



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

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#### **ENHANCE ADMINISTRATIVE SIMPLIFICATION**

*Reduce cost and increase efficiency of administrative processes.*

- Completed the results validation work for the multi-year Eligibility Improvement Project.
- Continue to monitor Advanced EOB and Electronic pre-auth regulations for collaboration opportunities.
- Administrative Simplification has transitioned to meeting on an Ad Hoc basis.

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

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#### **SUPPORT BEST PRACTICE TREATMENT OF SUBSTANCE USE DISORDER**

*Develop, align, and communicate policies and recommendations that support best practice management of substance use disorder*

- Assess adoption of Oregon's Opioid Recommended Practices across health systems and health plans
- Finalize a standard set of ICD-10 codes for MH/SUD reporting
- Support use of Opioid Overdose Notifications via the Collective Platform
- Assist in the adoption and spread of best practice standards of use for PDMP prescriber reports

#### **REDUCE UNNECESSARY OVERUSE OF HEALTH CARE SERVICES**

*Analyze data and develop aligned strategies to reduce potentially unnecessary, low value services*

- Evaluate adoption of Vitamin D Testing Clinical Guideline through statewide and system level data analysis
- Track successful interventions based on the Pre-Operative Testing Recommendations
- In collaboration with OHA, develop open-source Low-Value Care measures

#### **IMPROVE CLINICAL USE OF TELEHEALTH SERVICES**

*Identify, communicate, and support implementation of clinical best practice use of telehealth services*

- Improve telehealth quality and safety by determining and recommending services most appropriate for telephone, video, and/or e-visits.

#### **SUPPORT COMPREHENSIVE PRIMARY CARE (CPC+) INITIATIVE**

*Provide financial support and strategic input to CPC+ participants in Oregon*

- Implement aggregated performance data reporting to support Total Cost of Care strategy, with specific focus on Low Value Care.
- Leverage CPC+ work to inform state-wide Value Based Payment strategy.

### **Goal #3:** Accelerate and advance HIT optimized health care delivery

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#### **HIT COMMONS**

*Provide management services and operational infrastructure to support identified HIT Commons initiatives*

- Obtained HIT Commons Governance approval of guidelines for HIT Commons-based, value-added consulting to members to increase flexibility and allow for cost-effective addition of opt-in initiatives. Present proposed policy to OHLC Board at September meeting.

#### **PRESCRIPTION DRUG MONITORING PROGRAM (PDMP) INTEGRATION**

*Increase the use of PDMP data at the point of care by enabling access to PDMP information within prescriber's and dispensing pharmacist's clinical workflow*

- Promote the adoption and implementation of the PDMP gateway to clinics through cost e-mail campaigns and CCO/DCO sponsored events.

- Developed and began implementation of actions based on findings from November 2020 post-implementation evaluation report.
- Assist in deployment and adoption of Prescriber reports and Organization Management Module to support medical leadership in organizations optimize use of PDMP integration.

## **EMERGENCY DEPARTMENT INFORMATION EXCHANGE**

*Leverage the use of real-time ED and IP utilization information to support efforts aimed at reducing unnecessary emergency department utilization and improving cross-organizational care coordination*

- Community collaboration: Ad-hoc virtual convening continues to support organizations in COVID-19 response. Stakeholder efforts resulted in final 2021-2023 OHA budget to include continued financial support of EDIE/Collective Network.
- Use cases: Statewide COVID-19 positive data and Vaccine Status data being regularly shared from OHA Public Health to EDIE/Collective Platform to support pandemic response.
- Technical infrastructure: Hospital ADT feed review ongoing; tracking SMART on FHIR integration, and other key areas for future support.
- Resources: Developed four new data briefs/toolkits to assist with stakeholder onboarding/use of Collective Platform: <http://www.orhealthleadershipcouncil.org/edie-utility-learning-resources-and-webinars/>
- Data & outcomes: Over 750 connected entities using Collective network, ED utilization trends decreasing as result of pandemic. EDIE Steering monitoring quarterly utilization data as COVID recovery emerges. Additional reporting in development to track behavioral health trends at regional level.

## **Goal #4: Develop, implement, and monitor Community Information Exchange (CIE)**

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### **CONNECT OREGON CIE**

*Continue to build and monitor common, statewide technical infrastructure for social needs screening and referrals among clinical providers and community-based organizations (CBOs)*

- Connect Oregon live in 18 counties in OR/SW WA. 2021 goal is to be live in 21/36 Oregon counties and 400+ community-based organizations (CBOs) onboarded to the network.
- Network statistics show over 4,300 closed loop referrals made and over 3,100 individuals served by Connect Oregon to date.
- OHLC regularly convenes Statewide Funders Advisory Committee (SFAC) to prioritize efforts and track implementation. Assisting with convening of regional governance bodies to support statewide network.

## **Goal #5: Develop and implement strategies for sustainable health care funding**

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### **COST GROWTH TARGET**

*Continue to synchronize statewide healthcare cost sustainability*

- Collaborate with OHA on Cost Growth Target work (SB 889 implementation), specifically co-sponsoring Value Based Payment (VBP) workgroup.
- VBP Work group work beginning. Updates can be found at: [OHLC Value-based Payment Compact](#)