

CCO 2.0 Public Forum
Woodburn – April 28, 2018
Notes from Gallery Walk

Behavioral Health

- **What can CCOs do to help those on OHP/Medicaid access mental health and addiction services more easily?**
 - **What could be done to improve the quality of the mental health and addiction services for individuals in your community?**
 - **Is there anything missing from the addiction services and mental health services available through CCOs?**
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- Peer support services – improve quality
 - Access
 - Respite
 - More interaction
 - Communication with homeless population and getting information to them where they are
 - Funding opportunities
 - Mental health and substance use treatment isn't available in all areas
 - Connect with schools – in the schools and communication in general
 - How a provider's experience could be better – paperwork, etc.
 - need their own advocates
 - Housing and transportation challenges
 - Connections with Value-Based Payments
 - Need for integration, mental health and substance use integration
 - how to pay for that higher value care
 - Connections with Cost Containment
 - peer support
 - housing, transportation – ACCESS
 - Connections with SDOH
 - Peer support
 - THW (CHWs) who can help navigate the system
 - Stable housing = better mental health
 - inpatient treatment should help with mental health and addiction at the same time
 - Equity issue – make sure there's adequate provision for language access
 - BH/Addictions also includes gambling addiction, is often overlooked
 - also people who have addictions with other areas (sex, pornography, etc.) – we need to make sure people have those needs met
 - Access of care – from a provider standpoint, it's difficult to get authorizations for in/out of network. Cumbersome process for providers, slows down access
 - Challenges with amount of time that providers spend with patients, and how often people get to see their providers

- Should move further away from the medical model – doesn't solve everything
- Mental health/addictions should also address trauma, and trauma-informed care

Paying for Value

- **In which areas do you think CCOs should most be encouraged to improve services for the members of your community?**
 - MH/BH resources and care
 - Interation
 - Relationship between CCO and the members
 - welcome packets should have easy to understand language
 - maybe an onboarding screening, help access services quickly
 - Improvement for movement to different CCOs
 - Centralized care coordinators
 - especially for pharmacy
 - Encourage providers to prescribe lower cost drugs (especially when coming on/off CCOs)
 - Choice of CCOs is important
 - Finances of CCOs – should have potlucks, dinners, etc.
 - Incentives – should include clients input on staff performce reviews
 - Expand incentive program for disease testing
 - Incentives should look at overall wellness
 - Pay for value – create a system that supports a provider's overall value of what they offer
 - Dental care: challenge to access
 - more money for respite care and peers
 - Resources should be allocated to birth certificates, IDs, etc (other important areas)
 - Jobs, transportations, etc. help improve mental health too
 - Metrics
 - trauma-informed care: opportunity for better metrics/incentives
 - Part of recovery from trauma, MH, drug cycles/addiction is the ability to be given a future

Social Determinants of Health and Equity

- **How can or should CCOs invest in the social determinants of health?**
 - Peer support specialists/CHWs – important to engage those types of health care workers early on, they are a critical part of the team
 - Access to attorneys and ombudspeople and advocates
 - importance of working directly with the community and community partners
 - LTSS
 - community-based organizations
 - non-traditional partners (grocery stores and barbers)

- Challenges:
 - housing
 - transportation
 - employment
 - parenting classes
- **How can CCOs help provide everybody an opportunity to be as healthy as they can be?**
 - childcare at appointments
 - Need for extended hours
 - Is there enough information in the community about how to access OHP/care
 - Treatment during care – possibility for bias
 - Preventive care (outside of SDOH)
 - vision
 - alternative home care

Cost Containment

- **How can Oregon encourage CCOs to provide services that have the highest value for OHP members? What strategies do you think would best address the cost of health care for Oregonians?**
- **With limited resources it is often important to prioritize. What services would you like to see more of? What would you like to see less of?**
- **Is it more important to be able to choose between CCOs or between health care providers?**

- Consistent with other topics and feedback
- Services to see more of:
 - PSS
 - housing
 - transportation
- Better connecting services between MH and substance abuse issues and treatment – can improve health and reduce costs
- dieticians, treatment for eating disorders, trauma, traumatic injuries
- CCOs vs. providers
 - Most comments – providers OR both
 - Could be choice around both
- Quality improvement
 - make it easier for people to actually visit a providers (TRANSPORTATION)
 - PSS!
- Member engagement
 - connections of CCOs and members, more surveys and ways to get feedback directly from members, importance of housing and transportation
- Overall:
 - CCO profit motives – don't have for-profit CCOs

- Better connecting state hospital to broader health care system so resources are used more efficiently and people are helped
- financial structure of CCOs, transparency and risk pools
- More respite housing
- Sobering stations
- Track investments in housing/homelessness prevention – could cut costs and improve health
- more prevention in early treatment
- PSS stationed in ERs/Emergency departments
- Make sure members know HOW to use their insurance, understand what their options are and how to access services at all times
- Eugene – CAHOOTS: peer support going out with police
 - Project Response
- Try to reduce stays in emergency rooms

OHP Member feedback

- **What are three things that OHP could do that would help you stay healthier?**
- **Have you ever needed a health service but couldn't get it? What happened?**
- **What do you wish your health plan could do for you that it doesn't already do?**
- Coordination – who's doing what, where, how, etc. – what do patients need to do? Need to make sure care is actually coordinated
- How to stay healthier?
 - access to exercise, gyms
 - SDOH
 - housing
 - daycare
- Knowing how to actually USE the Oregon health plan – is this the same as Medicaid, etc.?
- PSS
- Barriers
 - Navigation of OHP is a challenge
 - communication about benefits
- Important to know how to report potential HIPAA violations
- Need to have a complaint line for those who call in and don't have respectful experiences
- Preventive care is sometimes more important – need access
- Make forums more accessible to OHP members, including better language and easier to understand
- Classes for how to stay healthier
- Education!
- More access to vision
- More alignment for requirements for CCOs (credentialing, prior auths, statewide campaigns)

