

April 4, 2017

Senate Committee on Health Care Senator Laurie Monnes Anderson, Chair

Chair Monnes Anderson, Vice-Chair Kruse, members of the Committee,

Thank you for the opportunity to testify today in strong support of Senate Bill 234.

This legislation would establish certainty and predictability for CCOs as our state's health care transformation continues. As long as they fulfill their obligations under the terms of their contract with the state, this legislation will allow each CCO to continue to serve their communities in the next five-year contract.

CCOs have been very successful over the last 4 years in integrating care, developing new ways to serve their community's needs and building partnerships with community organizations that serve our most vulnerable citizens. This has required significant investment on the part of the CCO's in developing new expertise, provider networks and programs to serve members under the CCO model.

As a CCO, FamilyCare launched its Provider/Patient Oriented Resource Teams or PPORTS, an innovation we pioneered to fully integrate our members' customer service experience. This means that our members and our providers receive personalized service with just one phone call to their PPORT team for any question or concern they have. This level of integration required considerable investment in technology and staff.

With the flexibility afforded to CCOs under our state's global budget statutes, FamilyCare is launching a program to expand access to doulas for pregnant women in minority communities, an intensive care and social support program for foster children, and a health literacy and access initiative for members 15 to 25 years of age. These are just three examples of the many initiatives throughout Oregon that CCOs are making every day in their communities. SB 234 will ensure that these programs continue to improve the health of our communities.

Because we recognize that health care does not just begin and end in a doctor's office, CCOs have been financially committed to their communities since our inception. FamilyCare has invested over \$12.5 million through grants, sponsorships, and other contributions, just since 2015. Many of these investments go to support behavior health services and to address community determinants of health in the Portland metro area.

According to the Oregon Health Authority, CCOs have led the way in reducing emergency department utilization by nearly 50 percent and hospital readmissions by one-third. With the CCO model in place, we have saved \$1.4 billion to Federal and State Medicaid budgets since 2012 and helped increase the number of insured to nearly 95 percent.

It is important to note that all of our accomplishments and investments in health care innovation over the last five years were achieved at below Oregon's 3.4 percent inflation cap for Medicaid.

SB 234 does not allow CCOs to rest on their past accomplishments to continue. It requires them to maintain and improve their initiatives and achievement of quality metrics going forward.

Oregon has built a solid foundation in caring for our Medicaid population. We should build on that foundation. We urge the committee to support this legislation to ensure continuity of care for our members and the preservation of the critical investments made thus far.

Thank you for the time to provide this testimony to you today.

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