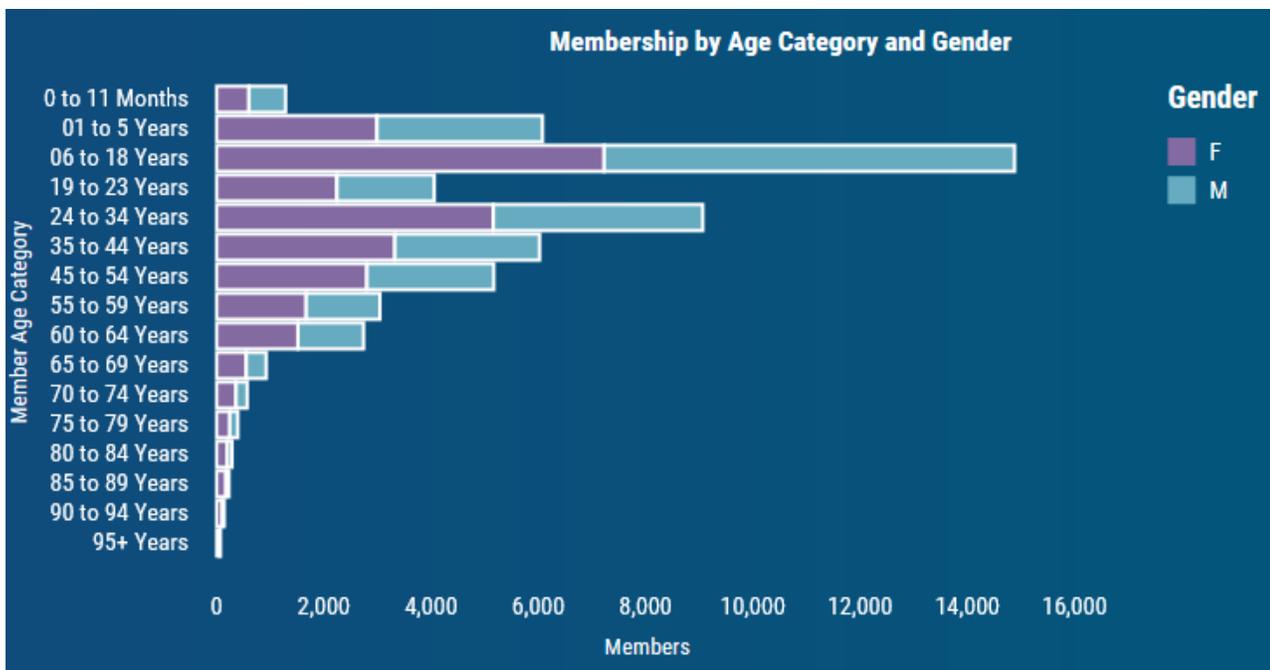


**IHN-CCO
Operations Report
March 2019**

IHN-CCO Total Enrollment

As of May 1, 2019 54,970



Highlights

- Public Health Division is continuing the Smoke free Oregon Winter Cessation Campaign until May 26, 2019. A new addition to the services offered by the Oregon Tobacco Quit Line is an evidence-based series of text messages, Text2Quit, personalized to a participant’s quitting plan.
- State Health Improvement Plan Priorities for 2020-2024 are:
 - Institutional Bias
 - Adversity, trauma, and toxic stress
 - Economic drivers of health (including issues related to housing, living wage, food security, and transportation)

- Access to equitable preventive health care
- Behavioral health (including mental health and substance use)
- Health Plan Pharmacy and Therapeutics Committee March 2019 – Discussion of top drug cost classifications across lines of business; discussion of Oral Contraceptives and move to Tier 1 across plans; discussion of cost-effectiveness of novel agents for cholesterol management (Repatha)
- Health Plan Quality Management Council March 2019 – review and approval of 2019 Medical Management Plan, Retro Prior Authorization Policy;
- Center for Medicare/Medicaid Services (CMS) announced updates to the Hospital Compare and Medicare data websites on Thursday, February 28. CMS Administrator Seema Verma both defended the star ratings and signaled that changes are in the works.
- NCDR (National Cardiovascular Data Registries) Study published Feb 20, 2019 looked at Medicare Advantage patients with Coronary Artery Disease (CAD) versus Medicare Fee for Service showing that more patients received secondary prevention treatments in MA plans (beta blocker; ACE or ARB medications; statins). The research suggested that MA plans may encourage greater uptake of process-based quality measures and will continue to monitor MA plans.
- IHN CCO submitted its response to the RFA for CCO 2.0 on April 18th following the IHN CCO Public Board meeting where the submission was approved.
 - We were the only CCO applying for our three-county area in its entirety
 - The areas of focus in the RFA include:
 - Behavioral Health
 - Cost Sustainability
 - Value Based Payments
 - Health Information Technology
 - Health Equity
 - Social Determinants of Health
 - We have a very collaborative approach that includes many community partners. We will continue to use the Regional Planning Council (RPC) as the leadership group for ensuring we are moving forward with our plan related to CCO 2.0.
 - The OHA has a publication highlighting the transformational activities happening around the state, IHN-CCO was featured in the Spring issue.

Transformation Update

- **2018 CCO Metrics**
 - We need to meet 12/16 metrics plus the Patient Centered Primary Care Home (PCPCH) minimum to receive the total allocated dollars of \$13,065,962.
 - We have met the minimum for PCPCH
 - Here is a summary on the remaining 16 metrics:
 - 8 - we are confident we have met (Developmental screening, ED visits, Colorectal cancer screening, Dental sealants, Depression screening, High blood pressure, Weight assessment, Cigarette smoking)
 - 3 - we are close, but unsure at this time (Effective Contraceptive use, Disparity Emergency Department /Mental Health, Assessments for kids in Department of Human Services custody)
 - 4 - we believe we will not meet (Adolescent Well visits, Timeliness of Prenatal care, Childhood Immunizations, Diabetes Control)
 - 1 - waiting for results from Oregon Health Authority (CAHPS: Access to Care)
 - The DST is in the process of finalizing the request for proposals (RFP) for this year and will be working through the process over the next few months.

Overall utilization:

IHN-CCO Report L6 - Member Service Expenses (Jan-Mar 2019)

