

Implementing the Patient Centered Primary Care Home Model of Care

Initial Overview of Oregon Health Authority's Next Steps

Office for Oregon Health Policy and Research (OHPR)

Why Primary Care Homes?

Goals of the Oregon Health Fund Board & HB 2009

- Improve individual and population health outcomes
- Reduce inappropriate utilization
- Reduce health system costs costs
- Strengthen primary care
- Encourage prevention and chronic disease management over acute, episodic care
- Stimulate delivery system change

“ Right care at the right time and in the right place”

Steps Towards Implementing Primary Care Homes

1. Develop PCH Standards (completed)
2. Partner with the Health Leadership Task Force on a multi-payer pilot (Summer 2010)
3. Expand to more sites or develop additional pilots (Fall 2010-2011)
4. Implement broader implementation and payment reform (2012?)

Health Leadership Task Force “High Value” Medical Home Pilot

- Building on successful pilot at Boeing
- Focus on top 10% of adult patients by risk
- Care model focused on Triple AIM - strong concordance with State PCPCH Standards
- Evaluation components including: utilization, quality and patient experience
 - Goal of short-term Return on Investment in 1-2 years
- Payment methodology: PMPM + FFS + p4p

Health Leadership Task Force “High Value” Medical Home Pilot

HLTF Care Model focused on:

- Access
- Intensive Care Management
- Coordination (transitions and ED follow up)
- Staffing requirements (RN Care Manager)
- Training and Culture

Health Leadership Task Force “High Value” Medical Home Pilot

Business Case Illustration:

- Population: top 10% of high cost individuals
- Expected costs based on MEPS 2007 data--\$22K/yr
- If 4,000 enrollees in a pilot:
 - Total baseline costs \$88M
 - New cost to support the model about \$2M
 - Break even savings needed to cover total new cost: 2.2%
- If achieve 10-20% cost savings (as Boeing did):
 - ROI to Plans 180% to 400%

Health Leadership Task Force “High Value” Medical Home Pilot

Steps to Include OHA lives in the HLTF pilot:

- Plans identifying PEBB, OEBC and OMIP lives in candidate clinics
- DMAP identifying OHP lives in candidate clinics
- Anticipate selection of 8-10 clinics for initial pilot in late April/May
- Working to identify resources to pay similarly to private plans for OHP lives
- Goal of maximizing the number of OHA lives in the selected pilot sites

Steps Towards Implementing Primary Care Homes

1. Develop PCH Standards (completed)
2. Partner with the Health Leadership Task Force on a multi-payer pilot (Summer 2010)
3. **Expand to more sites or develop additional pilots**
 - **Clinical sites not participating in phase 1 of the HLTF pilot**
 - **Children and healthier adults**
 - **Clinics serving primarily OHP and uninsured populations**
 - **Clinical sites integrating mental and physical health**

**** Funding opportunity in health reform bill for 90/10 Federal match for pilots including Medicaid recipients with >1 chronic condition starting in 2011**

For More Information

Full Standards report will be available at:

<http://www.oregon.gov/OHPPR/HEALTHREFORM/PCPCH/PCPCHStandardsAdvisoryCommittee.shtml>

Overview of HLTF Pilot available at:

<http://www.oregon.gov/OHA/OHPB/committees/pub-ht-bn-prch-mtgs.shtml>

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