

The Oregon Health Plan and CCO 2.0

Getting Ready for 2020

The Oregon Health Authority (OHA) is raising the bar for the 15 coordinated care organizations that will serve most of Oregon's 1 million Oregon Health Plan (OHP) members starting January 1, 2020.

New contracts will require CCOs to:

- Improve behavioral health,
- Address barriers outside the doctor's office that lead to poor health,
- Pay for better health outcomes, and
- Hold costs to a sustainable rate of growth.

Eleven of the organizations have been notified of OHA's intent to award five-year contracts, and four organizations have been notified of our intent to award one-year contracts. OHA will continue to review these organizations for their readiness to deliver the services required under the CCO contracts. OHA expects to sign CCO contracts with successful awardees at the end of September.

Significant Changes

New CCOs added:

- Trillium will start service in Multnomah, Clackamas and Washington Counties.
- PacificSource Community Solutions will add CCOs in Lane and Marion and Polk counties

CCO Closures:

- PrimaryHealth will exit the market (Josephine, Jackson, and parts of Douglas counties).
- Willamette Valley Community Health will exit the market due to a planned closure (Marion, Polk, and parts of Linn, Benton, Yamhill, and Clackamas counties).

Member Choice and Communication

OHA's priority is to ensure members do not experience any disruptions in care. OHA also values member choice. Members in areas with changes to their CCO choices will have two opportunities to make decisions about their CCOs; **October 16 – November 17 and January 1 – March 31, 2020.**

To support members needing to make CCO choices for 2020, members will:

- receive three mail communications from OHP (September, October, December)
- receive a printed CCO comparison guide and have access to the same information online
- have access to a call center with specially trained staff
- be provided with a suggested "matched plan" based on the behavioral health and primary care providers they have seen over the past 15 months
- be able to make choices online, over the phone, or with the help of a community partner

Members will be encouraged to consider, compare and choose the plan that works best for them and their family. Each communication will feature a “Pick Your Plan” graphic so members can easily identify these important messages.

In areas with only one CCO, members do not need to take any action.

Pick Your Plan

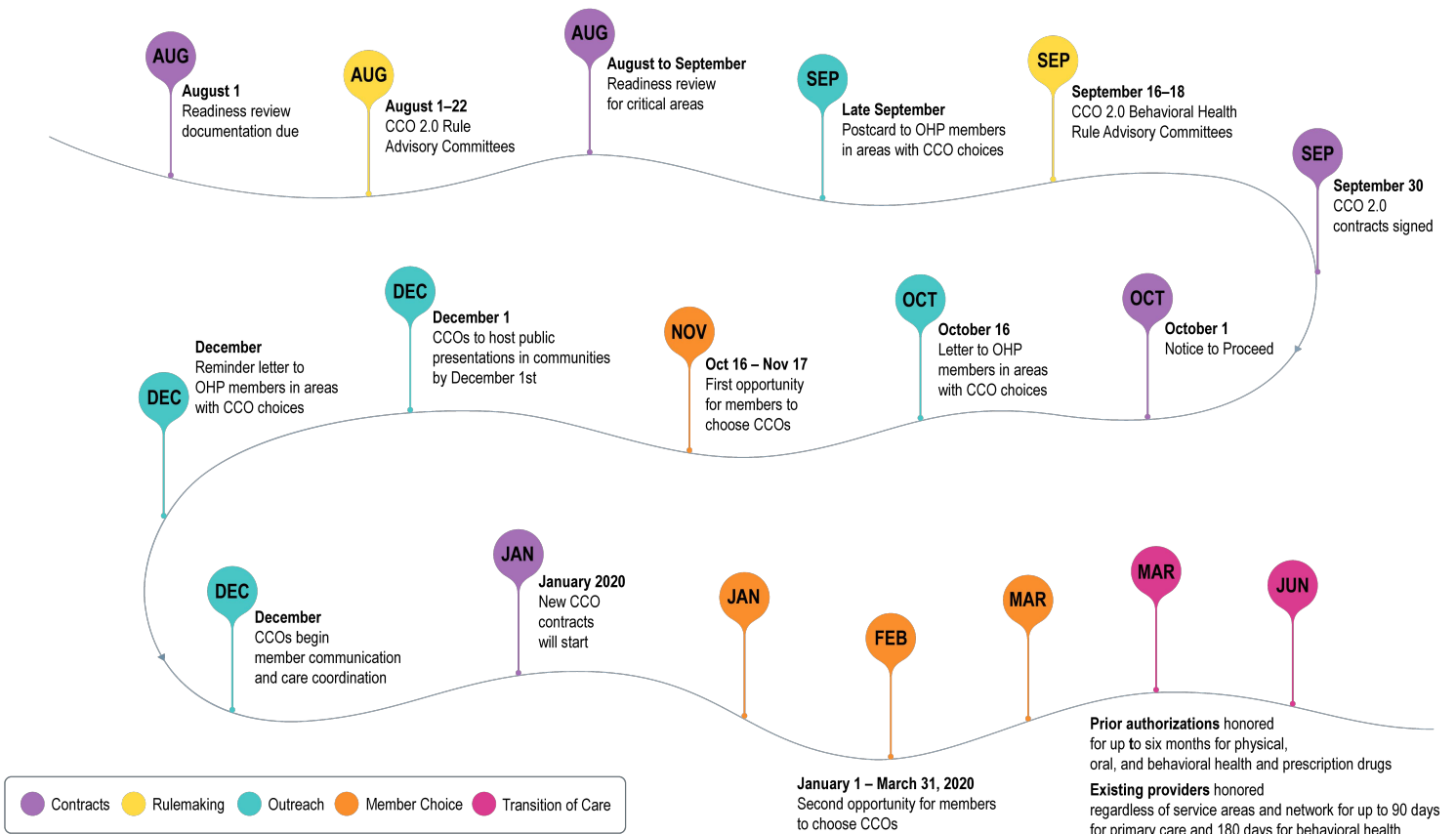


Transition of Care

CCOs will work together to ensure continuity of care for members changing their CCO for 2020.

- Prior authorizations will be honored for up to six months for physical, oral, and behavioral health and prescription drugs
- Members will be able to see existing providers regardless of service areas and network for up to 90 days for primary care and 180 days for behavioral health

Timeline



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