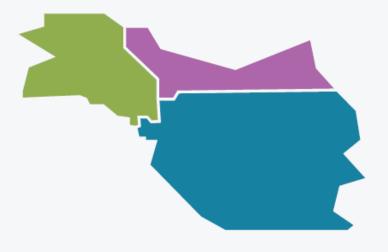
Health Share of Oregon



Health Share of Oregon

About Health Share

Health Share Service Area



Washington
County121,485 members
20% of county residents
27% of Health Share membersMultnomah
County232,322 members
28% of county residents
53% of Health Share membersClackamas
County87,317 members
21% of county residents
20% of Health Share members

440,000 members

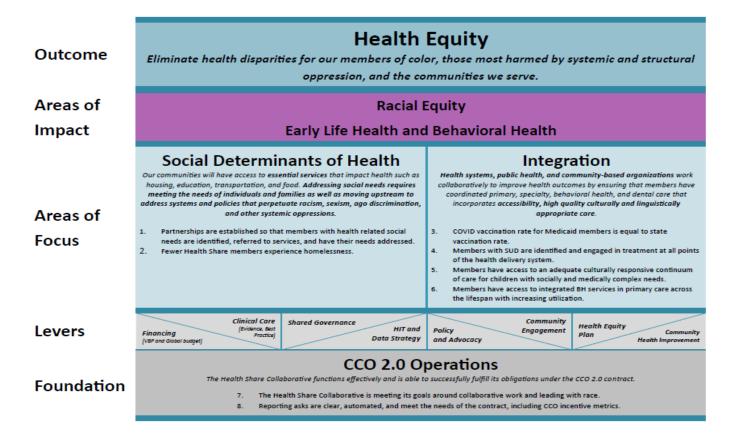
Founded by and functions as a collaborative with 11 organization partners, all serving OHP enrollees

Our mission is to partner with communities to achieve ongoing transformation, health equity, and the best possible health for each individual



Strategic Framework for the Health Share Collaborative 2021-2024

All members have a fair and just opportunity to be as healthy as possible.





Focus on BH – sought to invest more in BH infrastructure

BH Workforce Task Force

health

shai

- Launched July 2022 to address the behavioral health access and workforce challenges in the near-term
- Over three months, four workgroups advanced 17 recommendations around:
 - Service prioritization highest needs
 - Policy and advocacy to reduce administrative burden and advance new strategic investments into BH
 - Filling gaps in the care model around pre-treatment services, navigation, transition/coordination out of acute care settings, and coordination between primary care and BH
 - Leveraging telehealth for expanding capacity

What we accomplished

- Increased rates average 30% for outpatient providers that hold a certificate of approval and 10% for those working in a group or private practices
 - Large agencies report wage increases of 18-36% and raising minimum wages by ~25% to \$20/hour
- Added 10 new services with 7 providers for critical services to expand access for high priority MH and SUD needs
- Created capacity and ability to pay for engagement **prior** to members meeting criteria for treatment
- Established dyads of BH and primary care for increased coordination
- Established a psychiatric bridge clinic for medication services for high-risk youth/adolescents
- Created a new BH navigation team that manages care for members needing ACT, ICM, and Level D outpatient services for youth
- Created 10 (and counting!) new contracts for peer and peer-run services across the continuum of care
 - Some limited success in administrative relief from OHA
 - On pathway to onboard new telehealth provider capacity 4

Perfect storm

Sought to invest more in behavioral health infrastructure and providers

Pandemic led to fewer encounters and fewer providers, and exposed gaps in care

Communities of color most significantly impacted

Behavioral Health investments:

- \$100M invested to address gaps and disparities
- Low barrier, peer-led addiction/treatment, and crisis services provided by our tricounty partners to address our SUD crisis
- Expanded behavioral health capacity to get people off the streets and into the care they need. Provides longer term hospital care as necessary, and improves access and care for youth and children with acute mental health needs
- Working to address constraints in acute system of care, especially for people who are civilly committed

All Together, All for You.

ADVENTIST HEALTH PORTLAND

















OHSU

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Thank you



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