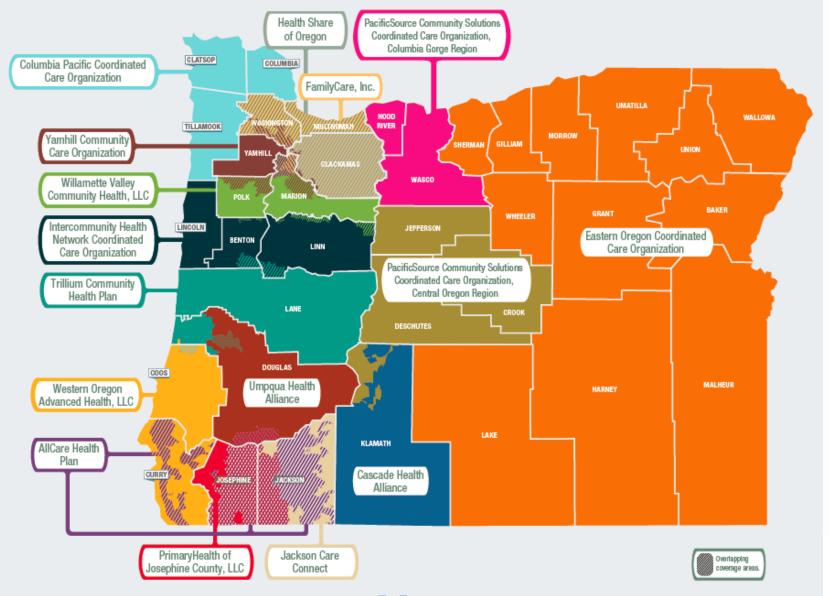
CCOs: Advancing the Triple Aim for Oregonians

Lynne Saxton, Oregon Health Authority Director



Coordinated Care Organization Service Areas





Enrollment by CCO

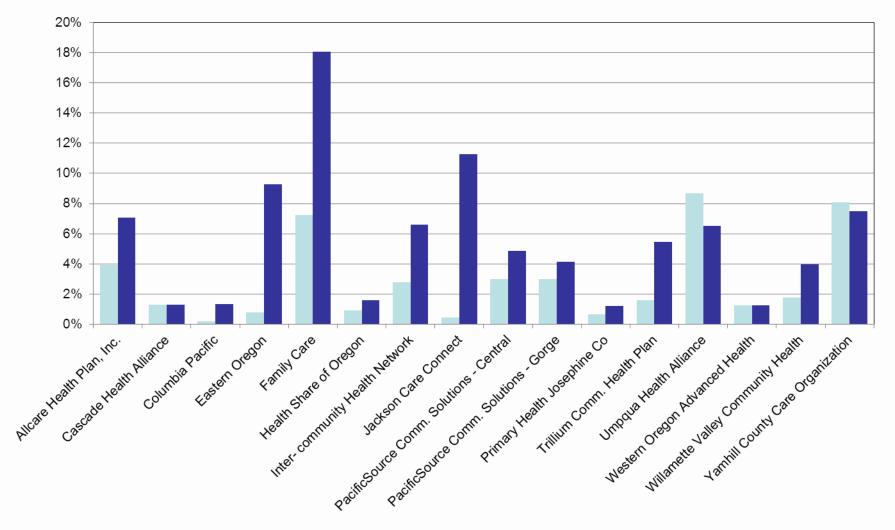
AllCare Health Plan	Cascade Health Alliance	Columbia Pacific CCO	Eastern Oregon CCO
52,288	18,372	28,223	49,275
FamilyCare CCO	Health Share of Oregon	Intercommunity Health Network	Jackson Care Connect
130,088	252,184	59,771	32,248
Pacific Source – Central Oregon	Pacific Source – Columbia Gorge	Primary Health of Josephine County	Trillium Community Health Plan
55,268	13,296	12,049	97,225
Umpqua Health Alliance	Western Oregon Advanced Health	Willamette Valley Community Health	Yamhill Community Care Organization
27,018	21,797	104,063	25,709

Enrollment data as of April 15, 2015:

http://www.oregon.gov/oha/healthplan/DataReportsDocs/April%202015%20Coordinated%20Care%20Service%20Delivery%20by%20County.pdf



Total Margin Percent (after income taxes)

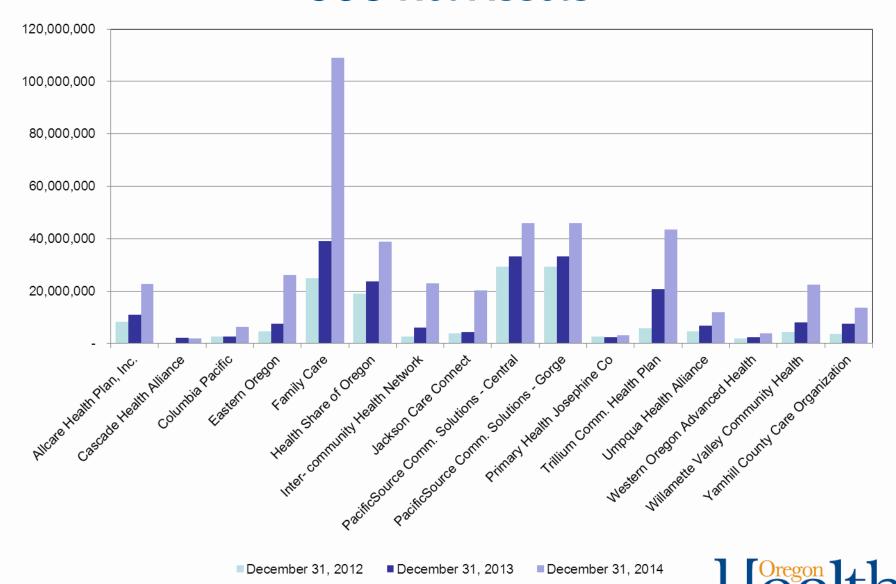


Annual Through December 31, 2013

■ Annual Through December 31, 2014



CCO Net Assets



5

Key CCO successes

- Alternative payment methods (APM)
- Flexible services
- Health information technology (HIT)
- Performance and incentive metrics
- Community Advisory Councils



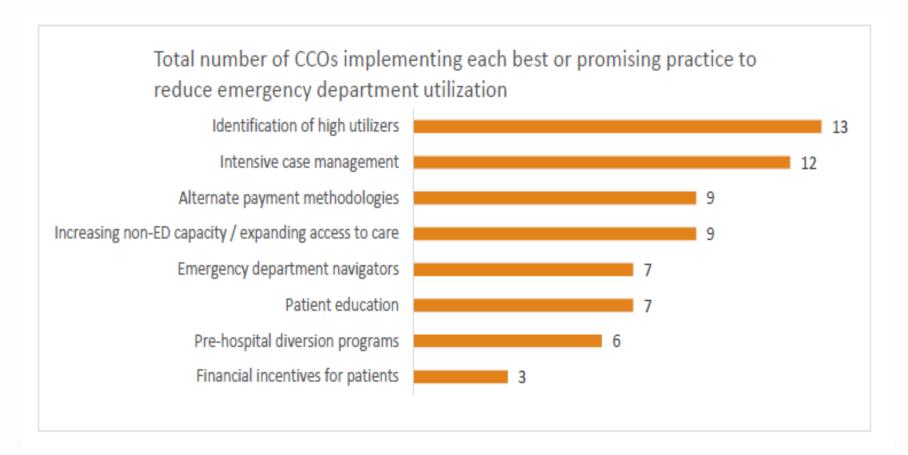
Achieving the Metrics Developmental Screening

Total number of CCOs implementing each best or promising practice to improve developmental screening (n=13)





Achieving the Metrics Emergency Department Utilization





Preliminary outcomes for select Transformation Fund projects

- 59% decrease in emergency room mental health crisis visits (mobile crisis team)
- 18% increase in access to first prenatal visit and 42% decrease in cesarean delivery rate (maternal medical home)
- 317 homeless youth gained access to a direct services, early childhood screenings, and/or a patient-centered primary care home (community health education)
- 15 primary care clinicians expanded their capacity to serve patients with behavioral health issues (Project ECHO)
- 243 meals served; no re-hospitalizations or infections (Meals on Wheels for post-surgical patients)



Community Advisory Councils (CACs)

- All CCOs have functioning CACs
- Community Health Assessment and Community Health Improvement Plans
- CAC representation on CCO Boards
- Some CCOs use the Councils to direct investments
- CCO leadership involvement in the CAC
- CCOs use the Community Health Improvement Plan to direct change and influence innovation
- CACs provide real opportunity for CCO members and community stakeholders to provide
- Assist in the identification of health disparities and strategies to close the gap



Some of the Ongoing Challenges for CCOs

- Expanding and diversifying the provider network
- Sustaining efforts over the long term
- Getting "upstream" at the Social Determinants of Health
- Strengthening the consumer voice via CACs
- Effectively identifying and addressing health disparities
- For real change in the delivery system, payment needs to focus on outcomes at all levels



QUESTIONS

