

# ALTH Q3 Progress Report

September 2018

Creating a nation leading, high-value, and sustainable health care system accessible to all Oregonians

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: <a href="www.orhealthleadershipcouncil.org">www.orhealthleadershipcouncil.org</a>. 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.

- OHLC has been actively working with the OMA and OneHealthPort on multiple initiatives:
  - Review of the new version of Workflow Navigator now renamed Pre-Service Directory. This application enables Health Plans to provide detailed information to providers for proposed or upcoming treatment, including instructions for navigating processes and procedures. This application is currently being implemented in Washington State.
  - Exploring the implementation of multi-factor authentication within Oregon for the OHP single sign-on application. Implementation is planned for early 2019.
- OHLC workgroup will be initiating efforts to improve eligibility reporting. The team may establish a best practice
  for the EDI transactions, among other improvements being considered. Proposed changes to the existing industry
  standard may complicate this effort.

Goal #2: Improve quality and increase value through implementation of evidenced based best practices

## **DECREASE OPIOID PRESCRIBING**

Develop policies, procedures and recommendations that support reduction of opioid prescribing in Oregon.

- EBBP, in partnership with OHA, has developed Acute Opioid Prescribing Guidelines. These guidelines will be broadly disseminated in 4<sup>th</sup> Quarter.
- EBBP has initiated work to develop an Oregon Opioid Health Plan Checklist, modeled on work that was done by the California Health Care Foundation. The goal of this initiative will be to align with the provider community around an agreed upon set of priorities, roles and responsibilities

## **DEVELOP VALUE PERFORMANCE DATA AND ANALYTICS**

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

## **Total Cost of Care**

OHLC has committed to collaborate with QCorp /HealthInsights to support Total Cost of Care for a pilot project to develop a prototype of value-based tools to improve the overall cost and quality of healthcare in Oregon. This initiative has evolved to become the Strategy Partners for Oregon Data Collaborative. The purpose of this work group is to guide the development of Data Collaborative offerings to improve the quality, affordability and transparency of healthcare performance in Oregon.

### CPC+

Provide financial support and strategic input to CPC+ participants

In 2018 the Comprehensive Primary Care Plus (CPC+) Payer Group, convened by OHLC, HealthInsight Oregon and Artemis Consulting, has worked on key initiatives to support CPC+ implementation in Oregon:

- Nine of the 14 payers participating CPC+ have committed to providing data and financial support to share aggregated performance data with CPC+ practices through the Q Corp/HealthInsight practice portal.
- CMS has selected Oregon as a partner region for data aggregation efforts in 2018. This means CMS will provide data and financial contributions to support aggregated reporting.

• The CPC+ Payer Group is working closely with the CPC+ technical assistance team at OHSU to identify ways they collaborate to help practices be successful in CPC+. The payer group is exploring ways to use the OHA CQMR for CPC+ and PreManage to support CPC+ practices.

# 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.

- OHLC will continue to work the Oregon Business Council on the larger Oregon fiscal plan including healthcare.
   Complementary to the fiscal plan, will be emphasis on Oregon's Healthiest State initiative which aligns our healthcare industry commitment to address social determinants of health, and healthy living that ultimately effects the cost of healthcare, especially in communities of social and health disparities.
- Tina Edlund, Health Policy Advisor to Governor Brown is leading the Medicaid Funding work group on Medicaid
  Financing. Several OHLC members are participating. The Work Group has reviewed savings opportunities, highlevel modeling of several potential revenue sources and other state strategies. Research on voter sensitivity to
  alternative solutions has been completed. Both draft recommendations and voter research can be found on OHLC
  web page.

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

### **HIT COMMONS**

Accelerate and advance statewide HIT optimized health care delivery

## **PDMP Gateway Subscription**

- **25 Oregon hospital Emergency Departments** (609 ED prescribers), across Oregon, are LIVE and receiving PDMP data via EDIE. ED physicians report PDMP data pushed to them within their clinical workflow is extremely valuable and results in more informed prescribing practices.
- A total of 2 retail pharmacy chains are live, including Walmart and Providence Retail Pharmacies in Oregon. Two
  HIEs have started integration: CCOs Regional Health Information Collaborative (RHIC) and the Reliance eHealth
  Collaborative (API tested, plan to soft launch September 2018). In addition, Lane County and Rogue Valley
  Physicians integrated prior to the new OHLC implementation process and have added 112 prescribers to the total
  live.
- Fourteen additional entities have requested EHR/PDMP integration and are in process of completing applications.
   All are using vendors that are already integrated with Appriss. The estimated number of prescribers for current applicants only is over 8000, leaving us in a good position to achieve our Year 1 minimum participation threshold (3500).

# EDIE/PreManage

- EDIE/PreManage Information Sharing Resource Guide has been developed to provide guidance towards consistent information sharing to enhance the use of the tools as a community resource.
- POLST information has been integrated in (2) pilot hospitals—plan for spread to other interested organizations
- OHLC is sponsoring an EDIE/PreManage Rural Learning Collaborative in the Dalles on October 19th