
SB 231 Primary Care Payment Reform Collaborative Recommendations & Feedback on SB934

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Agenda

- Primary care support efforts in Oregon
- SB 231 Primary Care Spending Report & Collaborative
- SB231 Workgroup feedback on SB 934

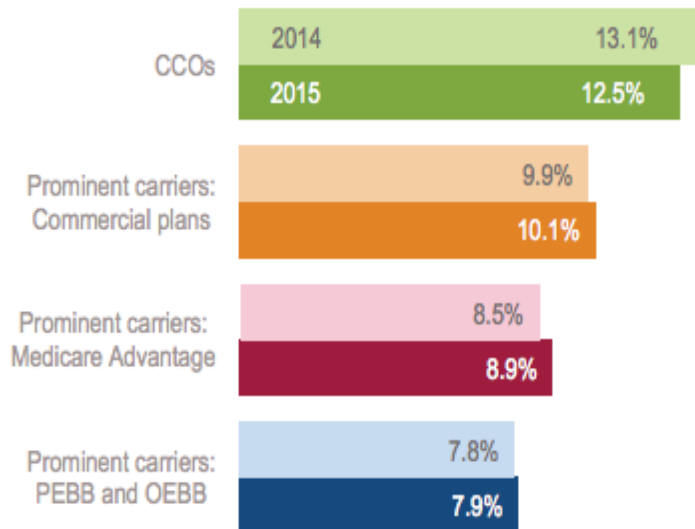
Primary Care Support Efforts in Oregon

- **OHA Patient-Centered Primary Care Home (PCPCH) program**
 - 647 Clinics Recognized (December 2016)
 - Portland State University Report
 - ~\$240M savings first three years
 - 4.2% reduction expenditures per person
 - 13:1 ROI
 - Existing payment models do not incentivize clinics to align with PCPCH aims
- **Federal Centers for Medicare and Medicaid Services (CMS) support**
 - Comprehensive Primary Care Initiative (CPCI)
 - 65 Oregon clinics saved \$12.8 million in Medicare costs
 - Comprehensive Primary Care Plus (CPC+)
 - Current expansion of CPCI

SB 231 Primary Care Spending Report

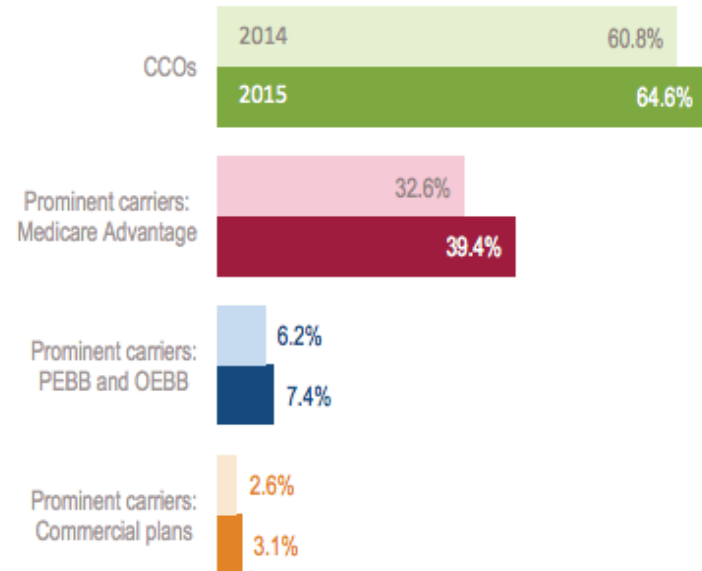
PERCENTAGE OF TOTAL MEDICAL SPENDING ALLOCATED TO PRIMARY CARE:

In 2015, **CCOs** allocated an average of nearly 13 percent of total medical spending to primary care, which is slightly less than last year. **Commercial, Medicare Advantage, and PEBB and OEGB** plans allocated an average of 10 percent or less of total medical spending to primary care, a slight increase from last year.



NON-CLAIMS-BASED SPENDING AS A PERCENTAGE OF TOTAL PRIMARY CARE SPENDING:

In 2015, nearly 65 percent of primary care spending by **CCOs** was non-claims-based, up from 61 percent last year. More than 39 percent of spending by **Medicare Advantage** plans was non-claims-based.



SB 231 Payment Reform Collaborative

“Direct greater health care resources and investments toward supporting and facilitating health care innovation and care improvement in primary care”

- Monthly meetings: April to November 2016
- Supported Oregon Comprehensive Primary Care Plus (CPC+) participation
- Developed payment reform recommendations
- Multi-stakeholder collaborative, membership defined in legislation

SB231 Collaborative Recommendations

- Collaborative developed recommendations to support sustainable primary care payment reform in six areas:
 - Measurement
 - Data Aggregation
 - Technical Assistance
 - Primary Care Behavioral Health Integration
 - Collaborative Governance
 - Payment Model
- Oregon Health Policy Board endorsed recommendations 12/16

SB231 Collaborative Recommendations

Measurement

- Primary care should be measured using a limited number of standardized quality, utilization, and patient-experience metrics that align with existing measurement efforts & align with SB440

Data Aggregation

- Single source of aggregated data based on agreed-upon metrics
- Aggregation should be sustainable and equitably financed through a shared utility model by all participants.

Technical Assistance

- Technical assistance should be delivered to practices and payers through a centralized structure via a sustainable, shared-funding model.

SB231 Collaborative Recommendations

Primary Care Behavioral Health Integration

- Payers should develop value-based primary care payment models that support primary care behavioral health integration.
- Mental health and substance use carve-outs that impact behavioral health services should be invisible to service recipients and providers and not impact care.

Collaborative Governance

- The Collaborative should continue to be the long-term convener for all payers and providers to seek alignment and agreement around sustainable resourcing for primary care infrastructure and transformation.

SB231 Collaborative Recommendations

Payment Model

- **Goals:**
 - Multi-payer alignment of both payment- and performance-incentive methodologies over five years
 - Double 2014 aggregate average commercial spend
- **Key Milestone:** By the end of 2018, payers will align with federal payment goals by encouraging 50% of all payers' primary care payments be attributed to value-based.
- **CPC+:** Use CPC+ as the guiding framework for payment models

SB231 Workgroup Feedback on SB934

- Increased spending & Target determination
- Methodology determining primary care spend
- Annual reporting
- National models

SB231 Workgroup Feedback on SB934

- Payer Participation
- Populations Served
- Payment Elements
- Underlying Tenants
- Annual Reporting

Questions?