

2017

# »» Transformation Center

2017 Annual Report



Oregon  
**Health**  
Authority

HEALTH POLICY AND ANALYTICS DIVISION  
Clinical Services Improvements



# Contents

- » **Executive summary**..... iv
- » **Strategic areas of support** .....1
  - » Primary care .....1
  - » Behavioral health integration.....1
  - » Oral health integration.....3
  - » Value-based payment.....3
  - » Population health.....4
  - » Incentive measure technical assistance.....5
  - » Cross-cutting initiatives.....9

# Executive summary

The Transformation Center is the hub of innovation and quality improvement for Oregon's health system transformation efforts. These efforts aim to achieve better health, better care and lower costs for all. The center identifies, strategically supports and shares innovation at the system, community and practice levels. Through collaboration, the center promotes initiatives to advance the coordinated care model.

In 2017, the center continued to adopt new strategies to advance primary care, behavioral health integration, oral health integration, value-based payment, population health, incentive measure work and other cross-cutting supports. The center delivered more than 80 events, trainings, webinars, and other technical assistance episodes to coordinated care organization (CCO) staff, practice administrators, clinicians and other stakeholders across Oregon. This report briefly describes select initiatives.

# Strategic areas of support

## Primary care

The Patient-Centered Primary Care Home (PCPCH) Program recognizes and verifies clinics applying to become PCPCHs. In 2017, the program released new recognition criteria for offering high-quality, patient-centered care. By the end of 2017, 629 clinics were recognized as PCPCHs. This is approximately three-quarters of all primary care practices in Oregon. Thirty-nine PCPCHs achieved 5 STAR – the highest tier in the PCPCH model. The PCPCH program also provides technical assistance to PCPCH clinics through verification site visits, follow-up and webinars.

Read about the first community mental health program with integrated primary care to be awarded 5 STAR designation: <http://www.oregonhealthstories.com/5-star-award-grants-passs-hillside-clinic/>.

## Behavioral health integration

### Project ECHO

Project ECHO is an evidence-based tele-mentoring program that uses videoconferencing to connect primary care providers with specialty providers. This year the center funded the Oregon Rural-based Practice Research Network to complete a business and financial sustainability plan for a Project ECHO Oregon Hub.

“ I feel more capable of handling mental health and behavioral issues in children, adolescents and families. It’s very reassuring that I’m not alone and have a resource to turn to. ”

– Rural primary care doctor participating in Project ECHO

## Sustaining Integrated Care for Persons with Serious Behavioral Health Conditions

The center partnered with the Patient-Centered Primary Care Institute to hold an event to identify and spread best practices for integrating physical and behavioral health services for persons with serious mental illnesses and substance use disorders. Participants included 124 representatives of physical health, behavioral health and payers. Evaluation respondents said the most helpful aspects were networking and the breakout session on value-based payment models deep dive (both rated 4.6 out of 5).

### Behavioral Health Collaborative Governance and Finance Committee

The center staffs the Behavioral Health Collaborative Governance and Finance Committee, which is developing recommendations and action plans to help the Oregon Health Policy Board implement the Behavioral Health Collaborative's recommendations related to a single point of shared accountability and payment.

### Applied behavioral analysis learning collaborative

The center hosted a webinar to introduce CCOs, educators, Department of Human Services staff and stakeholders to applied behavior analysis, a therapy for children with autism. Nearly 50 people attended.



Participants discuss their work at the Sustaining Integrated Care for Persons with Serious Behavioral Health Conditions event.

“ Best conference I’ve attended in a long time. Great set up and the right people and topics providing ideas and learnings. ”

– Sustaining Integrated Care event participant

## Oral health integration

Based on a previous oral health integration environmental scan and report, the center contracted to develop an oral health communications toolkit. The goal is to increase Oregon Health Plan members' awareness of their dental benefits and the importance of preventive dental care. Messages were tested with members in English and Spanish.

- » Oregon Health Plan dental care brochure:  
[https://aix-xweb1p.state.or.us/es\\_xweb/DHSforms/Served/he7224.pdf](https://aix-xweb1p.state.or.us/es_xweb/DHSforms/Served/he7224.pdf).
- » Oregon Health Plan dental care poster:  
[https://aix-xweb1p.state.or.us/es\\_xweb/DHSforms/Served/he7226.pdf](https://aix-xweb1p.state.or.us/es_xweb/DHSforms/Served/he7226.pdf).

## Value-based payment

### Primary care payment reform collaborative

The Primary Care Payment Reform Collaborative's recommendations to the Oregon Health Policy Board were considered in the development of Senate Bill 934. The bill requires CCOs, the Public Employees' Benefit Board and the Oregon Educators Benefit Board to spend at least 12 percent of total medical expenditures on primary care by Jan. 1, 2023. The center staffs the collaborative, which will continue to provide a forum for sharing and aligning primary care payment reform across Oregon.

### Comprehensive Primary Care Plus (CPC+)

Oregon was selected as a CPC+ region and began implementation Jan. 1, 2017. The Transformation Center manages the Medicaid fee-for-service implementation. Of the 154 Oregon CPC+ practices, 145 have contracts with OHA for Medicaid fee-for-service members. This year 75 practices received per-member, per-month care management fees for a total of more than \$400,000.

The Oregon CPC+ payers contracted with a facilitator to organize monthly meetings for the payers to discuss opportunities to coordinate and align to support the Oregon CPC+ practices.

## Value-based payment roadmap

OHA's 1115 waiver renewal requires that OHA develop a plan describing how the state, CCOs and network providers will achieve a set target of value-based payments (VBPs) by June 30, 2022. The Transformation Center will manage this work, which will result in a final VBP roadmap in October 2018.

## Population health

### Social determinants of health work group

The Transformation Center staffs the new OHA social determinants of health (SDoH) work group. The work group facilitates internal cross-agency coordination within health system transformation. The work group will serve as an advisory body to the OHA leadership for recommending strategies, messages and accountability for addressing SDoH among CCOs and other health system partners.

### Community advisory council support

The Transformation Center continues to provide targeted supports to CCO community advisory councils (CACs) for CAC member recruitment and engagement. This year the center provided:

- » Member engagement webinars for all CAC members on shared decision-making, meetings that work, how to manage conflict in meetings, and peer-delivered services. Fifty-five people engaged in at least one of these webinars.
- » Outreach materials and a best-practices handbook for recruiting and engaging Oregon Health Plan members to CACs: <http://www.oregon.gov/oha/HPA/CSI-TC/Resources/CAC%20Best%20Practices%20for%20OHP%20Members%20Handbook.docx>.
- » Annual CAC leader meeting for CAC leaders to focus on CAC member recruitment and engagement. Seventy-five people attended and 89% of evaluation respondents said the popular education format was valuable for supporting their work.

## Community health assessment (CHA) and community health improvement plan (CHP) curriculum development and trainings

Transformation Center staff partnered with consultants to develop a curriculum for a one-day CHA/CHP development training. The training is intended for CCOs, local public health authorities and hospitals, with potential to also include local mental health authorities. The curriculum is grounded in the Mobilizing for Action through Partnership and Planning framework, with the focus on collaboration for a combined CHA to meet the requirements of all participating organizations.

The new training was delivered to the first CCO late this year. All 13 evaluation respondents rated the training as very valuable and would strongly recommend the training to others. More trainings with other CCOs will follow in 2018. The center also held a CHA/CHP 101 webinar training for new CCO community advisory council members.

“As a result of this training, my organization plans to look for opportunities to coordinate and collaborate, provide resources for the [CHA/CHP] process, and invite community stakeholders to participate.”

– CCO participant in  
CHA/CHP training

## Incentive measure technical assistance

The Oregon Health Authority uses incentive measures to set goals and reward CCOs for improving health care quality and health outcomes of Medicaid members. In 2017, the Transformation Center provided technical assistance to CCOs and clinics on six measures.

## Adolescent well-care visits

The center completed a 10-session webinar series led by the Oregon Pediatric Improvement Partnership for CCOs to learn best practices and share strategies for improving adolescent well-care visits. Fourteen CCOs participated in at least one webinar. Ninety-five percent of evaluation respondents said the content was very valuable or valuable to supporting their work.

Initiated by a CCO request, the Center coordinated a partnership among OHA, CCOs and the Oregon School Activities Association to create a comparison of the adolescent well-care visit and pre-participation physical evaluation (sports physical): [http://www.oregon.gov/oha/PH/HEALTHYPEOPLEFAMILIES/YOUTH/Documents/OHAOSAA\\_WellVisit\\_SportPhys\\_Compare.pdf](http://www.oregon.gov/oha/PH/HEALTHYPEOPLEFAMILIES/YOUTH/Documents/OHAOSAA_WellVisit_SportPhys_Compare.pdf).

## Childhood immunization status

The center contracted with two consultants and partnered with the OHA Public Health Division's Immunization Program to expand a root-cause analysis opportunity that was piloted with one CCO in 2016. Five CCOs completed projects in their communities this year, and five additional CCOs will receive support in 2018.

Learn more about the pilot, which helped Western Oregon Advanced Health increase the percentage of kids getting immunizations on schedule by 14 percentage points: <http://www.oregonhealthstories.com/community-teamwork-results-measurable-increases-childhood-immunizations/>.

## Cigarette smoking prevalence

The center met a need identified by CCOs in the prior year, and worked with a consultant to provide two in-person “Rx for Change” tobacco cessation train-the-trainer sessions for CCOs and clinics, along with a follow-up webinar. Thirty-six people participated in the training and 100 percent of evaluation respondents rated it as valuable or very valuable. The center also provided two webinars focused on smoking cessation treatment for pregnant women and African Americans.

“As a result of this session, my CCO plans to train all our major primary care clinics on cessation best practices.”

– CCO participant in Rx for Change training

## Colorectal cancer screening

The center contracted with the Oregon Rural Practice-based Research Network (ORPRN) to build on support provided in 2016 to increase colorectal cancer screening. This year ORPRN provided tailored technical assistance to nine CCOs and three webinars for all CCOs. An average of 28 people participated in each webinar.

Read about how one CCO increased screening by 9.2 percent: <http://www.oregonhealthstories.com/people-screened-colon-cancer-thanks-easy-home-program/>.

## Effective contraceptive use among women at risk of unintended pregnancy

The center completed a 10-part webinar series for CCOs and clinics working to increase effective contraceptive use (ECU). Every CCO region participated in at least one webinar (average of six webinars per CCO region), and 133 people attended at least one webinar or watched a recording.

CCOs were also offered individual ECU consultations with a subject matter expert. Fourteen CCOs requested this support. Additional support is available for 2018.

“ We knew colorectal cancer screening was important, but I don't think we'd have gone in this direction without having the technical assistance in front of us and consultations to know how to implement it. ”

– CCO health strategy officer

“ The assistance from the Transformation Center to organize and facilitate the root-cause analysis process was critical. [It] really provided the framework for coordinating our efforts and moving the work forward quickly and effectively. ”

– CCO director of quality

## Emergency department use among members with mental illness

This year the center began supporting a new disparity metric focused on emergency department use among members with mental illness. The center held four webinars on metric specifications, how to identify primary drivers of emergency department utilization, examples of multi-system care coordination, and innovations for managing patient pain. An average of 43 people attended each webinar, and 89% of evaluation respondents rated them as valuable or very valuable.

## Innovation Café

The Innovation Café brought together more than 200 Oregon health system transformation champions for peer-to-peer learning and networking. CCO, clinic and other innovative health system leaders presented 30 projects and discussed learnings focused on three CCO incentive metrics:

- » Increasing effective contraceptive use to reduce unintended pregnancy
- » Reducing tobacco prevalence
- » Reducing emergency department use with a focus on behavioral health



Innovation Café participants from across the state share strategies for reducing emergency department use.

“ It was great to hear successes from similar organizations and how they’ve engaged community partners to transform care and achieve outcomes. There’s a lot of great work happening and it’s nice to know no one is tackling it alone. ”

– Innovation Café participant

# Cross-cutting initiatives

## Health equity

In 2016, each CCO received a health equity consultation from Ignatius Bau and was offered 10 hours of follow-up technical assistance. In 2017, the 10 CCOs that requested this additional support completed their hours. Projects included staff health equity training, development of a CCO health equity plan, and strategic planning for reducing health disparities.

Bau summarized the lessons learned in a presentation, webinar and final report:

<https://www.oregon.gov/oha/HPA/CSI-TC/Documents/CCO-Opportunities-to-Advance-Health-Equity.pdf>.

“ We really appreciated OHA’s sponsorship of this TA and Ignatius’ expertise. Thank you again for this opportunity and support in furthering this body of work that our CCO has been struggling with. ”

– CCO participant in health equity technical assistance

## CCO learning collaborative

The center provides support through the statewide CCO learning collaborative. These regular convenings of CCO medical directors and quality managers provide an opportunity to focus on key topics. In 2017, there were four learning collaborative sessions, with an average of 30 participants at each. Topics included applied behavior analysis, emergency department information exchange, trauma-informed care and using data to advance health equity. More than 90% of evaluation respondents rated sessions as valuable for supporting their work.

## Innovations database

The center created a database, data entry process and reporting mechanisms to capture and share data about emerging and tested CCO, system, clinical and other health and health system innovations.

## Council of Clinical Innovators

The third cohort of 12 Clinical Innovation Fellows graduated in June. All evaluation respondents rated the program as very valuable or valuable in supporting their work and their growth as a leader. Every fellow said they would recommend the program to their peers and colleagues. Based on a pre/post skills assessment, the topics with the most improvement included quality improvement, strategic leadership, project development, communicating ideas, the legislative process and the coordinated care model.



2016–17 Clinical Innovation Fellows and Faculty: (left to right) Rick Kincade, Brian Frank, Maggie Bennington-Davis, Chad Partington, Elizur Bello, Kevin Cuccaro, Kelley Burnett, Wil Berry, Jennifer Johnstun, Mimi McDonell, Stuart Bradley, Caryn Mickelson, Shellie Holk, Ron Stock, Charlene McGee and Dan Reece

See the program's impact on projects to curb opioid prescribing and overdose deaths: <http://www.oregonhealthstories.com/oha-clinical-fellows-develop-innovative-life-saving-projects/>.

While the program is not recruiting for new cohorts in 2017 and 2018, the center formed a steering committee of alumni to plan future learning and networking activities.

“ Because of the fellowship, I feel more confident ... engaging team members in transformation projects I feel are important to improving the health of our community. ”

– 2016–2017 Clinical  
Innovation Fellow

## Health-related services

The center coordinates OHA's work on health-related services. Health-related services are non-covered services that are offered as a supplement to covered benefits under Oregon's Medicaid State Plan to improve care delivery and overall member and community health and well-being. This year OHA released a health-related services brief to provide guidance: <http://www.oregon.gov/oha/HPA/CSI-TC/Resources/OHA-Health-Related-Services-Brief.pdf>.

## Early childhood health coordination

In partnership with the Public Health Division, the center supports coordination and integration of efforts across Oregon's health and early learning system transformation. This includes regular communication with the Oregon Department of Education's Early Learning Division and Oregon's Early Learning Hubs, and direct supports to communities. Supports to CCOs include technical assistance on early childhood metrics, shared learning opportunities and other resources to address challenges to cross-sector early childhood collaboration.

## Transformation and Quality Strategy technical assistance

Starting in 2018, the Transformation and Quality Strategy (TQS) will replace the CCO Transformation Plan and Quality Assessment and Performance Improvement deliverables. This streamlined approach aims to move health transformation by providing CCOs an opportunity to internally coordinate and align all of their transformation and quality work. In 2017, the center hosted six webinars for CCO transformation and quality staff to support this transition.

## Report analysis

The center analyzes the reports CCOs are required to submit to OHA. This includes progress reports for the community health improvement plans and transformation plans.



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