Health System Transformation 2014 Mid-Year Performance Report

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Oregon Health Authority accountability

Core Performance Measures

- Included in Oregon's 1115 demonstration waiver - some focus on population health
- There are no financial incentives or penalties associated with them

State Performance Measures

- Annual assessment of statewide performance on 33 measures.
- Financial penalties to the state if quality goals are not achieved.

CCO Incentive Measures

- Annual assessment of CCO performance on 17 measures.
- Quality pool paid to CCOs for performance.
- Compare 2013 performance to 2011 baseline.





2014 Mid-Year Performance Report



- ✓ State and CCO progress is reported for July 1, 2013 through June 30, 2014; compared with calendar 2013 and baseline year 2011.
- No quality pool payments were made based on this data or included in this report.

www.oregon.gov/oha/metrics/



The ACA Medicaid Expansion Fills Current Gaps in Coverage



NOTE: The June 2012 Supreme Court decision in *National Federation of Independent Business v. Sebelius* maintained the Medicaid expansion, but limited the Secretary's authority to enforce it, effectively making the expansion optional for states. 138% FPL = \$15,856 for an individual and \$26,951 for a family of three in 2013.



ACA EXPANSION IN OREGON



Oregon Health Plan: Changing Demographics

The proportion of members ages 19-35 enrolled in Medicaid has increased more than other age groups between December 2013 and October 2014



Oregon Health Plan: Changing Demographics

Despite the influx of new member, the racial/ethnic makeup of Medicaid enrollees has not changed much between December 2013 and October 2014.



Emergency Department Utilization since January 1, 2014

Statewide, new ACA members use emergency rooms less frequently than other members.

Lower is better.

Rates are reported per 1,000 member months

Data source: Administrative (billing) claims

2014 benchmark source: 2013 National Medicaid 90th percentile



See similar pattern for avoidable emergency department visits.



The 2014 mid-year progress

✓ Emergency department utilization decrease by 21%

- ✓ Alcohol or other substance misuse screening(SBIRT) improved for all CCOs
- Electronic health record adoption improved for all CCOs
- ✓ Self-reported adult health status improved



Statewide, emergency department utilization has continued to decline.

(Lower scores are better) Data source: Administrative (billing) claims 2014 benchmark source: 2013 National Medicaid 90th percentile



• ED visits decreased 21 percent since 2011, despite an influx of 20 percent new enrollment from ACA expansion.



Patient-Centered Primary Care Home Enrollment Increased by 55% since 2012



More work is needed...

Child and adolescent access to primary care providers

 Access declined for all age groups at the statewide level (results were not reported at the CCO level).

Initiation and engagement of alcohol or other drug treatment (engagement phase)

✓ Nine of 16 CCOs declined on this measure.

Tobacco use prevalence

 Nine of 16 CCOs declined on this measure, and none have reached the benchmark.



CCO Incentive Metrics for 2015

- Retired: Early elective delivery Follow-after medication for ADHD
- Added: Dental sealants for children Effective contraceptive use among women at risk of unintended pregnancy
- Modified: SBIRT for adolescents Dental health assessments for children in foster care

ChallengeSBIRTpool metrics:Depression screening and follow-upDiabetes HbA1c poor controlDevelopmental screening



Next Progress Report

✓ Will be published late June 2015.

✓ Metrics calculated for calendar year 2014.

✓ Will include calendar year 2014 quality pool distribution.

✓ Will have expanded cost and utilization information.



For More Information

The 2014 Mid-Year Performance Report and all technical specifications are posted online at health.oregon.gov

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