



Health Share of Oregon

March 18, 2015

Health Share of Oregon Comments on SB 440

Members of the Senate Committee on Health Care:

Health Share of Oregon is the state's largest Medicaid coordinated care organization (CCO), serving more than 235,000 Oregon Health Plan (OHP) members in Clackamas, Multnomah, and Washington Counties. Our organization was founded and continues to be governed by eleven familiar health care organizations serving OHP members. While we are highly supportive of the concept proposed by the proponents of SB 440, we are writing to express our concerns with SB 440 as introduced.

***CCO and OHP Representation Should be Proportionate to the State's Interest in Medicaid Relative to Other State Financed Health Care Programs***

SB 440 would eliminate the existing Metrics & Scoring Committee, which identifies performance metrics for CCOs in accordance with Oregon's 1115 Medicaid Demonstration Waiver, and replace it with a new committee that has little CCO or OHP representation. CCOs, unlike other publicly funded health care payers, have a percentage of their budgets withheld every year with the opportunity to earn back that withhold by meeting the metrics identified by the Metrics & Scoring Committee. For 2014, the withhold was substantial -- 3% of CCOs' total budgets. The amount of the withhold is intended to increase annually until it is clear that CCOs are being paid more for outcomes than for volume. CCO metrics are reviewed by the Centers for Medicare & Medicaid Services (CMS) as a part of the State's waiver agreement with the federal government. 25% of all Oregonians are OHP members, and the majority of the State's health spending goes toward Medicaid. For all of these reasons, it is important that the OHP and CCOs have prominent representation on any committee that is charged with identifying CCO metrics.

***CCO Metrics Should Reflect the Needs of the OHP Population***

Health Share supports the intent of this legislation, which is to streamline the many metrics that health care providers are incentivized to meet by various payers. CCOs serve a population that federal policy recognizes as potentially vulnerable to mistreatment by states, and the health care needs of our members are distinct from the needs of the commercially insured. It is important that Oregon does not lose sight of the unique needs of OHP members in this attempt to streamline metrics across payers.

Health Share welcomes the opportunity to work with the proponents of the bill to identify ways to reduce the administrative burden of various metrics programs while maintaining the focus on the OHP that is warranted by the needs of the population we serve and the State's interest in the Medicaid program.

Respectfully submitted by Janet L. Meyer, Chief Executive Officer

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