**SB231 Primary Care Payment Reform Collaborative**

**Meeting Minutes**

**April 15, 2016, 9:00 a.m. – 12:00 p.m.**

**Portland State Office Building, Portland, OR**

**Present**: Ali Hassoun (Public Employee’s Benefit Board), Alisha Moreland-Capuia (Volunteers of America/OHSU), Angela Mitchell (Intel), Anne Alftine (Jackson Care Connect), Barbara Martin (Central City Concern), Ben Messner (Western Oregon Advanced Health), Bill Guest (Willamette Valley Community Health), Bill Murray (FamilyCare, Inc.), Brett Gomsrud (Oregon Freeze Dry), Briana Ledesma (Regence), Carolyn Anderson (Tuality Medical Group), Celia Higueras (Oregon Community Health Worker Association), Charles Ashou (Oregon Primary Care Association), Colleen Reuland (Oregon Pediatric Improvement Partnership), Colleen Smith (Willamette Valley Treatment), Dale Jarvis (Dale Jarvis & Associates, LLC), Dawn Creach (Children’s Health Alliance), Divya Sharma (Central Oregon IPA), Doug Lincoln (OHSU), Evan Saulino (Oregon Health Authority), Gayle Woods (Oregon Department of Consumer and Business Services), Glenn Rodriguez (Oregon Association of Family Physicians), Helen Kurre (Providence Health & Services), James Schroeder (Kaiser Medicaid), Jeff Winkley (Oregon Association of Hospitals and Health Systems), Jesse Anderson (Oregon Health Authority), Jim Rickards (Oregon Health Authority), John Wagner (Aetna), Juli Koprowski (The OMA), Julia Ceballos (Moda Health/Eastern Oregon CCO), Larisa Purdy (Jeld-Wen), Liz Powers (Winding Waters Clinic), Lynnea Lindsey-Pengelly (Trillium Community Health Plan), Maggie Bennington-Davis (Health Share of Oregon), Maggie Rollins (PrimaryHealth of Josephine Co.), Megan Viehmann (OHSU), Mindy Stadtlander (Care Oregon/Columbia Pacific CCO), Nancy MacMorris-Adix (Oregon Educator’s Benefit Board), Rebecca Eicchorn (Yamhill CCO Community Advisory Council), Robin Henderson (Providence Medical Group), Sara Ohrtman (PacificSource Health Plans), Seamus McCarthy (Yamhill CCO), Tara Bergeron (Tuality Health Alliance), Victor Musial (Willamette Valley Community Health Community Advisory Council), Wendy Hill Petras (Centers for Medicare and Medicaid Services) and Will Brake (AllCare CCO, Inc.).

**Absent**: Dean Andretta (Mid-Valley IPA), Lisa Hynes (Health Net Health Plan of Oregon, Inc.), and Scott Fields (OHSU Family Medicine).

**Oregon Health Authority Staff**: Amy Harris, Chris Carrera, Chris DeMars, Diana Bianco (consultant), Emilee Coulter-Thompson, Leslie Clement, Ron Stock (consultant), Summer Boslaugh and Tom Cogswell.

**Welcome & Introductions**

* Chris DeMars & Evan Saulino welcomed participants to the collaborative.
* Diana Bianco introduced herself as the collaborative facilitator and provided an overview of the meeting agenda. She then asked participants to introduce themselves and briefly share why they are participating in the collaborative. Common themes included:
* Having a strong passion and interest in this topic.
* Believing that primary care is foundational.
* Interest in seeing health care transformation continue.
* Ensuring that the youth voice is represented in this process.
* Being a part of a collaborative process.
* Giving voice to Oregon Health Plan (OHP) consumers.
* Opportunities to align payment efforts.
* Sharing best practices and experiences.
* Ensuring that behavioral health and addiction services are core.

**Context & Goals for the Collaborative**

* Leslie Clement provided context for how the collaborative aligns with the goals of OHA and the Oregon Health Policy Board (OHPB). She commented that primary care is seen as a foundational element by both entities to being successful. They see this collaborative as an opportunity to build on recent health care transformation successes that will result in a sustainable model.
* Jim Rickards echoed Leslie’s comments by stating that OHA is dependent on the success of primary care for its survival.

**Level Setting**

* Diana Bianco provided clarification to the group about what was called out for the collaborative by the SB231 legislation. SB231 requires OHA to convene a primary care payment reform collaborative. The collaborative will help OHA develop recommendations for assisting primary care providers and directing optimal resources to primary care.
* Leslie Clement commented that OHA would like common agreement on a model that could be adopted across the system. Further, she mentioned that the OHPB wants actionable material from this collaborative and not just another report.
* Next, Diana Bianco provided a brief summary of interviews she conducted with collaborative participants prior to the first meeting. Highlights included:
* There was agreement on the value of primary care, but not agreement on how (and how much) to pay for it.
* There are many organizations already doing innovative work in primary care reimbursement.
* The majority felt like investing in primary care is the right way to go, and that elements of the PCPCH model is the way to go.
* Participants wanted more than a PCPCH 101 from this collaborative; they wanted to opportunities to share and “lift up learnings”.
* Many felt that to be effective, people needed to put aside organizational interests to some extent.
* There was some concern that providers just want to “check the box”, but to not change their practices.
* There was a desire expressed to get specific about what works and what doesn’t.
* Many wanted to move towards shared or standardized metrics across payers.
* Some expressed potential challenges with small rural and independent practices.
* One participant asked if different definitions were given in the interviews for medical homes. Diana Bianco clarified that many people look to OHA and to the Patient Centered Primary Care Home (PCPCH) Program for this information.

**Milbank Memorial Fund Presentation: Chris Koller**

* Chris Koller, President of the Milbank Memorial Fund, presented about primary care transformation and the fund’s Multi-State Collaborative.
* Please visit the [Transformation Center website](http://www.oregon.gov/oha/Transformation-Center/SB231MeetingDocs/Chris%20Koller%20Presentation%20Slides.pdf) to view slides from Chris’s presentation.

**SB231 Primary Care Spend Report Review of Findings**

* Evan Saulino provided a summary of the February 2016 report, [“Primary Care Spending in Oregon.”](http://www.oregon.gov/oha/Transformation-Center/SB231MeetingDocs/Report%20-%20Primary%20Care%20Spending%20in%20Oregon.pdf)
* Evan commented too often with these types of reports, data is used a report card rather than as a tool for improvement.
* The data in the report covers prominent Oregon carriers; those with over $200M in annual premiums. This covers a significant portion of Oregon’s population. Encapsulates a significant chunk of Oregon’s population. It also includes the Oregon Educators’ Benefit Board (OEBB), Public Employees’ Benefit Board (PEBB) and Medicaid Advantage. In the report, payers and CCOs are numbered but not named.
* Key findings:

-CCOs and commercial, Medicare Advantage, and PEBB and OEBB plans offered by prominent carriers spent $1.0 billon primary care in 2014.

-On average, CCOs allocated a greater percentage of total medical spending to primary care than any other type of health care payer.

-The percentage of total medical spending allocated to primary care varied substantially among payers.

-On average, non-claims-based payments comprised a greater percentage of primary care spending by CCOs than by other payer types.

* One participant asked if OHA plans to follow-up with carriers even though the data is “blinded.” Chris DeMars replied that she would follow-up with OHA leadership about this request.

**Small Group Discussions**

* Participants worked through a [small group worksheet](http://www.oregon.gov/oha/Transformation-Center/SB231MeetingDocs/Small%20Group%20Note%20Template.pdf) and discussed the following questions:
1. Based on what you heard today and what you know from your work, what are the major issues for discussion – both in terms of learning and possible areas for alignment? What have we learned from past efforts that haven’t realized their potential – what were the barriers and how do we address them?
2. Which of these issues are most important for the Collaborative to discuss/address, especially to ensure sustainability of primary care infrastructure and innovation?
* Each group shared brief takeaways from their discussions, which can be found in this [small group report summary.](https://www.oregon.gov/oha/Transformation-Center/Documents/4.15.16%20Small%20Group%20Report%20Out%20Summary.docx)
* After groups reported out, Diana Bianco commented that she would meet with table facilitators to discuss common themes to determine next steps for future meetings.
* At the end of the meeting, Glenn Rodriguez of the Oregon Association of Family Physicians called on the group (specifically carriers) to commit to joining the newly announced [Comprehensive Primary Care Plus (CPC+)](https://innovation.cms.gov/initiatives/comprehensive-primary-care-plus) initiative. He urged the group to act quickly, stating that some smaller primary care practices were in danger of closing their doors in the near future if changes were not made. Diana Bianco asked all participants if there was interest in pursuing this conversation, and a majority of attendees raised their hands. She closed by stating that collaborative organizers will plan to email the group about next steps for this initiative shortly after the meeting.

**Upcoming Meetings**

* Diana Bianco shared future collaborative meeting dates:

May 13, 2016, 1:00-4:00 p.m.

June 10, 2016, 9:00 a.m.-12:00 p.m.

July 12, 2016, 1:00-4:00 p.m.

August 23, 2016, 1:00-4:00 p.m.

September 13, 2016, 1:00-4:00 p.m.

* All meetings will take place in Portland. Meeting details (including specific locations) will be sent out shortly via calendar appointments.
* All meeting information is posted on the [SB231 Collaborative page](http://www.oregon.gov/oha/Transformation-Center/Pages/SB231-Primary-Care-Payment-Reform-Collaborative.aspx) on the Transformation Center’s website.