



April 6, 2017

Dear Chair Greenlick, Vice-chairs Hayden and Nosse, and members of the House Health Committee,

Thank you for the opportunity to provide testimony in support of SB 934. OPCA represents Oregon's 32 community health centers, also known as Federally Qualified Health Centers. Community health centers deliver integrated primary care, including dental and behavioral health services, to over 420,000 Oregonians. With a focus on vulnerable populations, health centers are integral Coordinated Care Organizations' networks and serve one in four Oregon Health Plan members.

OPCA supports SB 934 to increase investment in primary care and align payment to support Patient Centered Primary Care Homes and emerging advanced models of care. The bill moves forward the work and recommendations of Oregon's Primary Care Payment Reform Collaborative, which OPCA and several of our member health centers participate in. We appreciate the work of Rep. Buehler and Sen. Steiner Hayward to sponsor this bill, and the members and staff of the Collaborative.

Health centers have been on the journey to transform care and payment for over 10 years. This began with transforming practices into Patient-Centered Primary Care Homes (PCPCH). All 32 community health centers are PCPCH tier 3, and two of them recently became the first 5 star Medical Homes recognized by the state. A recent study by Portland State University showed that every dollar of investment in Patient-Centered Primary Care Homes resulted in \$13 in savings in the total cost of care.

More recently, for the last 5 years, OPCA has been engaged in intensive work with the Oregon Health Authority to develop and implement an alternative payment methodology for community health centers and rural health clinics. This payment is designed to support an emerging advanced model of care to improve quality and outcomes for vulnerable patients while lowering total costs of care. Now in place at 13 health centers and one rural health clinic, this payment and care model supports care that's tailored to the patient population to address not only the medical, dental and behavioral needs of patients, but their social determinants of health as well.

Aligning payment to support transforming care models is critical to Oregon's health transformation efforts. It is complex work and it is important to approach it thoughtfully and carefully.

In its work, the Collaborative used the Centers for Medicare and Medicaid Services' Comprehensive Primary Care Plus (CPC+) payment model to inform its recommendations for a statewide payment framework. It also recognized challenges with CPC+ including:

- CPC+ is only open to some types of providers, specifically those that are paid on the Medicare Physician Fee Schedule. That means pediatric practices, Rural Health Clinics, and Community Health Centers are not able to participate, even though they are often at the forefront of care transformation.
- Because CPC+ is a national model designed for a subset of providers and patient populations, it may not meet the medical, behavioral and social needs of diverse populations of patients and be sustainable across primary care practice settings.
- The CPC+ model includes an existing set of quality metrics relevant to a Medicare population which don't necessarily align with Oregon's CCO metrics for Medicaid population and the larger Oregon metrics alignment strategy coming out of SB 440.

Recognizing these challenges, the bill supports the work of the Collaborative to continue its work to foster and align payment, using CPC+ as a guide, but not as a one-size-fits-all approach. We believe this approach will foster payment models that have common elements while giving payers the flexibility to ensure payment supports care models to meet the needs of the populations served, such as homeless patients, rural communities and pediatrics. Such an approach will be especially key for Medicaid populations and Oregon's focus on care integration and addressing the social determinants of health such as housing.

Once again, we offer our appreciation for the work of the sponsors of the bill and the staff and members of the Primary Care Payment Reform Collaborative to advance this work. OPCA looks forward to our continued involvement in the Collaborative and offers our assistance and expertise in helping to refine a framework for reform moving forward.

Thank you,

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