the center hosted five webinars with accompanying tip sheets and guides. Three webinars for CCOs

focused on improving the referral and follow-up process for children with potential delays. Two webinars for primary care practices focused on follow-up to developmental screening and referring to and coordinating with Early Intervention. One webinar was approved for continuing medical education credits, and 54 people attended live or watched the recording.

Effective contraceptive use

After individual consultation calls about increasing effective contraceptive use (ECU), 12 CCOs requested follow-up TA. Projects included provider trainings, train-the-trainer curriculums, patient education materials and workflows.

The center hosted a six-webinar series focused on youth sexual health, as the CCO incentive metric now includes 15–17-year-olds. Presenters included public health and CCO staff. Attendees included 147 people from 14 CCO regions.

The center worked with a consultant to develop a CCO-customizable metrics brief to support clinic staff in understanding and documenting the ECU measure. The center will pilot test and disseminate the metrics brief in early 2019.

Emergency department use among members with mental illness

The center offered peer-learning consultation calls with a contractor that focused on identifying quality improvement opportunities for innovative care coordination and transitions of care. Eight CCOs participated and four CCOs took advantage of the 20-hours of follow-up TA to focus on improving care coordination across their local systems. Projects included a community convening to inform a collaborative approach; building staff capacity to improve systems of care and data-informed decision-making; and standardizing use of care plans using PreManage (a web-based tool that allows real-time hospital admission and discharge information to be sent to health plans, CCOs and provider groups).

Cross-cutting supports

CCOs Advancing Health Equity Workshop

The center hosted a one-day event for 74 CCO staff that focused on peer-to-peer sharing of best practices in advancing health equity. Sessions included strategic planning, using a national framework to engage staff and board members on health equity, using data to advance health equity, language access for members, utilizing community health workers, and cultural competency training for CCO staff. Every

CCO participated, and 91% of evaluation respondents said the event was valuable to their work.

Innovation Café: Strategies for Improving Children’s Health

The center hosted a one-day Innovation Café that focused on strategies for improving children’s health. More than 200 staff from CCOs and cross-sector partners attended. Plenaries focused on research on adverse childhood experiences in families and a panel on youth resiliency. Thirty-one projects were presented in short “world café-style” rounds to encourage peer-to-peer sharing. Topic areas included developmental screening, childhood immunization, oral health integration, prenatal and postpartum care, and assessments for children in DHS custody. Ninety-nine percent of evaluation respondents said the event was valuable in supporting their work.

“It was great to hear successes from similar organizations and how they’ve engaged community partners to transform care and achieve outcomes.”

- Innovation Café participant

CCO learning collaborative

The center leads a statewide CCO learning collaborative for CCO medical directors and quality managers. In 2018, the three sessions focused on oral health integration in CCOs, improving health through CCO and public health partnerships, and child health complexity data. More than 90% of evaluation respondents rated sessions as valuable for supporting their work.

Transformation and Quality Strategy technical assistance

In 2018, the Transformation and Quality Strategy (TQS) replaced the CCO Transformation Plan and Quality Assessment and Performance Improvement deliverables. This streamlined approach aims to move health transformation by providing CCOs an opportunity to internally align their transformation and quality work. CCOs submitted their first TQS in March 2018 and their first progress reports in September. The center managed the review process.

Technical assistance included webinars to walk through the progress report template and share global feedback from the first annual TQS submissions.

A CCO work group made recommendations on deliverables and assessment methods that informed OHA’s decisions for 2019. The final template and updated guidance documents are available here: <https://www.oregon.gov/oha/HPA/dsi-tc/Pages/Transformation-Quality-Strategy-Tech-Assist.aspx>

Council of Clinical Innovators

The Transformation Center convened the Council of Clinical Innovators for two day-long learning events. Topics included mentorship, dissemination, and addressing social determinants of health in the health care setting.

“The gathering of all three cohorts provided a great cross-section of challenges and successes.”

- Clinical Innovator



The Council of Clinical Innovators meets for learning and sharing across disciplines and regions.

The council includes alumni and faculty of the Clinical Innovation Fellows program.

All evaluation respondents said the events were valuable for supporting their work.

Health-related services

CCOs receive a global payment for each member, which provides CCOs the flexibility to offer health-related services (HRS) to improve the health of Oregon’s Medicaid population. To promote and clarify the use of HRS, the center published an FAQ covering topics such as the criteria, intersection with the prioritized list, exclusions, implications for rate development and reporting requirements: <https://www.oregon.gov/oha/HPA/dsi-tc/Documents/Health-Related-Services-FAQ.pdf>

Early childhood health coordination

In partnership with the Public Health Division, the center supports coordination and integration across Oregon’s health and early learning systems. This includes regular communication with the Oregon Department of Education’s Early Learning Division and Oregon’s Early Learning Hubs, and direct supports to communities. Work this year included helping finalize “Raise Up Oregon”, the Early Learning System strategic plan (<https://oregonearlylearning.com/raise-up-oregon>); helping complete Phase I of the Oregon Infant Toddler State Self-Assessment; and coordinating partners around a potential Oregon oversample for the 2020 National Survey of Children’s Health.

Report analysis

The center coordinates the review process and develops responses for certain reports CCOs submit to OHA. For 2018 this included the closeout reports for the

2015–2017 CCO Transformation Plans, the CHP reports, the TQS, and the TQS progress reports.

Innovations database

The center continued improvements to its innovations database, and in 2018 used it to produce a dozen reports – spanning maternal health to end-of-life care – to inform OHA policy.

Conclusion

The Transformation Center plays a key role in building the capacity of Oregon’s health system to innovate and improve, with the goal of achieving better health, better care, and lower costs for all Oregonians. Moving forward, the center will continue to offer multi-partner learning opportunities and one-on-one supports while leading policy development in statewide health system transformation priority areas.



HEALTH POLICY AND ANALYTICS DIVISION

Delivery Systems Improvement

Transformation Center

Phone: 971-673-3363

Fax: 971-673-3040

Email: Transformation.Center@dhsosha.state.or.us

You can get this document in other languages, large print, braille or a format you prefer. Contact the Transformation Center at 971-673-3363 or email Transformation.Center@dhsosha.state.or.us. We accept all relay calls or you can dial 711.