LC 2578 2015 Regular Session 2/12/15 (LHF/ps)

## DRAFT

## SUMMARY

Requires metrics and scoring committee of Oregon Health Authority to adopt at least two outcome and quality measures for oral health care provided by coordinated care organizations.

## A BILL FOR AN ACT

2 Relating to quality measures for oral health care provided by coordinated

3 care organizations; amending ORS 414.638.

## 4 Be It Enacted by the People of the State of Oregon:

5 **SECTION 1.** ORS 414.638 is amended to read:

414.638. (1) There is created a nine-member metrics and scoring committee
appointed by the Director of the Oregon Health Authority. The members of
the committee serve two-year terms and must include:

9 (a) Three members at large;

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10 (b) Three individuals with expertise in health outcomes measures; and

11 (c) Three representatives of coordinated care organizations.

(2) The committee shall use a public process to identify objective outcome 12and quality measures, including measures of outcome and quality for 13 ambulatory care, inpatient care, chemical dependency and mental health 14 treatment, oral health care and all other health services provided by coor-1516 dinated care organizations. Quality measures adopted by the committee must be consistent with existing state and national quality measures. The Oregon 17 Health Authority shall incorporate these measures into coordinated care or-18 ganization contracts to hold the organizations accountable for performance 19 and customer satisfaction requirements. 20

1 (3) The committee must adopt outcome and quality measures annually and 2 adjust the measures to reflect:

(a) The amount of the global budget for a coordinated care organization;
(b) Changes in membership of the organization;

5 (c) The organization's costs for implementing outcome and quality meas-6 ures; and

7 (d) The community health assessment and the costs of the community
8 health assessment conducted by the organization under ORS 414.627.

9 (4) The outcome and quality measures adopted by the committee 10 must include at least two measures for oral health care.

11 [(4)] (5) The authority shall evaluate on a regular and ongoing basis the 12 outcome and quality measures adopted by the committee under this section 13 for members in each coordinated care organization and for members state-14 wide.

[(5)] (6) The authority shall utilize available data systems for reporting
 outcome and quality measures adopted by the committee and take actions to
 eliminate any redundant reporting or reporting of limited value.

[(6)] (7) The authority shall publish the information collected under this section at aggregate levels that do not disclose information otherwise protected by law. The information published must report, by coordinated care organization:

22 (a) Quality measures;

23 (b) Costs;

24 (c) Outcomes; and

(d) Other information, as specified by the contract between the coordinated care organization and the authority, that is necessary for the authority, members and the public to evaluate the value of health services delivered by a coordinated care organization.

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