

Keep CCO Budgets and Metrics on Track

Amend SB 967

Background

Coordinated care organizations (CCOs) were established in Oregon to achieve the triple aim of achieving better health, better care, and lower costs. This has been operationalized through global budgets covering local care delivery model for physical, behavioral, and oral health services. In order to improve health outcomes, the Health Plan Quality Metrics Committee works with Metrics and Scoring Subcommittee to establish outcome and quality measures for the CCOs to meet on behalf of their members.

Problem

SB 967 undermines the efficacy of CCO global budgets and removes much needed technical expertise from the development of CCO metrics.

Solutions

Global Budget: SB 967 authorizes the Oregon Health Authority (OHA) to reimburse CCOs in ways that are not limited to the global budget. While this is a laudable goal, it does not adequately protect the existing framework. CCOs take on the medical risk for Oregon Health Plan members. As written, SB 967 significantly undermines CCOs' ability to manage risk. Consequently, we would suggest removing lines 1-8 on Page 5 of the bill and replacing it with the following language:

In addition to global budgets, CCOs will be reimbursed retrospectively by OHA on a 1-for-1 for the purposes for paying Health Related Service Need services provided to qualified OHP members for a period of 3 years as approved by CMS in the 1115 Demonstration Medicaid Waiver.

Metrics: We believe that it is desirable to formalize the role of underrepresented people in the metrics development process. For 10 years the Metrics and Scoring Committee has facilitated a balancing act between supporting the patient and provider relationship and pushing for more audacious metrics. We support the goal of transferring power to underrepresented community members to drive focus areas and desired outcomes, but we believe that the development of the metrics need to be achieved by technical experts to ensure the metrics are measurable, achievable and result in the desired patient outcomes. We would support language that meets this goal through a better and more achievable committee structure.

A Path Forward: Find solutions that can protect the CCO global budgets and support creating a two-pronged committee process.

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Information furnished by:

