

The Oregon Health Leadership Council is pleased to report on the progress of our strategic priorities and initiatives. A significant amount of good work is under way across partner organizations. More information is available on our website: www.ORHealthLeadershipCouncil.org. The following goals represent the body of work focused on by our members.

Goal #1: Reduce costs and increase efficiency of administrative processes

ENHANCE ADMINISTRATIVE SIMPLIFICATION

Reduce cost and increase efficiency of administrative processes.

Executive Committee

- Working in collaboration with the Oregon Health Authority to implement the Common Credentialing Solution and Provider Directory. Will engage in efforts to enhance industry adoption.
- The committee is serving as a forum for topics such as CMS requirements for Medicare Advantage plans, EDIE and PreManage, Data aggregation.
- In the process of evaluating and updating the role of the Administrative Simplification Committee.

EDI Workgroup

- A validation process has been developed to confirm that the initiatives arising from the EDI Survey are being implemented. The validation process will be similar in approach to the website benchmarking process that was recently concluded, except that it will be focused on EDI processes.
- The workgroup members have been working on the X.12 comment period for the v.7030 transactions. Washington State's B&T group has generously shared their comments with us and, as appropriate, the two states have the opportunity to be consistent in our comments.
- There is interest in revisiting and improving the Pre-Authorization process in Oregon. The EDI workgroup will defer to the Claims Eligibility workgroup to address the business-related issues first.

Claims Eligibility Workgroup

- Provider representative volunteers will complete the validation process that was developed by the EDI workgroup in the next couple of months. The goal is to improve EDI services for the community leading to lower business costs.
- A team will be formed to review the Pre-Authorization and Pre-Service practices in some detail, including efforts to improve the process in Washington and Oregon.
- The workgroup will continue to work with the OMA to improve the usage and understanding of remittance payment and explanation codes. There is a plan to leverage initiatives in collaboration with the Washington State Business and Technology group.

Goal #2: Improve quality and reduce costs through implementation of evidenced based best practices

REDUCE EMERGENCY DEPARTMENT UTILIZATION

Improve quality and cost markers associated with emergency department utilization.

- There are several EDIE/PreManage community level collaborations underway to coordinate the use of these tools to improve cross organizational care coordination aimed at reducing emergency department utilization.
- The Online Learning Community has continued to expand as a central repository of resources and a venue for peer networking and sharing of information.
- Several organizations have begun to incorporate EDIE utilization data into other data systems to enhance risk identification and population management.
- An EDIE Utility evaluation plan has been developed and approved by EDIE Governance. The evaluation will inform recommendations regarding future structure, financing and program development.

DECREASE OPIOID PRESCRIBING

Support the reduction of opioid prescribing in Oregon.

- The integration of PDMP/EDIE notifications will be launched in 2nd quarter to support reduction of emergency department opioid prescribing.
- EBBP has chartered an Opioid Prescribing Reduction Workgroup. The purpose of the workgroup is to develop policies, procedures and recommendations for payment and benefit methodology that support the reduction of opioid prescribing in Oregon. Efforts will be aligned with other statewide and regional opioid prescribing reduction initiatives.

DEVELOP VALUE PERFORMANCE DATA AND ANALYTICS

Develop methodology and analytics capability to capture and report meaningful performance data across multiple systems and settings

- OHLC in partnership with QCorp is working on a proposal for Total Cost of Care pilot in Oregon based on work Q Corp research work with the Network for Regional Healthcare Improvement (NRHI) to share cost and quality information among five regional health improvement collaboratives. Ideally, this work will lead to cost and quality data sharing among regions in Oregon built on existing total cost of care currently being led through Q Corp and primary group practices across the state.
- OHLC in partnership with Q Corp and Artemis Consulting were chosen by CPC+ payers to facilitate data collection and reporting strategy for the national CPC+ initiative. Ideally, this work will leverage work already in progress regarding metric alignment and alternative payment models for primary care.

Goal #3: Develop and implement strategies for sustainable health care funding

ENSURE MEDICAID SUSTAINABILITY

Continue to synchronize state Medicaid budget strategy, business interests and public transparency initiatives

- The OHLC Board approved initiation and work of a Medicaid Reform Work Group. The recommendations of the work group have been presented to OHLC board, members, advocacy roundtable, CCO leadership, business leaders and legislative leaders. A one page summary of the proposal can be found in this [link](#).

Goal #4: Enhance IT infrastructure to support health care transformation

DEVELOP HIT UTILITY GOVERNANCE MODEL

Accelerate and advance statewide HIT goals.

- The Oregon Health Authority and OHLC have entered into an agreement to formulate a shared governance plan for Oregon Health Information Technology. Sensing sessions have been held with multiple stakeholders to determine the greatest opportunity for a shared “Commons” governance including research from other states. An Interim Governance Committee has been invited to advise on next steps on the partnership model.