



eocco

EASTERN OREGON
COORDINATED CARE
ORGANIZATION

Frequently Used Terms

Affordable Care Act- A federal law that allows:

- Medicaid choice
- Health insurance exchanges
- Stops insurance companies from denying coverage because of pre-existing issues

Accountable Care Organization- A model that ties payments to metrics. It is tied to the cutbacks in the total cost of care for patients.

Aim Statement- A statement of a team's goals that measures progress and has time limits.

Capitation- A way to pay for health care (like doctors, nurses, and mental health). A doctor or group of doctors get a set amount of money for patients assigned to them.

Care Coordination- A team that helps OHP members address all of their needs, with a focus on those with chronic issues.

Community Advisory Council- A group working towards better health for all.

Coordinated Care Organization- A group that agrees to work together in their local regions for OHP members.

Community Health Assessment- Data that helps see health needs and issues in an area. CCOs must complete one every 5 years.

Charter- A document that has the duties, goals, and structure for a group to work together. A charter includes how the team will make decisions and the roles of members.

Community Health Plan- A plan to address health issues and needs. Using the CHA, the CAC helps to choose what to work on first, second, and so on. CCOs must complete one every 5 years.

If you have any questions, please contact us at EOCCOcommunities@gobhi.org.

Centers for Medicare and Medicaid Services- A group that governs Medicare, Medicaid, and the Children's Health Insurance Program (CHIP).

Childcare Reimbursement- Funds for childcare so members can attend meetings (CAC, LCHP, or subgroup).

Covered Service- A procedure or service paid for by EOCCO.

Department of Medical Assistance Programs- The state agency that governs Medicaid and Oregon CHIP.

Eastern Oregon Coordinated Care Organization (EOCCO)- A group that works together for better health in Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, and Wheeler Counties. GOBHI and Moda Health operate the EOCCO.

Fee for Service- "Open Card." OHP pays a set amount for the services an individual receives.

Greater Oregon Behavioral Health, Inc.- A group that pays for services at local mental health programs. GOBHI co-owns EOCCO with Moda and other health partners.

Institute for Healthcare Improvement- A group that focus on:

- Creating change
- Working with patients and providers to find and test new ways of care
- Helping groups adopt best practices and new programs

Incentive metric- OHA goals on key health issues to guide funding CCOs.

Local Community Health Partnerships- There is one group in each county. These groups are local people that have a desire to create better health in their area. The goal of this group is to engage members to take an active role in improving their own health and the health of their area.

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Managed Care Organization- A health plan that covers the services of a group of providers for those enrolled.

Medical Home- A model for providing services through a team of providers. The goal is to give ongoing care to patients.

Moda- A group with health plans for people or employers. Moda co-owns EOCCO with GOBHI and other health system partners.

National Committee for Quality Assurance- A group that improves health care.

Non-Emergent Medical Transportation (NEMT)- Rides for members to receive care.

Oregon Health Authority (OHA)- The state group that works to better the health of Oregonians by:

- Lowering and containing costs
- Improving quality
- Increasing access to care

Oregon Health Plan (OHP)- State-run program that helps cover the cost of care for people with low incomes. Also known as, “Medicaid” or “CHIP.”

OHP Assister- A person that helps fill out forms and answer questions.

Oregon Rural Practice-Based Research Network (ORPRN) - A group that covers Oregon’s rural areas. ORPRN is part of the OHSU.

Patient Centered Medical Home- A place where people get most of their care.

Patient Centered Primary Care Home- Unique to Oregon. A model of care that has the goal of creating better health for all.

Plan, Do, Study, Act- A way to test change by:

- Creating a plan
- Testing the change
- Looking at the results

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- Making needed changes

Per Member per Month- A set amount paid to providers based on their number of patients.

Ride Reimbursement- Funds for traveling to and from CAC, LCHP, and subgroup meetings.

Selection Committee- A group that must have one county employee and one EOCCO Board member from each county served. This group reviews and approves CAC members by looking to see if the member:

- Is a member of an under-represented group
- Is on OHP, or speaks for someone on OHP (must be at least 51%)
- Is a county employee

Stipend- Funds that may count as income for attending CAC, LCHP, or subgroup meetings.

Tier- A system that tells the level of a provider. A tier can affect how much a provider is paid for their services. There are three tiers:

- Tier 1- Focus on basic services that most providers can meet
- Tier 2- Focus on intermediate services that many providers can meet
- Tier 3- Focus on advanced services that few providers can meet

Tribe- Tribe means any Indian Tribe, band, nation or other group, which is eligible for the special programs and services provided by the United States to Indians because of their status as Indians.

Triple Aim- This aim makes health systems work hard to create better health. New programs and services must help create:

- A better OHP member experience
- Improvements in the health of different groups
- Lower costs of healthcare

W-9- A tax form that an OHP member must sign and turn-in before receiving funds. GOBHI will mail 1099s.

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