





EOCCO Incentive Measure Updates

Sean Jessup

Disclosure statement

- I do have a relevant financial relationship with commercial interest whose products or services relate to the content of the educational presentation.
 - Company: Moda Health, Inc./EOCCO
 - Relationship: Director of Medicaid Programs
- To ensure independence and balance of content, current conflicts of interest were resolved by basing recommendations on structured review for best evidence.



Learning objective

Summarize EOCCO's overall quality measure performance





EOCCO structure

- Ownership
 - Moda Health (29%)
 - Greater Oregon Behavioral Health, Inc. (29%)
 - Good Shepherd Hospital (10%)
 - Grande Ronde Hospital (10%)
 - St. Alphonsus Hospital (10%)
 - St. Anthony's Hospital (10%)
 - Eastern Oregon IPA (1%)
 - Yakima Valley Farm Workers (1%)
- 17 Member Governing board
- Community advisory council's
 - 12 Local Community Advisory Council's (LCAC's)
 - 1 Regional Community Advisory Council (RCAC)
- Clinical Advisory Panel (CAP)

Keys to financial success

- Operating within the global budget framework
 - 3.4% fixed rate of growth per year
- Implement Value Based Payment (VBP) models
 - Shared savings/alternate payment methodologies
- Meet CCO quality measures
- Re-investments into providers the community and new programs
 - Significant Primary Care investments

2016 statewide quality pool distribution

- 2016 quality pool funding available:
 - \$179 Million
 - 27.4 Million in challenge pool funding

Number of quality measure targets met	Number of CCO's	Percent of quality pool funds earned
At least 14	7	100%
12-13	7	80%
11	2	70%



2017 statewide quality pool distribution

- 2017 quality pool funding available:
 - \$178 Million
 - \$2.4 Million in challenge pool funding

2017 CCO performance

Number of quality measure target met	Number of CCOs	Percent of quality pool funds earned
At least 13	14	100%
11	2	70%



2013-2017 EOCCO quality measures met and percent of funding received

- 2013 \$2.4 Million (2% of premium)
 - Received \$1.9 Million-80% of available funding
- 2014 \$6 Million (3% of premium)
 - Received \$6.8 Million-100% of available funding
- 2015 \$10 Million (4% of premium)
 - Received \$10.2 Million-100% of available funding
- 2016 \$11.5 Million (4.25% of premium)
 - Received \$10.1 Million-91% of available funding
- 2017 \$12 Million (4.25% of premium)
 - Received \$12.1 Million-101% of available funding



Quality performance over time

EASTERN OREGON CCO-2017 Quality Measure Results					
Incentive Measure	2014 Final Rate	2015 Final Rate	2016 Final Rate	2017 Target Rate	2017 Final Rate
Adolescent well care visits	23.9%	25.5%	34.3%	37.3%	37.8%
Alcohol and drug misuse: SBIRT	5.5%	8.8%	16.1%	15.0%	15.3%
Emergency department utilization*	54	54.4	53.4	51.8	52.9
CAHPS Access to care	84.8%	82.3%	81.7%	83.7%	80.7%
CAHPS Satisfaction with care	83.3%	87.4%	84.7%	86.7%	86.8%
Cigarette smoking prevalence**	N/A	N/A	31%	30%	24.2%
Colorectal cancer screening***	35.3%	36.0%	40.9%	43.9%	44.8%
Controlling high blood pressure**	52.2%	59.1%	63.9%	66.9%	67.0%
Dental sealants	4.9%	14.4%	18.6%	20.0%	24.6%
Depression screening and follow up plan**	17.4%	33.0%	52.1%	52.9%	57.3%
Developmental screening in the first 36 months of life	35.9%	44.7%	54.3%	57.3%	62.6%
Diabetes HbA1c Poor Control *&**	21.6%	26.4%	26.5%	23.5%	30.0%
Effective contraceptive use	32.6%	39.7%	45.1%	48.1%	50.3%
Childhood Immunization Status Combo 2	N/A	N/A	70.6%	72.9%	77.8%
Follow up after hospitalization for mental illness	63.6%	70.9%	72.7%	75.7%	83.8%
Assessments for Children in DHS custody	68.8%	51.0%	73.0%	76.0%	83.2%
PCPCH Enrollment	61.0%	73.5%	85.1%	60.0%	68.9%
Timeliness of prenatal care***	96.9%	91.4%	93.1%	91.0%	92.9%

^{*}Lower is better

^{**}Technology Measures

^{***}Chart Review Component

County Level Performance

County	Measures Met	Adolescent Well Care Visits	Childhood Immunizatio ns	Colorectal Cancer Screening	Dental Sealants	Developmen tal Screening	Effective Contraceptiv e Use	Ambulatory Care & ED Utilization	Follow Up After Hospitalizati on for Mental Illness*	Alcohol and Drug Misuse
Baker	6	33.1%	84.0%	41.7%	29.1%	69.1%	54.6%	51.1	100.0%	11.0%
Gilliam	5	50.0%	85.7%	29.6%	32.2%	50.0%	30.3%	37.3	100.0%	8.4%
Grant	2	29.8%	66.7%	25.1%	40.6%	43.3%	44.1%	63.0	100.0%	5.3%
Harney	8	36.5%	79.2%	48.4%	42.5%	90.0%	51.3%	45.8	100.0%	17.2%
Lake	7	36.4%	77.3%	45.1%	32.1%	39.7%	56.9%	40.1	100.0%	18.1%
Malheur	4	36.7%	82.4%	43.6%	23.0%	84.0%	47.0%	55.7	94.7%	13.4%
Morrow	6	46.2%	68.8%	40.5%	24.4%	43.6%	49.6%	50.0	100.0%	24.0%
Sherman	6	42.2%	50.0%	41.9%	30.4%	62.5%	33.3%	32.1	100.0%	17.8%
Umatilla	7	39.5%	79.1%	44.1%	24.0%	47.2%	49.1%	53.6	88.9%	15.1%
Union	5	39.0%	66.7%	39.1%	17.8%	82.8%	48.2%	62.8	100.0%	21.7%
Wallowa	6	47.9%	78.3%	53.7%	16.8%	80.0%	44.7%	30.7	100.0%	7.6%
Wheeler	6	24.0%	50.0%	41.0%	62.5%	80.0%	63.3%	35.1	100.0%	38.5%
					i					
EOCCO Rate	7	38.6%	77.3%	42.7%	24.6%	62.8%	49.0%	53.1	95.7%	15.3%
EOCCO 2017 Target Rate		37.3%	72.9%	43.9%	20.0%	57.3%	48.1%	51.8	75.7%	15.0%



EOCCO quality measure funding reinvestments

- Quality bonus payments to PCP's
- Enhanced PCPCH funding
- Local community advisory council (LCAC) community benefit initiatives
- Dental Care Organization quality funding
- Transformation Grant Community Benefit Initiatives (grants)
- Other Initiatives

Other initiatives and new programs

- Community Health Worker investments
 - Training
 - Reimbursement
- Technology investments
 - Arcadia
 - PreManage

2017 quality pool funds distribution

Initiative	Percentage
Quality Bonus Payments	30%
	40%
Enhanced PCPCH Payments	
	6%
LCAC Community Benefit Initiatives	
Dental Care Organization Distribution	7%
	10%
Transformation Grant Community Benefit Initiatives	
Other Initiatives	7%



EOCCO investments in the community through June 2018

PCPCH payments:

\$27.9 Million

EOCCO shared savings/APM:

\$28.4 Million

• EOCCO Community Benefit Initiatives \$4.35 Million (Grants):

• EOCCO quality measure investments: \$26.6 Million

Total re-investments to date:

\$87.25 Million

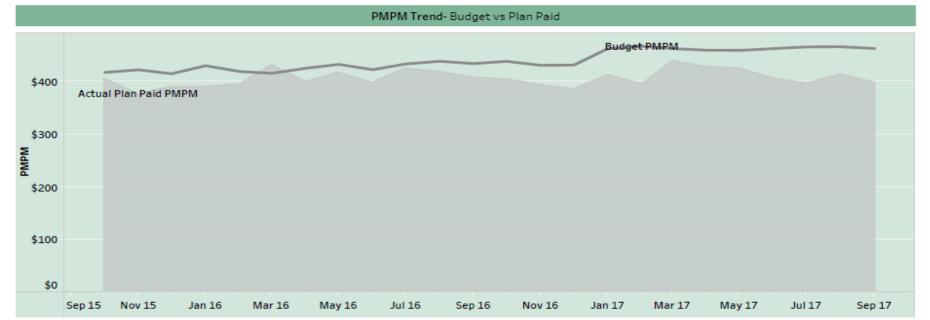
EOCCO Cost and Utilization updates



- Key Indicators Overview -

For Current Period: October 1 2016 - September 30 2017

Cost- PMPM		Utilization- Services/000		Budget- By Rate Group		
Key Indicators	% Change PMPM	Key Indicators	% Change Services/000	Rate Groups	% PMPM Over/Under Budget	% Members
Emergency Department	0.8%	Emergency Department	-1.48%	ACA	-11.0%	32.5%
Primary Care & PCPCH	32.3%	Primary Care & PCPCH	16.82%	TANF/PLMA BCCP/ SNRG	-14.8% 46.2%	9.6%
Specialist	-9.1%	Specialist	-8.76%	ABAD & OOA Medicaid Only		5.3%
Inpatient Non Maternity	-15.7%	Inpatient Non Maternity	-4.17%	ABAD & OOA Duals Child 0-1	0.5% -25.8%	3.4% 3.4%
Pharmacy	1.7%	Pharmacy	1.30%	Child 1-5	-2.0%	13.9%
All Other	1.5%	All Other	10.11%	Child 6-18	-2.0% -7.4%	30.2% 1.7%
Change in Plan Paid PMPM:		Change in Services/000:		% Paid PMPM Over/Under Budget:		jet:
0.9%		7.2%		-10.4%		





- Emergency Department -

For Current Period: October 1 2016 - September 30 2017

Emergency Department Summary Indicators

Change in paid PMPM since prior 12 month period:

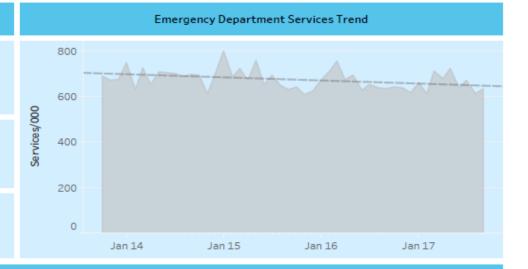
0.8%

Change in Services/000 since prior 12 month period:

-1.5%

Change in total paid since prior 12 month period:

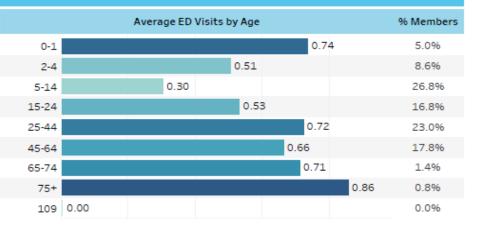
-2.7%



Emergency Department Statistics

	# of Members		% of Me	embers
# of ED Visits	Current	Prior	Current	Prior
0	32,279	33,358	70.3%	70.2%
1	8,228	8,437	17.9%	17.7%
2	2,839	2,945	6.2%	6.2%
3	1,198	1,307	2.6%	2.796
4	583	604	1.3%	1.3%
5-7	542	628	1.2%	1.3%
8-10	136	163	0.3%	0.3%
11-20	72	78	0.296	0.296
21-30	8	9	0.096	0.096
31+	3	7	0.096	0.096
Grand Total	45,887	47,534	100.0%	100.0%

	Current	Prior
PMPM	\$37.15	\$36.85
Services/000	652	662
Total Paid	\$20,454,937	\$21,018,653



<u>Definitions:</u>

*Services are defined as individual claims

*Visits are defined as unique dates of service by member



- Primary Care -

For Current Period: October 1 2016 - September 30 2017

Primary Care Summary Indicators

Change in paid PMPM since prior 12 month period:

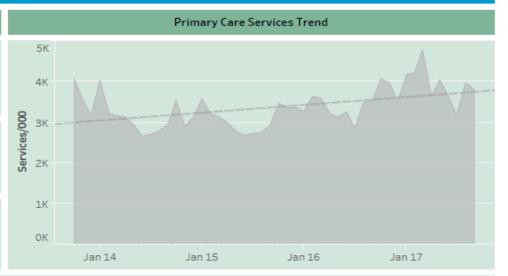
32.3%

Change in Services/000 since prior 12 month period:

16.8%

Change in total paid since prior 12 month period:

27.7%



Primary Care Visits Statistics

	# of Members		% of Me	mbers
# of Primary Care Visits	Current	Prior	Current	Prior
0	16,747	21,265	36.5%	44.7%
1	9,337	8,183	20.3%	17.2%
2	6,105	5,437	13.3%	11.4%
3	4,121	3,801	9.0%	8.0%
4	2,844	2,525	6.2%	5.3%
5-7	4,164	3,872	9.1%	8.1%
8-10	1,544	1,479	3.4%	3.1%
11-15	769	744	1.7%	1.696
16-20	190	169	0.4%	0.496
21-30	64	54	0.196	0.196
31-50	4	5	0.0%	0.096
51+		1		0.096
Grand Total	45,887	47,534	100.0%	100.0%

	Current	Prior
PMPM	\$36.16	\$27.33
Services/000	3,909	3,347
Total Paid	\$19,909,606	\$15,587,576

Average Primary Care Visits by Age Group							
Age Group							
0-1						5.0	
2-4		2.3					
5-14	1.5						
15-24	1.6						
25-44	1.9)					
45-64		2.9					
65-74	2.	.3					
75+	1.8						
109	3	3.0					

Definitions:

*Services are defined as individual claim lines on a claim

*Visits are defined as unique dates of service by member



- Inpatient, Non Maternity -

For Current Period: October 1 2016 - September 30 2017

Inpatient Non Maternity Summary Indicators

Change in paid PMPM since prior 12 month period:

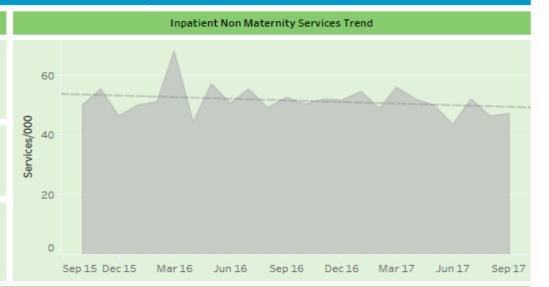
-15.7%

Change in Services/000 since prior 12 month period:

-4.2%

Change in total paid since prior 12 month period:

-18.6%



Inpatient Non Maternity Statistics

Provider Health System	% of Total Paid	Total Paid
St. Alphonsus	17.8%	\$4,795,183
Providence Health and Services WA	8.9%	\$2,406,989
Good Shepherd Medical Center	9.4%	\$2,535,360
OHSU Hospitals and Clinics	14.8%	\$3,981,926
Grande Ronde Hospital	8.5%	\$2,287,767
St. Anthony Hospital	5.5%	\$1,470,117
St Lukes	7.3%	\$1,962,178
St. Charles Health System	5.1%	\$1,366,475
Kadlec Regional Medical Center	7.2%	\$1,934,574
Wallowa Memorial Hospital	2.4%	\$650,990
Top 10 Total	86.9%	\$23,391,558
Grand Total	100.0%	\$26,912,054

	Current	Prior
PMPM	\$48.87	\$57.97
Services/000	50	53
Total Paid	\$26,912,054	\$33,065,079

Top 10 Diagnoses for Inpatient Services			
Diseases of the digestive system	13.6%		
Diseases of the respiratory system	13.196		
Diseases of the circulatory system	11.1%		
Injury, poisoning and other due to external causes	10.2%		
Diseases of musculoskel sys and connective tissue	9.4%		
Certain infectious and parasitic diseases	9.0%		
Endocrine, nutritional and metabolic diseases	6.4%		
Diseases of the genitourinary system	5.5%		
Neoplasms	4.3%		
Symps and abnorm clinical and lab findings, NEC	4.1%		

<u>Definitions:</u>
*Services are defined as individual claims



2018 Incentive Measures



2018 Incentive Measures

Claims Based Measures

- 1. Adolescent Well Care Visits
- 2. Child Immunization Status Combo 2
- 3. Dental Sealants for Children
- 4. Developmental Screening
- 5. ED Utilization
- 6. ED Utilization for Members Experiencing Mental Illness
- 7. Effective Contraceptive Use
- 8. Health Assessments for Children in DHS custody
- 9. SBIRT

Chart Review Measures

- 10. Colorectal Cancer Screening
- 11. Timeliness of Prenatal and Postpartum Care

Clinical Quality Measures

- 12. Depression Screening and Follow-up
- Controlling High Blood Pressure
- 14. Diabetes HbA1c Poor Control
- 15. Cigarette Smoking Prevalence
- 16. Weight Assessment and Counseling for Children and Adolescents

CCO Specific Measures

- 17. PCPCH Enrollment
- 18. Access to Care (CAHPS)

Quality measures in blue are new or modified for 2018 eocco

Clinical Quality Measures

- OHA continues to add clinical quality measures
 - 2013: 3 clinical quality measures
 - 2019: 6 clinical quality measures
- Arcadia Analytics
 - Clinical quality measure tool
 - 9 clinics currently on-boarded
 - Approximately 36% of our patient population



Targeted Efforts for 2018

- Educate clinics on the two new measures and changes to existing measures
 - Weight Assessment and Counseling for Children and Adolescents
 - Emergency Department Utilization for Members Experiencing Mental Illness
- Integrate Alcohol and Drug Screen (SBIRT) into clinic EHRs for 2019
- Increased emphasis on measures that were challenging to meet in 2017
 - Adolescent Well Care
 - Effective Contraceptive Use
 - Diabetes and Hypertension
 - Emergency Department Utilization



2018 Strategies

- Clinic visits
- Reoccurring conference calls with clinic managers
- County level clinic staff meetings
- Provider and county progress reports
- Arcadia
- PreManage



2018 quality pool funds distribution

- Board approved methodology
- Funds will be received 6/30/19

Initiative	Percentage
Quality Bonus Payments	30%
Quality Bonus Payments	30%
Enhanced PCPCH Payments	40%
LCAC Community Benefit Initiatives	6%
Dental Care Organization Distribution	7%
Transformation Grant Community Benefit Initiatives	10%
Other Initiatives	7%
Total	\$11.8 Million (estimated)



Questions?

