

2025 Quality Pool Distribution Plan Template

Due: August 29, 2025

Purpose

Exh. B, Pt. 10, Sec. 4, Para. e in the 2025 Coordinated Care Organization (CCO) contract describes the requirement for each CCO to create a written distribution plan for its Quality Pool and Challenge Pool earnings. The CCO must also make its plan publicly available. The purpose of the plan is to inform the CCO's Participating Providers, including Social Determinants of Health and Equity (SDOH-E) and public health partners, about CCO strategies and processes for distribution of Quality Pool funds.

The Oregon Health Authority (OHA) has developed this reporting template to ensure CCOs meet the contract requirements and to give Participating Providers and other interested parties clear and consistent information about CCO strategies for Quality Pool distribution.

Instructions

The CCO must answer all questions in this template to satisfy the contract requirements. Supporting materials and links may be provided, but they must only supplement the answers provided in the template document. A person reading the CCO's responses provided in this template should have a clear and complete picture of the CCO's Quality Pool distribution, without reliance on any other sources.

Unless otherwise noted in a specific question, this template pertains only to Quality Pool funds received in 2025 (Distribution Year 2025) for achievement of 2024 incentive metrics (Measurement Year 2024).

All references to "Quality Pool" within this template include both Quality Pool and Challenge Pool earnings.

Process

The completed Quality Pool Distribution Plan template is due to OHA via the CCO Contract Deliverables [Portal](#) by August 29, 2025. (The submitter must have an OHA account to access the portal). The CCO must also make the completed template publicly available on its website.

OHA will review the submitted template for completeness. If any response is found to be incomplete, OHA will notify the CCO via the portal. The CCO will then have 30 days to provide the requested additional information. The CCO should not publicly post its completed template until it receives confirmation from OHA that no additional information is needed.

Questions?

Any questions about the template should be directed to metrics.questions@odhsoha.oregon.gov.

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CCO Name: Eastern Oregon Coordinated Care Organization

Contract Number: 161758

CCO Contact Person (name and email): Summer Prantl Nudelman,
summer.prantl@modahealth.com

1. Provide an overview of the methodology and/or strategy your CCO uses to distribute Quality Pool and Challenge Pool earnings to Participating Providers, including SDOH-E and public health partners.

EOCCO has a long history of investing quality pool funds back into Participating Provider and communities. The strategy is to continue to invest in our delivery system and communities by rewarding providers for their performance meeting the quality targets, through the EOCCO Community Benefit Initiative Reinvestment (CBIR) Program and through other projects directed by our 12 rural and frontier communities, the EOCCO Community Advisory Council, and the EOCCO Board of Directors.

EOCCO develops, monitors, and evaluates the distribution of quality pool funding annually, through the work of the Quality and Challenge Pool Settlement Distribution Subcommittee. As an appointed subcommittee of the EOCCO Board of Directors, the committee is charged with allocating the total quality pool dollars and is informed by the EOCCO Value Based Payment workgroup and the EOCCO Clinical Advisory Panel. The final distribution plan is reviewed and approved by the EOCCO Board of Directors. EOCCO distributes Quality Pool and Challenge Pool earnings through three primary funding mechanisms:

1. Direct participating provider payments, including enhanced PCPCH payments to primary care practices and quality bonus payments for primary care, dental and behavioral health who achieve quality measure targets.
2. EOCCO's Community Benefit Initiative Reinvestment (CBIR) Program. This grant program has three components that can be awarded to participating providers, SDOH-E and public health partners.

These CBIR grant opportunities include:

- a. Public Health grants which are initiated and/or championed by Eastern Oregon public health departments.
- b. Opt-In grants have a targeted focus and grantees can apply to implement initiatives in the areas of: Health Information Technology, Kindergarten Readiness for 0-6 Year Olds, Social Needs Screening Implementation, Access to Primary Care Services, Wellness and Preventive Care for 7-21 Year Olds, Initiation and Engagement in Substance Use Disorder Treatment, and continuing current projects.
- c. New Idea grants that support groundbreaking ideas with the potential for spread to other communities. The EOCCO Grant Subcommittee administers the EOCCO Community Benefit Initiative Reinvestment (CBIR) Program in collaboration with the Oregon Rural Practice-based Research Network (ORPRN). This committee evaluates grant proposals, oversees the annual distribution of funds, and evaluates the grantees. Annually, the subcommittee

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presents their funding recommendations to the EOCCO Board for approval and provides updates on past grantees.

3. Monthly Care Management fees paid to the subset of clinics that participate in EOCCO's Behavioral Health Integration (BHI) contract program. Each participating organization receives addition Per Member Per Month (PMPM) payments to support care coordination and collaboration for assigned CCO members.

The Quality and Challenge Pool Distribution Subcommittee is meeting in September 2025 to finalize the recommendation for the 2024 Quality and Challenge Pool dollars and will present their recommendations at the next EOCCO Board of Directors meeting in October 2025. The draft recommendations for 2024 Quality and Challenge Pool dollars allocation includes direct provider payments (80.5%), CBIR program (5.7%), administration (6.9%), and behavioral health integration care management fees (6.9%).

2. **Describe your CCO's process for evaluating the contributions of Participating Providers and how they may qualify for CCO distribution of Quality Pool earnings.**

Participating Providers who participate in the EOCCO shared savings model may earn Quality Pool funds through enhanced PCPCH payments to primary care practices. Participating primary care, dental, and behavioral health providers are also evaluated on their performance based on a set of measures outlined in the primary care, dental, and behavioral health quality bonus payment formulas. Each provider type's measures are selected from the CCO Measure Set that is voted in annually by the Metrics and Scoring Committee. Participating Providers qualify for points for each measure in which they meet minimum denominator size requirement and meet or exceed EOCCO's benchmark or improvement target. The Participating Provider's final payment amount is then calculated by multiplying the percentage of possible points earned by the total member months attributed to the organization during the measurement period.

Public health partners may qualify for Quality Pool earnings by participating in the EOCCO shared savings model, which includes enhanced PCPCH payments to primary care practices and quality bonus payments, if applicable. All Participating Providers, including public health and SDOH-E partners, may also apply and receive funds through the CBIR grant program.

3. **Does your CCO's distribution strategy consider payments made previously to Participating Providers (such as up-front funding to a clinic or non-clinical partner that is intended to help the CCO achieve metrics related to the Quality Pool)? If yes, please describe.**

No

4. **Describe any changes your CCO plans to make to its process for distributing Quality Pool funds in future years (beyond MY2024).**

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EOCCO plans to continue investing quality pool funds back into Participating Providers and communities using a methodology similar to the current methodology. The strategy is to continue to invest in our delivery system and communities through quality bonus payments based on performance, the CBIR program, and through projects directed by the 12 rural and frontier communities, EOCCO Community Advisory Council, and the EOCCO Board of Directors.

- 5. Please provide a link to where the 2025 Quality Pool Distribution Plan (this document) will be publicly available on your CCO's website.**

<https://eooco.com/providers/incentivemeasures>