

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

- The validation process to confirm the status of issues raised in an earlier OMA+OHLC EDI Survey was completed. The results have been shared with Health Plans with the expectation that they will address the areas that received poor scores. The validation was largely centered on EDI transactions. A similar assessment was done for Health Plan websites that was completed last year with positive results.
- Collaboration with the OMA to improve the use and understanding of remittance advice codes included in EDI transactions. This includes training and discussion of issues related to the subject.
- Workgroup members will share their reviews of the v7030 EDI transactions and identify areas of potential collaboration in the implementation of the upgrade.

Claims Eligibility Workgroup

- Provider representative volunteers completed the EDI Survey validation process.
- We are in the process of reviewing Pre-Service and Pre-Authorization practices in Oregon and Washington State. A team of volunteers will recommend further action (within Oregon state) in the fall.
- The workgroup will continue to work with the OMA to improve the usage and understanding of remittance payment and explanation codes. The EDI workgroup will initiate the process by providing some training to the OMA Practice Roundtable on the use of these codes.

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.

- The Portland Coordinated Care Association (PCCA) is working together with partner health plans and clinics to coordinate efforts, standardize workflows and improve care coordination and communication in addressing high needs, high utilizing patients.
- Many of the Medicaid Dental plans (DCO's) have adopted PreManage and receive notifications about members who have visited the emergency department for non-traumatic dental pain. As a result, they are able to follow-up in a timely manner, provide information and facilitate access to their primary care dental provider.

- The EDIE Utility evaluation is nearing completion. The work has been guided by a steering committee of key stakeholders and is intended to inform recommendations regarding the future EDIE Utility structure, financing and program development.

DECREASE OPIOID PRESCRIBING

Support the reduction of opioid prescribing in Oregon.

- The integration of PDMP/EDIE notifications in hospital emergency departments is underway. Having this information readily available will support reduction in opioid prescribing.
- The EBBP Opioid Prescribing Reduction workgroup has developed recommendations for acute opioid prescribing. These recommendations will be communicated broadly with the goal of aligning payer and health system guidelines related to acute opioid prescribing.

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. This pilot is based on Q Corp research 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. The goal for this will be to leverage work already in progress regarding metric alignment and alternative payment models for primary care. This work has started and progress reports will be provided on a regular basis.

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

- Though significant effort was committed to coordinate Medicaid budget strategies among OHLC members and the business community, OHLC members ultimately decided to conduct legislative input to the budget on their own. The OHLC continues to communicate among members and the business community as directed by the OHLC board.

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 Advisory Committee has been established and is currently reviewing alternative structures to support a OHIT “Commons” utility model. A business plan will be completed for review by the Interim Governance Advisory Committee in August. Following their recommendation, OHLC and OHA will review proposed model with multiple stakeholders for final recommendation planned for November OHLC board meeting.