FOR REFERENCE ONLY • DO NOT EDIT

Part 1: High-Level Description of Possible Significant Change

The table below provides high-level information about the possible significant change, as submitted.

Tracking #	2027-007
Q6. Provide a short name for possible change	Patient Health Navigators
Q1. Which CCO Contract(s) will be impacted?	(a) All 3 contracts
Q2. High-level description of possible change	CCOs should demonstrate they are achieving contractual requirements pertaining to integration and sustainability of the Patient Health Navigator (PHN) workforce
Q3. Which prioritized restatement category applies?	(e) Other
Explain how change fits into "Other" category	This possible change would clarify and support CCO compliance with existing contract requirements.
Q4. Could entire change be deferred to later contract year?	Yes
Consequence(s) if not included in 2027 contract	CCOs may continue to experience major challenges with integrating PHNs into service delivery and members will not benefit from the support of PHNs
Q5. Could change be reduced to smaller components so it's phased in over multiple contract years?	No
Which component(s) could be in later contract year(s)?	
Contact One: Name	Lily Sintim
Contact One: Title	THW Program Analyst
Contact One: Email	Lily.Sintim@oha.oregon.gov
Contact One: OHA Division/Program/Unit	Equity and Inclusion, Equity & Policy Section - THW Program
Contact Two: Name	Nathan Roberts
Contact Two: Title	FFS Operations Manager
Contact Two: Email	nathan.w.roberts@oha.oregon.gov
Contact Two: OHA Division/Program/Unit	Medicaid - FFS
Q8. Executive Sponsor Name	Abdiasis Mohamed
Executive Sponsor Title	THW Program Manager
Executive Sponsor Email	ABDIASIS.MOHAMED@oha.oregon.gov
Executive Sponsor OHA Division/Program/Unit	Equity and Inclusion, Equity & Policy Section - THW Program

Part 2: Information for Engagement

This should be completed by the responsible OHA unit. **Be specific yet clear and concise in your responses; use bullet points.**

Tracking #	2027-007
Short name	Patient Health Navigators

1. What is the specific issue that will be addressed by this change?

This should explain the current state and why it's an issue to be addressed.

The Patient Health Navigator (PHN) is already defined in the CCO contracts as a type of THW. All the existing requirements in the THW section already apply to PHNs, including the requirements to integrate THWs into service delivery, to increase member utilization of THWs, and to have sustainable payment strategies for THWs.

CCOs need directions/requirements in identifying appropriate payment strategies for PHNs. They have requested OHA's assistance to retain the PHN workforce by identifying payment arrangements to meet contractual requirements. This is key to CCOs being able to fulfill the THW contract requirements as applied to PHNs.

CCO contracts and THW deliverables may require revision to support and enhance integration of PHNs in service delivery network and support members' care coordination.

OHA's guidance for CCOs suggests:

- Fee for service and claims-based payment methodologies are not viable for PHNs.
- APM or VBP or facility cost or salary are identified as best payment mechanism. More specifically:
  - CCO-employed PHNs: salaried payment
  - Large health systems (i.e., hospitals): APM, VBP, facility cost/payment

Each CCO should use its best judgement to identify the payment methodology best suited for PHNs.

2. What is the preliminary suggestion for how to address the issue?

This should align with the high-level description submitted for the change. Refer to Part 1: High-Level Description of Possible Significant Change. The final proposed change may differ from the preliminary suggestion as a result of OHA and CCO engagement.

Require CCOs to demonstrate that they are satisfying the existing contract requirement for sustainable payment strategy(ies) for PHNs.

3. What knowledge and/or skills should CCOs consider when deciding which staff to work with OHA on this issue?

Staff should possess knowledge and expertise in:

- CCO staffing
- VBP/APM/Facility payments and other payment mechanisms
- Care coordination/management
- Provider relations

4. Is there an existing meeting where OHA and CCOs can work – or are already working – on this issue? If so, identify the meeting and its schedule.

This work may require regular OHA-CCO engagement over a few weeks, possibly up to a couple months. If there is not a suitable existing forum, then OHA will hold a dedicated work session/s specifically for this purpose.

None