

**Oregon Metrics and Scoring Committee**  
**DRAFT Minutes**  
**August 22, 2012**  
**Clackamas Community College**  
**29353 SW Town Center Loop E**  
**Wilsonville, OR 97070**  
**8:30 – 11:30 a.m.**

Item
<p><b>Welcome and Introductions</b></p> <p>Committee members present: Robert Dannenhoffer, interim Chairperson (by phone), Robert Gillespie, Maggie Bennington-Davis, Bob Joondeph, David Labby, Jeff Luck, Gloria Coronado (by phone), Jeanine Rodriguez, Phil Greenhill.</p> <p>Consultants (by phone): Michael Bailit, Kate Bazinsky (Bailit Health Purchasing); Michelle Mills, Steve Cha, Andy Hackbarth (Centers for Medicare and Medicaid Services - CMS)</p> <p>OHA Staff: Tina Edlund, Chief of Policy; Carole Romm, Accountability and Quality Advisor; Sarah Bartelmann, Project Manager. Tina Edlund welcomed the committee and gave a brief overview of health transformation in Oregon and the development of Coordinated Care Organizations (CCOs), as well as the formation of the Metrics and Scoring Committee. She also introduced the CMS waiver and described how the Committee will work together with CMS.</p> <p>Michelle Mills introduced CMS staff and outlined the key principles of the transformation work. Steve Cha discussed achieving the Triple Aim through changing and improving care delivery, with a focus on quality improvement efforts and quality metrics. She outlined the goal of moving from a payment system based entirely on capitation to one based on both capitation and payment for outcomes, with an expected reduction in capitation payments as payment for outcomes grows. Andy Hackbarth emphasized how the measures can become a feedback mechanism and management system for CCOs, as well as the Oregon Health Authority and CMS.</p>
<p><b>Committee Charter and Overview</b></p> <p>Tina Edlund provided an overview of the charter, as it resides in statute and how the Committee's work ties to other OHA obligations to the federal government around mental health care, requirements outlined in the CMS wavier, etc.</p>
<p><b>Incentive Program Framework</b></p> <p>Michael Bailit provided a frame for what the Committee should take into consideration to establish an incentive pool. A CCO could potentially access the incentive (or quality) pool by meeting certain benchmarks – it is budget neutral and part of the global budget, not a payment made on top of, or in addition to the global budget. Michael gave an overview of the Committee meeting schedule and tasks. He then gave a presentation on the evidence supporting quality-based incentive programs, as they apply to health plans and to providers, and recommendations for program design, performance measures, financing, and implementation.</p> <p>Michael asked that any additional feedback or questions be directed to Tina Edlund.</p>
<p><b>Waiver Requirements</b></p>

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Tina Edlund provided a high-level overview of the waiver and timeline:

- The CMS waiver is a contract with the federal government through which the state has committed to reducing the growth trend in per capita Medicaid spending by 2 percentage points while not degrading quality.
- Oregon has committed to a focus on accountability and quality through several mechanisms: the creation of a 1% capitation withhold for timely and accurate reporting of encounter data; a bonus incentive pool that rewards both absolute and relative performance on quality and outcomes; and through establishing learning collaborative and Innovator Agents.

### **Core Measures**

Carole Romm introduced the principles the external stakeholder group used in evaluating potential measures and the list of all performance measures, examples of access measures, and suggested quality improvement focus areas. She also introduced the core measures matrix and asked the Committee to review this document before the next meeting.

The seven Quality Improvement Focus Areas (PIPs) include:

1. Reducing preventable re-hospitalizations.
2. Addressing population health issues (such as diabetes, hypertension and asthma) within a specific geographic area by harnessing and coordinating a broad set of resources, including community workers, public health services, aligned federal and state programs, etc.
3. Deploying care teams to improve care and reduce preventable or unnecessarily- costly utilization by super-utilizers.
4. Integrating primary care and behavioral health.
5. Ensuring appropriate care is delivered in appropriate settings
6. Improving perinatal and maternity care
7. Improving primary care for all populations through increased adoption of the Patient-Centered Primary Care Home model of care throughout the CCO network.

The list of performance and access measures is attached and the core measures matrix is included in the meeting materials, available online at:

<http://cms.oregon.gov/oha/Documents/MetricsScoringCommitteeMaterials120822.pdf>

### **Next Meeting Agenda**

- Looking at the potential domains from which metrics can be drawn.
- Discussing potential metrics for each domain, including selecting, timing, collection, benchmarks, and data analysis,
- Discussing potential metrics for access.

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**Other Discussion**

- Tina Edlund introduced the Oregon Action Plan for Health document and recommended it to the Committee as background. The Action Plan for Health can be accessed online at: <http://cms.oregon.gov/oha/pages/action-plan/index.aspx>
- Carole Romm introduced the ideal CCO behaviors document drafted in conjunction with the CMS team and asked Committee for feedback. The document is attached below.
- Tina Edlund will send out a list with Committee member contact information.
- All meeting information and documents are publically available and can be shared with stakeholders.

**Public Testimony**

The Committee heard testimony from Richard Katz, Executive Director of the Northwest Rehab Alliance / Care Connections, encouraging the Committee to look at existing national measures, consider focusing on administrative simplification and to consider alternate payment methodologies.

**Adjourn**

**Next Meeting:**

September 11, 2012  
8:30 am – 11:30 am  
Sheraton Airport Hotel