“We focus on the total health of our members, not just traditional health care.”

CareOregon: Healthier as a Whole

Our mission is to cultivate individual well-being and community health through shared learning and innovation. Our vision is healthy communities for all individuals, regardless of income or social circumstances.

CareOregon has been a nonprofit community benefit company since 1994.

Who are we and what do we do?

CareOregon is a nonprofit community benefit company that has been involved in health plan services, reform and innovation since 1994. We serve Oregon Health Plan (Medicaid) and Medicare members and their communities.

We focus on the total health of our members, not just traditional health care. In teaming up with members, their families, providers and communities, CareOregon helps Oregonians live better lives, prevent illness and respond effectively to health issues.

How do we do it?

Through partnerships with four Coordinated Care Organizations, we provide managed care services to approximately 12,600 Medicare members and 200,000 Oregon Health Plan (OHP), or Medicaid, members statewide. Our members are located in the Portland metropolitan area, the northern Willamette Valley, Jackson County, and the northern Oregon coastal counties.

Two of our CCOs are owned by CareOregon: **Jackson Care Connect**, in Jackson County; and **Columbia Pacific CCO**, in Columbia, Tillamook and Clatsop counties.

CareOregon®

CareOregon: Healthier as a Whole *continued*

Health Share of Oregon is made up of four health plans (Kaiser, Providence, Tuality and CareOregon), three local county mental health departments, and nine dental care organizations. CareOregon Inc. provides the majority of managed care services—both physical and dental—for Health Share. This partnership serves Oregon Health Plan members in Multnomah, Clackamas and Washington counties.

Yamhill Community Care Organization, in Yamhill County, is a separate CCO that engages CareOregon Inc. for the majority of its administrative services.

CareOregon Dental, also an LLC of CareOregon, provides dental services to members of both Health Share and Family Care CCOs in the Portland metro region.

The Way to Wellville, is a five-year project supported by CareOregon and Columbia Pacific CCO in Clatsop County. As one of five Way to Wellville projects currently underway in the U.S., it helps promote health improvement in the local communities taking part. Schools, parks and recreation, hospitals, providers, health plans, civic groups, police and fire departments, and private citizens collaborate on programs that improve wellness.

“With the Oregon Health Plan, it’s a hand up, not a hand out.”

What is a Coordinated Care Organization?

In 2012, Oregon Medicaid changed from the managed care model to local Coordinated Care Organizations (CCO). CCOs integrate physical, mental, dental care and addiction treatments under a single umbrella.

CareOregon’s partner CCOs have consistently been among the top performing CCOs for Quality Pool metrics.

By coordinating these services and focusing on prevention and chronic illness management, CCOs provide person-centered care. Utilizing flexible, global budgets they provide medical benefits and flex services with the goal of meeting the Triple Aim of better health, better care and lower costs for the populations they serve.

CCOs are responsible for:

- Integrating physical, mental, dental health and addiction treatment to ensure better care for the whole person.
- Maintaining a Community Care Advisory Council (CAC) made up of at least 50 percent members to advise the staff and board of directors.
- Providing Patient-Centered Primary Care Home (PCPCH) clinics.
- Implementing consistent alternative payment methodologies that align payment with health outcomes.
- Working with their community to implement Community Health Assessments and adopting annual Community Health Improvement Plans.
- Encouraging meaningful use of electronic health records and health information exchange.

CareOregon®

What is a Coordinated Care Organization? *continued*

- Ensuring communications, outreach, member engagement, and services are tailored to cultural, health literacy and linguistic needs.

- Developing and implementing a quality improvement plan focused on eliminating racial, ethnic and linguistic disparities in access, quality of care, experience of care, and outcomes.

Measuring improvement

CCOs must report on a variety of performance metrics each year. CCOs may earn bonus dollars for meeting or exceeding benchmarks for some identified metrics. CareOregon's partner CCOs have consistently been among the top performing CCOs for Quality Pool metrics, which include screenings, health outcomes and pay for performance.

All CareOregon CCOs earned 100% of the Oregon Health Authority payout for 2015.

> When members are sick, we not only help them get better, we help them stay better.

Personalized Health Programs

CareOregon supports members who are at high risk and with complex health conditions by providing coordinated care that takes into consideration past traumas.

We develop partnerships with members based on mutual trust to improve their health.

We focus on each person's psychosocial and care management needs and help members transition from hospital to home. We provide home-based care services, medication management, and develop specialty primary care teams to address needs.

- **Health Resilience** – A team of social workers experienced with mental health and substance abuse develops partnerships based on mutual trust with our sickest members. They address their living conditions, as well as health conditions, to help them transition to overall well-being.
- **Transitions in Care** – Focus on the hospitalized dual-eligible population, working with them before they are discharged to reduce the risk of return.
- **Care Coordination** – Coordination of multi-disciplinary care in all four CCOs for patients with complex medical issues.
- **Palliative Care** – Support for terminally ill cancer patients, reducing hospital and emergency department utilization rates.
- **Spotlight** – Outreach with community support to the 10 percent of Medicare members who have the greatest care utilization.
- **Adverse Childhood Experiences Training and Service** – By partnering with our health plans, we focus on training staff, providers, educators and other community members about the importance of recognizing Adverse Childhood Experiences, or ACEs. Providers practicing Trauma Informed Care take into account the patient's history, and adjust their treatment to support the individual's coping capacity.

careoregon.org

CareOregon®

> Our CCOs provide unique incentive programs to ensure healthy pre- and post-natal care.

Health Innovation

Because we know a person's living conditions and emotional state affect health as much as chronic illnesses, we address social issues such as food and housing.

CareOregon provided more than $7.5 million in grants and charitable giving in 2016.

Our innovative programs offer:

- **Housing with Services** – This multi-organization collaborative provides social and health care services and assistance in 11 low-income housing locations. CareOregon collaborates with the following organizations in this effort:
  - Cedars Sinai
  - Home Forward
  - REACH
  - Harsch Investment Properties
  - Cascadia Behavioral Health
  - Lifeworks
  - Asian Health Center

- **Food Rx** – Outreach projects for those suffering with malnurishment and nutritional issues. We develop solutions and efforts to address nutritional curative practices.

- **Housing is Health** – Donating $4 million in 2016, CareOregon joined with five other health organizations to fund 382 new housing units in response to Portland's homeless crisis. The new units will serve the extremely poor and medically fragile, those suffering with mental illness and substance use disorders and those displaced by gentrification.

- **Pre-Natal Support** – Jackson Care Connect and Columbia Pacific CCOs provide unique incentive programs to encourage members to follow best practices for pre- and post-natal visits. In Jackson County we have a retail "store" where parents can exchange vouchers they've been awarded for healthy actions, for free baby products. Columbia Pacific

CareOregon®

CCO has a similar online program. We also invested $2 million through forgivable loans to a maternal medical home program connecting community, public health, and primary care resources for the Latino population in Portland.

Note: *CareOregon's Community Health Innovation outcomes are being measured independently through a grant from the Abdul Latif Jameel Poverty Action Lab at MIT.*

Community Collaboration

In 2016, our **Community Benefit Program** provided more than 150 community-based organizations with grants, investments and sponsorships to support members throughout our service areas. Grants prioritized housing and ACEs (Adverse Childhood Experiences), as well as core focus areas related to supporting Children's Health Insurance Program goals, addressing social determinants of health, childhood development, and member and community empowerment.

Our **IdeaLab** coordinates innovation efforts and teaches human-centered design principles. The IdeaLab staff works together with members and providers to identify their most important needs. They then build collaborative partnerships to address them. For example, IdeaLab's **LiveWell™** Method is bringing Lean principles to long-term care facilities. Through a state grant CareOregon is creating training programs that help this most challenging component of the health care system improve the quality, satisfaction and experience of care. This "bottom up, top-enabled" method coaches staff in an empowerment approach to teamwork, communication and leadership.

CareOregon's **goMobile** program brings social services out into the community, to where our members are—libraries, homeless shelters, subsidized housing, community centers, even jails. Through our goMobile program we connect individuals to Medicaid, Medicare, SNAP, WIC, housing, primary care appointments and immediate care.

Our Network and Clinical Support team began transitioning from fee-for-service to whole-health funding in 2015.

Network Collaboration

Value-Based Payment is a critical tool in improving health outcomes. At CareOregon, more than half of provider funding is based on strategic projects for medical homes, improving access, high-risk programs, health metrics and panel support.

We're beating the CMS target for value-based payments.

- 65% of our Medicaid payments and 22% of Medicare (57% overall) are in Alternative Payment Models/Population Based Payments, beating the 2018 CMS target.

- We increased our investment in primary care by redirecting 4% of our total spend into primary care over the past two years, investing in integrated behavioral health, quality improvement infrastructure and outcomes, and improvements in access.

CareOregon's Primary Care Investment Fund

CareOregon's current model for investing in its delivery system is project-based funding. To ensure the success of Health System Transformation and support the stability of CareOregon's safety-net based primary care network, there is a need for additional development of primary care infrastructure. This is crucial to supporting population management and whole-person outcomes (including the capacity for oral health and behavioral health). Evolving the current project-based model to one focused on community development, particularly within the primary care network, will result in longer-term, more sustainable outcomes, increased capacity, and stronger delivery system partnerships.

Our Primary Care Investment Fund enhances this platform of technical assistance and support for primary care clinics by providing short- and medium-term loans to build capacity, and to develop processes that support impact investing for other types of funding.

CareOregon®

Network Collaboration *continued*

We have used more than $6 million through a forgivable loan program to invest in primary care infrastructure to improve access, business capacity development, team-based care, and prenatal care. Loans are forgiven based on the system's ability to meet process, outcome, and quality metrics.

Efforts include:

- Strengthening and building leadership at all levels of clinic operation.
- Expanding access through new and more efficient pathways for care.
- Optimizing roles and team functions and operations.
- Enhancing management of higher needs populations.
- Using data to drive high-level performance improvement

Collective decision making and investment

CareOregon works closely with our network providers to learn what support and funding they need, rather than making payment decisions in a vacuum.

- The CCO governance model ensures that every CCO board has representatives from the community and a variety of provider types.
- Each CCO has a Community Advisory Council (CAC), made up of members and others with experience navigating the Oregon Health Plan system.
  - CACs are responsible for overseeing the CCOs' Community Health Improvement Plans and ensuring that they are responsive to their home communities.
- Each CCO also has a Clinical Advisory Panel (CAP), made up of providers across the continuum of care, and providers of each type (physical, behavioral, and oral health).

CareOregon®

Network Collaboration *continued*

- The CAPs help to set the CCOs' clinical strategies and standards of care; they look at cost and utilization data, and ensure that we are targeting our clinical priorities to improve outcomes and cost containment.

▶ Patients have access to high quality primary care through the development of learning collaboratives, workflow development and support, engagement of community health workers, and other programs that support the primary care medical home model.

- Clinics have engaged 10% more members in primary care services in the past two years.

▶ CCOs are responsible for developing better care transitions, by:

- Supporting delivery system partners to develop specialized teams that provide wrap-around services to members with complex health conditions.
- Investing in hospital partners that provide hospital to home transitions support.
- Implementing technology that allows providers to know when their patients are in the hospital and the ER.

Behavioral health integration

In 2015 CareOregon committed technical support and more than $5.5 million to help 41 primary care clinics in the Portland Metro area expand or initiate behavioral health integration in their practices.

An additional $1.5 million supported behavioral health integration in Jackson Care Connect and Columbia Pacific CCO. Jackson Care Connect has now fully integrated mental health with physical health.

This funding supports monitoring, outcomes-focused activities and technical support. We also established a learning collaborative so providers involved in behavioral health integration can share the experiences and lessons learned with others on the same journey.

Trauma-informed care

Throughout CareOregon's service areas, health care providers are now being equipped with the knowledge and tools to treat members who have faced trauma and toxic stress during their formative years.

“Flex services give us the freedom to meet members’ most important needs”

Flexible Services

Our Flexible Services Program was designed to provide health-enhancing services that are not included in the Oregon Health Plan benefits.

Flex services are expected to improve members’ health and reduce the likelihood of costly rehospitalization.

The service needs are assessed by the member’s primary care provider, or another member of the care team, to be beneficial to the member’s physical, emotional, or mental health. These service also are reasonably expected to cut overall costs by reducing the need for expensive acute care services.

To ensure the equity and cost effectiveness of the program, CareOregon reviews and either approves or denies all flex services requests above $50. CareOregon’s clinical care management staff may also advocate for a flexible service on behalf of a member they are assisting.

Flex services may include:

- Stocking the food pantry in a low-income, subsidized apartment building.
- Providing healthy food boxes as part of an educational class on healthy prenatal nutrition; chronic disease self-management course fees.
- Providing 6-8 weeks of nutrient-dense, high-protein meal delivery to patients receiving wound care.

CareOregon®

Flexible Services *continued*

- Purchasing a fan for a patient undergoing chemotherapy and suffering from heat flashes as a result of treatment.
- Buying scales for patients that need to monitor small weight changes to manage congestive heart failure.

Individual Flex Services Case Studies:

Creating a safe environment

After cancer surgery, a member needed to do self-care that required a spotless environment to avoid infection. Because of mental health issues, he had been living in an unclean environment for months and was ashamed to have anyone visit him. A professional cleaning service was paid for under the flex services program. This resulted in a clean environment for caregivers to assist him in taking care of his wound and avoiding harmful and costly infection.

Wounds that haven't healed

CareOregon's FoodRx program provides 6-8 weeks of nutrient-dense, high protein meal delivery to patients receiving care from Central City's wound care clinic. Patients are identified for the food delivery program when they have poorly healing wounds and food insecurity. Many patients in the wound care clinic are homeless. In this case, homeless patients are provided protein-rich bars and shakes as well as vouchers to a café for hot meals. All food delivered or provided by the Food Rx program is part of our Flexible Services Program.

Property debt

On an individual basis, CareOregon may use flexible services to make a down payment on a past debt that is preventing a member from being admitted into subsidized Section 8 housing. This application of flexible services is reserved for members who are utilizing the ER or hospital frequently due to medical conditions exacerbated by homelessness. We also will use flex services to pay housing application fees which can be a barrier to tenancy.

Storage fee

A member who was homeless and had stored her belongings in a storage unit was unable to pay the fee, and the contents were to be auctioned off. Among her belongings were her only mementos of her deceased close family. The impending loss sent her into a suicidal depression. By paying the storage fee, the CCO was able to treat this emotional breakdown and possibly save the member's life.

Flexible Services *continued*

Fan for patient receiving chemotherapy

CareOregon used flex funds to buy a member a fan over the summer. She was going through chemotherapy and radiation treatments, and had recently moved into an upper-story apartment with no air conditioning. On top of the summer heat, her treatments often resulted in her experiencing hot flashes. The fan helped her stay comfortable, especially at night, so she could rest soundly and rebuild energy to be able to go to her treatments every few days.

Scales for patients with congestive heart failure

CareOregon's respiratory therapist uses flex funds to buy scales for patients that need to monitor small weight changes to manage their disease.

Non-covered medications

An elderly woman diagnosed with anorexia and depression wanted to begin eating again after a lengthy treatment and hospitalization. She was prescribed an appetite stimulant, but the medication was not covered by Medicaid. CareOregon paid for the medication at a cost of $36.64, money that the patient didn't have. Her caregiver began giving her the medication and immediately she regained her appetite and began to eat again.

Furniture and heat duct repair

A middle-aged man with type 2 diabetes, had recurrent deep wounds with MRSA infections, neuropathy, and chronic back pain stemming from a serious injury. Before working with a CareOregon case manager, he had nine ER visits in the past year for wound infections. He is wheelchair-bound the majority of the time. His only income is SSI. CareOregon made the following flex fund purchases:

- $20 for a used recliner to make it easier to get up without exacerbating injuries and opening wounds.
- $60 for building supplies to repair a damaged heating duct system.

Refrigeration

Staff received a call from one of our community partners about a CCO partner's member who was taking medication that needed to be refrigerated. He didn't have a working refrigerator, and had tried using an ice chest filled with ice to keep his medicines cool. Sharing the costs with the member and a charitable organization, the CCO was able to help buy a used refrigerator. He was thrilled to get this level of support from his health plan and his health was maintained.