

November 18, 2025



OREGON
HEALTH
AUTHORITY

Lane County CCO Transition
House Committee on Healthcare
Dave Baden, Deputy Director for Policy & Programs
Dave Inbody, CCO Operations Director

Lane County OHP Member Transition Goals



Keep members as the primary focus throughout the transition of care.



Collaborate early and often with both PacificSource and Trillium with consistent messaging.



Provide additional support measures for members with complex medical needs.



Provide opportunities to gather member, provider, and community feedback throughout the transition.

Lane County OHP Member Transition Overview

PacificSource notified the Oregon Health Authority (OHA) that it will not renew its coordinated care organization (CCO) contract for Lane County after 2025. This impacts about 96,000 members in Lane County.

Members in Lane County will transition from PacificSource to Trillium on February 1st, 2026

The following outlines the implementation approach:



Identify

Chose a CCO to transition PacificSource's 90,000 members based on best available data, timeline and resources



Extend

Extended PacificSource's Service Area contract in Lane County until January 31st, 2026



Start

Begin Trillium's service to all Lane County OHP members on February 1st, 2026



Grow

Until February, OHA supports expedited provider network growth for Trillium



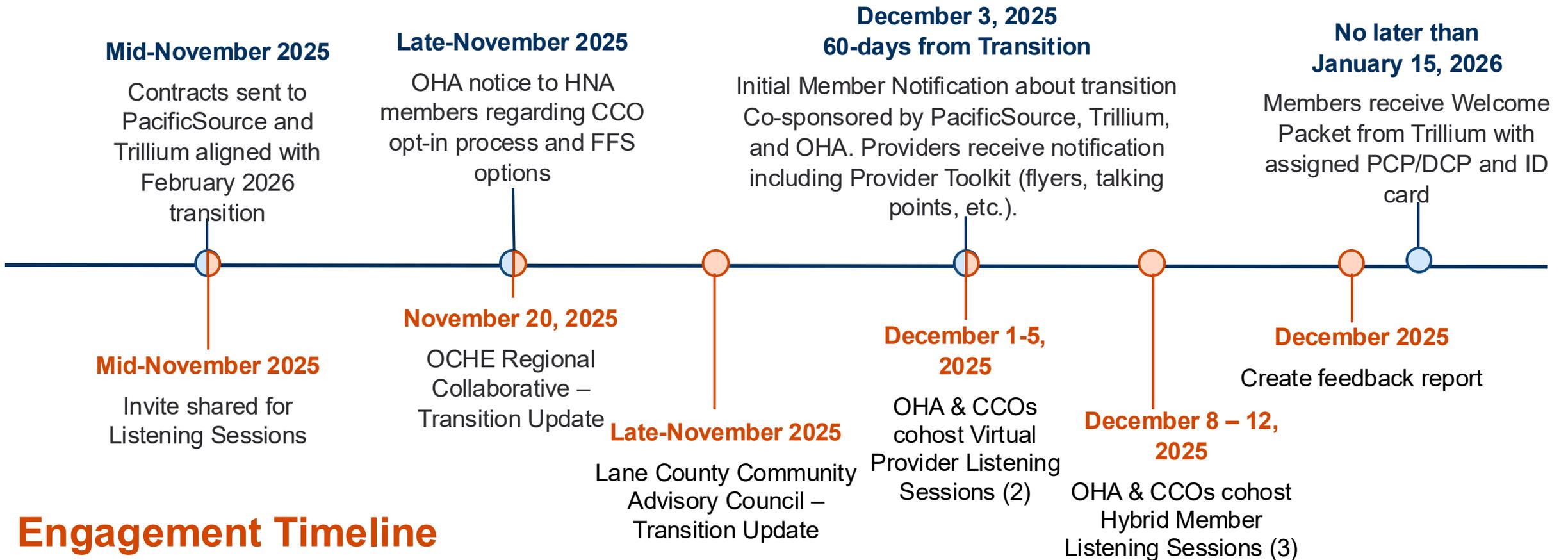
Monitor

Monitor and Collaborate with Trillium post-transition for successful ongoing member coverage and network adequacy

Timeline for Formal Notices to Members/Providers

OHA, PacificSource, and Trillium are working together to provide information to members, providers, and the community regarding the transition of care and to minimize member disruption.

Written Notices Timeline



Engagement Timeline

Joint Member and Provider Listening Sessions

OHA, PacificSource, and Trillium will co-create a shared space for members and providers to share important program updates and collect feedback from members and providers. The joint sessions with CCOs will make it easier for members and providers to attend sessions virtually or in their area to learn and share input for the transition.

OBJECTIVES

- Share information about the transition to help members and providers know what to expect, what to do, and where to go for help.
- Listen and capture feedback to inform the Enhanced Support for Successful Member Transition Plan.

QUESTIONS POSED TO THE GROUP

- 1** What questions do you have at this time?
- 2** What worries you most about this transition?
- 3** What do you need to help you through this transition?

Enhanced Support for Successful Member Transition

Trillium Accountability Phases

Phase One (October – January)

Phase Two (February – May)

Activities and Goals

- **Conduct network analysis** to assess Trillium’s current provider network and to identify any gaps to be addressed prior to Feb, 1, 2026.
- **Improve network gaps** by setting targets and supporting Trillium in addressing any roadblocks as they scale up their network.
- **Collect feedback** to inform accountability measures for the plan for enhanced support for member transition through phase two.

- **Enhanced monitoring of key metrics** such as time and distance/network adequacy metrics to measure Trillium’s success in the first months.
 - This may also include requirements for a phased-in network expansion post- February 1, 2026.
- **Enforce corrective action** as needed.
- **Monitor member transition** and accountability measures in the enhanced support plan.

Contractual Methods of Ensuring Compliance

Review of documentation submitted by Contractor

Contract performance review

Review of Grievances

Review of reports generated by the EQRO

On-site review of documents and any other source of relevant information

Transition of Care Requirements Per OAR 410-141-03-850

“Transition of Care” means the period of time after the effective date of enrollment with the receiving CCO [Trillium], during which the receiving CCO must provide continued access to care.

90

Day Period for Dual Eligible Members

60

Day Period for Behavioral Health Services

30

Day Period for Physical/ Oral Health Services

During Transition of Care Period:

- Continued access to existing services & providers
- Non-network providers reimbursed at Medicaid FFS rates
- Must cover ongoing prenatal/postpartum, transplant (1-year), active chemo/radiation, and Rx that extend beyond transition period
- Not responsible for ongoing in-patient stays begun with predecessor CCO

Members Guaranteed Continued Services:

- Medically Fragile Children (MFC)
- Breast & Cervical Cancer Treatment program
- CareAssist due to HIV/AIDS
- End stage renal, prenatal/postpartum, transplant, radiation, chemo
- Members at risk without continued care

Other Requirements:

- Timely transfer of records (within 7 days)
- No service delays for missing records—claims approved as if authorized
- Electronic data exchange for the past 5 years
- Written notice for any service denial/reduction per federal & state guidelines

Trillium Status Reporting Requirements

OHA and Trillium are meeting on a weekly basis to discuss the transition and provider networking. Trillium will provide contracting updates on a weekly basis which will include:

- **Number of provider contracts signed in the last week by service type.**
- **Number of providers currently in discussions regarding new contracts.**
- **Number of providers who have declined to contracts with Trillium.**

Additional Information Received from Trillium

Call Center Metrics/Summary of Feedback Heard (weekly)	Draft member/provider-facing outreach materials (ad-hoc)	Care Continuity Audits (bi-weekly)	Data and Systems Readiness Updates (bi-weekly)	Staffing Updates (bi-weekly)
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Supplemental data may be requested in addition to the required updates to assess risk and maintain focus on the most critical areas.

This information will demonstrate how Trillium’s provider network is growing, their efforts to grow, and if there are demonstrable trends in types of providers declining to contract with Trillium.

Trillium Performance Checkpoints

Key metrics and evaluation criteria will be documented in an Enhanced Support for Successful Member Transition Plan with checkpoints for Trillium's performance to promote enhanced oversight.

Timeframe	Key Metrics/Evaluation	OHA Remedies if Metrics are Missed
January 18, 2026	OHA confirms readiness with Trillium	Notice of Deficiency: Written notification of areas requiring improvement
February 1, 2026	Providers to meet minimum member need <i>Specifics TBD based on the network analysis.</i>	Improvement Plan: Trillium must submit and implement a targeted, time-bound plan to address deficiencies
March 1, 2026 (1 month)	Meet current Trillium Capacity of Services performance	Corrective Action Plan: Trillium must submit a corrective action plan with steps and timelines for resolving deficiencies.
May 1, 2026 (3 month)	Meet current Lane County-wide Capacity of Services performance	Sanctions and Penalties: OHA may impose fines, suspend payments, or take further contract actions if issues continue.
July 31, 2026 (6 Month)	Fully Operational and meeting all OHA Contractual Obligations	Service Area Need Identified: OAR 410-141-3505, OAR 410-141-3720



If sanctions or penalties are imposed, OHA and Trillium may collaborate to develop a plan to re-direct the sanctions or penalty amounts back to the Lane County community to improve delivery of care for OHP members.

Heritage Native American Members

OHA is preparing for changes to enrollment in Open Card

Heritage Native American (HNA) Members will be given the choice to opt-in to Trillium

1. HNA members will be notified of PacificSource's termination and will be provided with options of how to opt-in to Trillium's coverage
2. HNA members will contact OHA to transition to Trillium's coverage.
3. Any HNA member who does not opt-in to Trillium will be automatically moved to Open Card indefinitely.

Opportunities for Feedback

OHA is collecting feedback formally and informally related to the Lane County Member Transition through:



Two Provider Sessions and Three Member Sessions



Weekly Legislative Briefings with Lane County



Designated email to collect feedback



Ongoing conversations with community partners



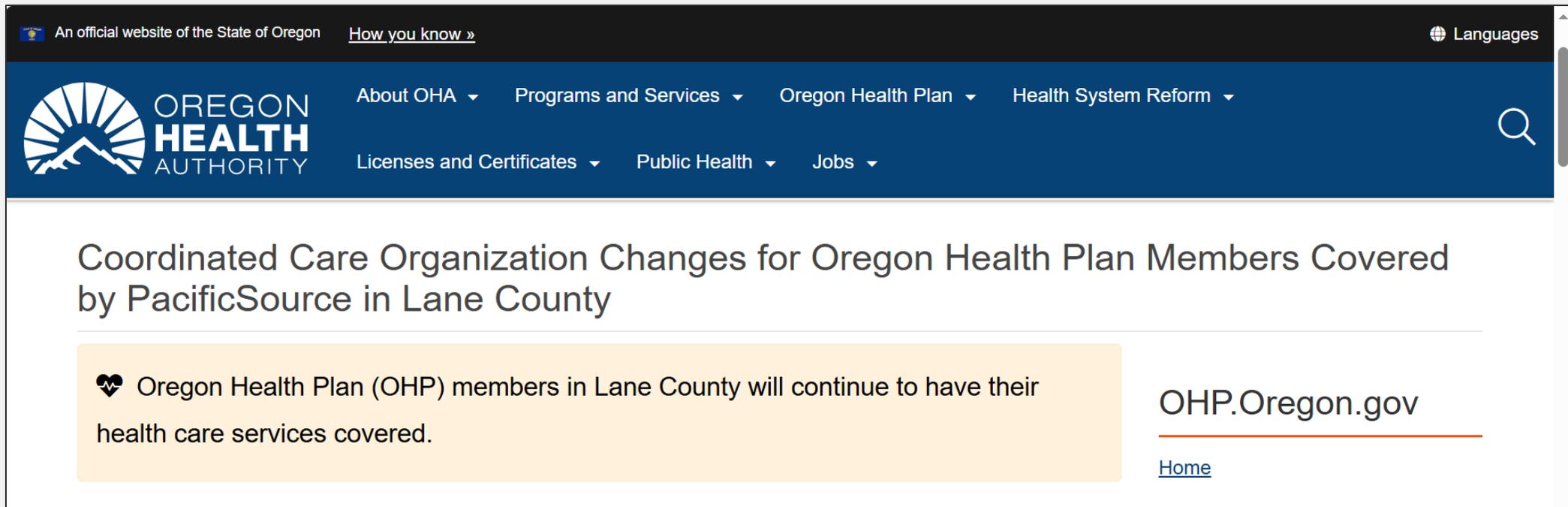
Pre-existing and ad-hoc meetings and engagements

[Lane County Transition Webpage](#)

A **feedback report** will be developed in early 2026 that summarizes the feedback collected and how feedback was considered in the Lane County Member Transition.

CCO Transition Public Webpage

A public webpage was launched to support members and providers transitioning from PacificSource to Trillium in Lane County. The webpage will be updated frequently as new information is shared.



The screenshot shows the Oregon Health Authority website. The header includes the logo and navigation menu with items like 'About OHA', 'Programs and Services', 'Oregon Health Plan', 'Health System Reform', 'Licenses and Certificates', 'Public Health', and 'Jobs'. A search icon is also present. The main content area features a title: 'Coordinated Care Organization Changes for Oregon Health Plan Members Covered by PacificSource in Lane County'. Below the title is a highlighted text box stating: 'Oregon Health Plan (OHP) members in Lane County will continue to have their health care services covered.' To the right of this box, the text 'OHP.Oregon.gov' is displayed with a red underline, and a 'Home' link is provided below it.

[Link to Webpage](#)

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact at publiccivilrights@odhsoha.oregon.gov or (971-673-3420). We accept all relay calls.

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Questions

Lane County Eligibility HPA Data

Number of members by eligibility category for members enrolled in PacificSource Lane and in Trillium Community Health in August of 2025

