

Built to Lead

2016-2017 ANNUAL REPORT



health

share

Health Share of Oregon

At Health Share, we imagine things others don't, build partnerships others can't, and help each other deliver outcomes that make our members' lives better.

As I reflect on the past year, I'm proud of—and continually impressed by—all the work we've completed together. We successfully collaborated to improve health care for children in foster care, brought together coordinated care organizations from around the state to support one another in creating the best possible community paramedicine programs, and launched the first program in Oregon that provides free legal counsel to low-income people facing health-threatening legal challenges. We created platforms for promoting early life health, are finding new ways to support traditional health workers providing culturally appropriate care to members in need of support, and invested in an innovative new program to fight the opioid epidemic in the Tri-County area.

These are just a few of our accomplishments. I hope you'll be as inspired as I am by how much we've done—together.

This past year also brought uncertainty to the model Medicaid program we've built in Oregon. The potential of federal policy changes and state budget challenges put into perspective how important our work is and reminded us why we begin every morning with a vision of what we want the future to be.

When times are uncertain, or when the stakes are high, organizations tend to hunker down, embracing the status quo. But Health Share was not built to retreat; Health Share was built to lead. Now is the time to push even harder toward better care, smarter spending, and healthier people in our community. Only by continuing our journey of health system transformation will we succeed in ending the cycle of poverty and creating healthy and stable families that will be the foundation of the new economy.

Together with our partners, we will continue to be advocates for progress and pursue the best possible health for everyone.



Janet L. Meyer
Chief Executive Officer | Health Share of Oregon

Leading the way toward a healthier Oregon

As Oregon's largest coordinated care organization, providing health care to more than 200,000 people is a responsibility we take very seriously, and we're hard at work every day to provide high-quality care while reducing costs. Together, through innovative programs, statewide partnerships, and a commitment to health equity for all, we're leading toward better community health.

OUR VISION: A HEALTHY COMMUNITY FOR ALL

Our mission:

We partner with communities to achieve ongoing transformation, health equity, and the best possible health for each individual.

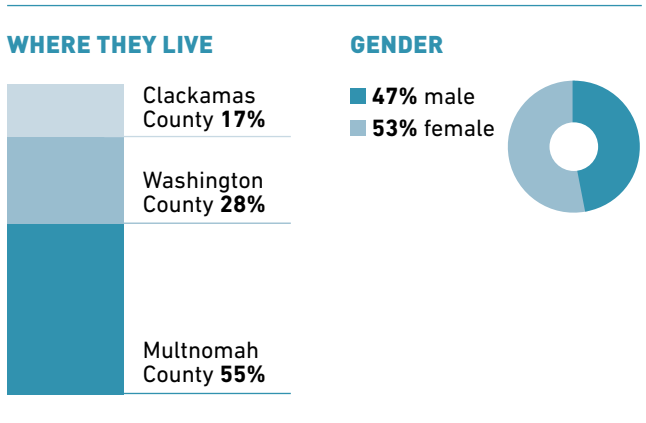
At Health Share, we believe:

- member voice and experience are at the center of what we do
- health equity is achievable and requires deliberate action on our part
- in honoring our commitments
- using continuous improvement is vital to our efforts
- in operating transparently and using data to guide our work
- in working in partnership to maximize our resources



Our members, our community

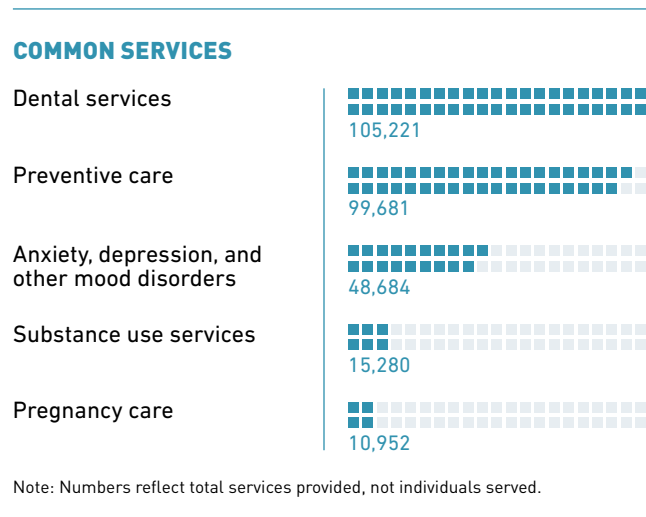
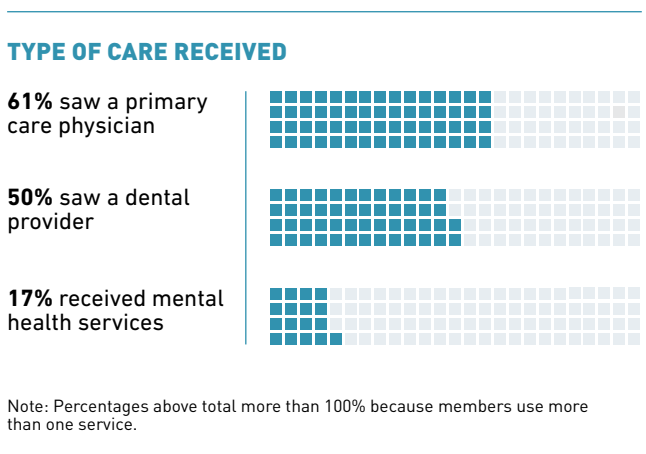
Our 215,000 members reflect the diversity of the communities in Clackamas, Multnomah, and Washington counties. Health Share serves about 12.6 percent of the Tri-County population of 1.7 million.



SERVICE & COVERAGE

215,000	Current members
224,775	Individuals receiving services*
4.2 million	Health services covered*
\$622.3 million	Cost to Health Share*

*From April 2016 to March 2017. Excludes pharmacy and rides to appointments.





PUTTING OUR MEMBERS FIRST

The Health Share member services team is critical to helping members understand their options and connect with the care they need. Here's a peek at how they help:

CALLS ANSWERED IN 2016: 120,964, including 2,505 calls assisted by interpreters in over 30 languages

SPANISH SPEAKERS ON THE TEAM: 4

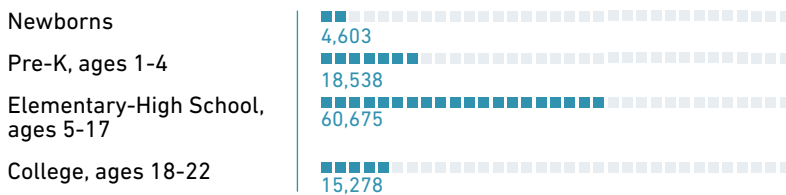
CALLS ANSWERED IN UNDER 30 SECONDS: 80%

TOP 5 REASONS MEMBERS CALL:

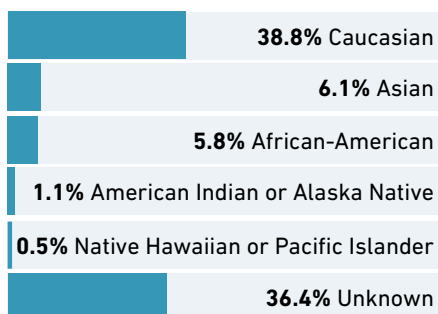
- Plan change requests
- Benefit questions
- Eligibility checks
- Dental health questions
- Renewal questions

YOUTH MEMBERS

44% of Health Share members are between the ages of 0 and 22



RACE



ETHNICITY



LANGUAGES

19% of members speak a language other than English. In fact, our members speak **68 languages**, from Urdu to Croatian.



PROGRAMS LAUNCHED

Innovating & collaborating to put whole health first

TOGETHER WITH OUR PARTNERS

We're innovating and expanding models of care that make it easier for our members to connect with the services they need while providing crucial support outside the doctor's office. These new programs are addressing health from all angles and empowering our members to overcome barriers to wellbeing. The following are examples of how this collaborative effort enables us to maximize resources—resulting in systems improvements across the state and better health for all Oregonians.



In just over 10 months the Medical Legal Partnership served 154 clients with 217 distinct legal issues.

154

MEDICAL LEGAL PARTNERSHIP

Legal aid for patient health

Preventing disease and supporting lifelong health requires more than regular visits to the doctor and dentist. Many of our members also face legal challenges that threaten their health, such as living in substandard housing where housing codes are not enforced.

In August 2016, we kicked off a partnership with OHSU's Richmond Clinic to pilot a one-year **Medical Legal Partnership** program, the first in Oregon. The program provides no-cost legal services onsite at the Richmond Clinic for patients with limited income who are experiencing legal challenges that put their health at risk.

In just over 10 months of operation, the program has served 154 clients with 217 distinct legal issues. In addition to resolving legal problems, clinic staff have reported a marked increase in satisfaction because of the presence of legal aid—patients know they have a trusted resource to help them navigate the legal system and learn their rights.

By the end of 2017, Health Share and OHSU will jointly produce a study on the pilot program. We expect the study to demonstrate the efficacy of the model and serve as a tool for sharing it across our region and the state.

HEALTH SHARE PATHWAYS

Care for recovery, support for a stronger workforce

In July 2016, Health Share and our partners launched **Health Share Pathways** to transform behavioral health services and provide seamless care for our members. Pathways is an integrated, regional behavioral health system that creates a single network for mental health and substance use services with standardized payment, contracting, and credentialing.

Last year we focused on launching the integrated system of care. Now that the system is in place, we're continuing to invest in our members' recovery by making Pathways even better, starting with strengthening the behavioral health workforce. Looking ahead, we'll:

- Advocate for rate parity for substance use providers statewide in order to ensure that members receive the best possible care from the most qualified caregivers
- Fund the Tri-County Behavioral Health Providers Association to host regional trainings available to all contracted providers
- Help members stay connected to treatment and manage transitions in care settings by expanding access to peer recovery mentors, including culturally specific mentors
- Ensure more providers reflect the cultures and languages of our members

COMMUNITY PARAMEDICINE COLLABORATIVE

Joining forces to reduce hospital readmissions

Our **Community Paramedicine** program is designed to reduce avoidable and costly hospital readmissions while making sure patients are receiving the care and support they need after they return home from the hospital. An innovative model of care, it involves paramedics working outside of their customary emergency response and transportation roles by treating patients in their homes. Hospitals identify patients who are at high risk for readmission, and paramedics follow up with them to ensure a successful transition from hospital to home.

The program's potential for success inspired us to initiate a statewide Community Paramedicine Collaborative to

share this pioneering best practice with other CCOs. Currently the collaborative includes seven CCOs. It serves as a point of contact for CCOs developing new community paramedicine programs, provides a formal setting to define and adopt uniform performance measures and data indicators, and allows CCOs and their partners to share best practices and offer technical assistance.

This collaborative effort shows how working in partnership to maximize resources can lead to system improvements in communities across the state—and better health for all Oregonians.



INVESTING IN THE FUTURE

Our path forward

To create ready and resilient communities, we're thinking strategically about the future and investing in innovative models of care that reach our members where and when they need support.

We'll continue investing in programs and partnerships that are consistent with our philosophy of innovating together on behalf of our members' health.

OUR 3-YEAR PRIORITIES

As we develop our new strategic plan, we're focusing on three areas that have the greatest impact on our members' long-term health and wellbeing.

Start strong

- Improve screening of women and children in health care and community settings
- Invest in clinical and community interventions and referral systems
- Improve systems of care for populations with complex needs

Support recovery

- Strengthen the behavioral health workforce
- Strengthen the Substance Use Disorder (SUD) system of care
- Improve the availability of information across care settings

Share health

- Identify and address health and health care disparities faced by our members
- Invest in strategies and tactics to improve health equity

HIGHLIGHT: HELP ME GROW

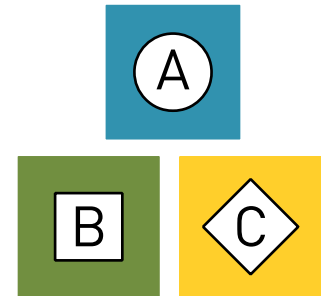
Extra support for at-risk kids

One of Health Share's top goals is to ensure the next generation of Oregonians can grow up to live healthy and productive lives. Health Share, the Early Learning Hubs in our region, and other community partners are working together to implement **Help Me Grow**, a national model that links children at risk for developmental and behavioral issues to high-priority services and resources through a centralized access point. Health Share has invested nearly \$450,000 in this initiative.

In our region, the Help Me Grow team will:

- Conduct outreach to families, community organizations, and health care providers
- Manage a centralized phone line connecting families and clinicians to culturally relevant clinical, educational, and community resources
- Track referrals and close feedback loops with primary care providers
- Provide ongoing data collection and analysis to help identify gaps in resources and barriers to access

Health Share is also partially funding a Help Me Grow liaison in each Early Learning Hub's community who will build connections among early childhood providers and community services, getting people the care they need.



Through Help Me Grow, Health Share has invested nearly \$450,000 to ensure the next generation of Oregonians can grow up to live healthy and productive lives.

\$450,000

HIGHLIGHT: WHEELHOUSE

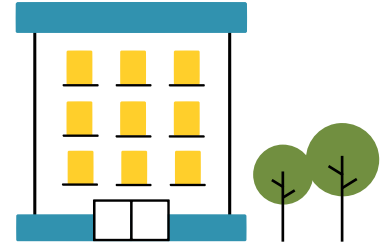
Treating Oregon's opioid epidemic

Misuse of opioids has become an epidemic, leading to addiction and harming health and families. The problem is particularly pronounced in Oregon: We have the second highest rate of prescription opioid misuse in the nation but rank second to last for getting people the care they need.

To help close this gap, Health Share invested \$1.6 million to support the development of a new model of care to treat opioid use disorder in the Tri-County region. Called Wheelhouse, the model will:

- Increase access to Medication-Assisted Treatment by training providers and clinics throughout our community
- Ensure patients can move seamlessly between levels of care without disrupting treatment

Wheelhouse is led by Central City Concern and CODA, who are working together to recruit other providers.



Health Share is investing \$3.3 million toward developing a much-needed community infrastructure to support culturally specific and community-based Community Health Workers.

\$3.3 million

HIGHLIGHT: COMMUNITY HEALTH WORKER INFRASTRUCTURE INVESTMENT

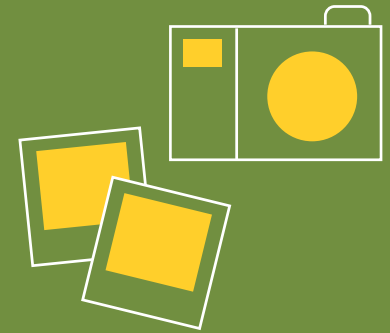
Health by communities, for communities

Community Health Workers provide culturally appropriate health care and services to community members in need of support. They have great potential to assist CCOs and other health systems in addressing the health disparities faced by some of our members. However, without sufficient infrastructure and support, the Community Health Worker workforce is unable to reach its full potential.

In an effort to address this, Health Share is investing \$3.3 million toward developing a much-needed community infrastructure to support culturally specific and community-based Community Health Workers. Health Share's investment focuses on a strategic partnership with the Oregon Community Health Workers Association.

Working together, we're investing in:

- Technical assistance for health plans, systems, governments and other groups wanting to access Community Health Workers.
- Mechanisms to enable health systems to reliably purchase Community Health Worker services
- Information technology platforms to measure outcomes
- Community Health Worker workforce development activities



PHOTOVOICE

In 2016, our Photovoice project broadened awareness of how our members experience intersecting identities such as race, ethnicity, gender identity, and sexual orientation. Participants told their individual health care stories using photography, and the photographs were displayed at a public event and developed into a book. Health Share will use 50 hours of recorded, facilitated dialogue and photography to incorporate participants' voices into the 2018 Community Health Needs Assessment.



LEADING THE WAY

Transforming the conversation

Coordinated Care Organizations exist to transform how we deliver health care to Oregon communities. Since one of every four Oregonians receives health insurance through the Oregon Health Plan, these transformation efforts are crucial to a significant portion of the population—and to the Oregon Health Plan's overall success.

PRESERVING THE OREGON HEALTH PLAN

The Affordable Care Act expanded access to the Oregon Health Plan, Oregon's Medicaid program, and CCOs stepped up to the plate to serve newly eligible Oregonians while building a better health care system. But with state and federal funding in question and Congress threatening to repeal and replace the Affordable Care Act, it is time to roll up our sleeves and fight to continue the legacy of health care innovation in Oregon.

ADVOCATING FOR HEALTHY COMMUNITIES

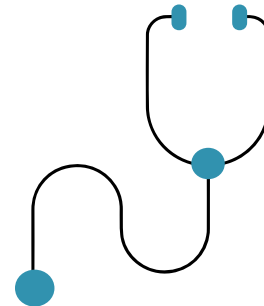
Public policy is foundational to our ability to provide high-quality, cost-effective care to our members. Approximately 75,000 Health Share members are eligible for coverage thanks to the expansion of Medicaid under the Affordable Care Act, and continuing to cover them will not be possible without adequate financial support from federal and state governments.

To advocate for our members and the health and wellbeing of all Oregonians, Health Share has taken an active role in the public dialogue around federal health policy:

- Provided information to Oregon's Congressional Delegation about the impact of legislative proposals on Health Share members
- Organized meetings with members of the Congressional Delegation in their districts
- Participated in Medicaid roundtables organized by Congressman Earl Blumenauer
- Communicated with our members via social media about the potential impact of legislation on their coverage
- Participated in health industry strategy meetings organized by Governor Kate Brown's office

We raised our voice in Salem, too, where potential decreases in revenue and legislative efforts to change CCO contract requirements created uncertainty for the future of the Oregon Health Plan:

- Ensured continued coverage for 1 million Oregonians and expanded coverage to 17,000 undocumented children by:
 - Collaborating with delivery system partners, other CCOs, and health industry leaders to develop and help pass a widely supported Oregon Health Plan budget package that taxes large health care entities—including CCOs—to secure the Oregon Health Plan
 - Leading efforts to reduce proposed cuts to the Oregon Health Plan budget in order to prevent reductions to benefits, eligibility, and provider payments
- Advocated for a version of Rep. Mitch Greenlick's "Future of CCOs" bill, including financial transparency and accountability
- Introduced proactive legislation to improve Oregon Health Plan services for children in foster care



Over the last five years, Oregon's uninsured rate has dropped from 14.7 percent to 5 percent.

5%

Thought leadership

Sharing information, engaging in our community.

The past year generated robust conversations in the world of health care, from the Affordable Care Act to social determinants of health to the opioid crisis. These conversations are at the heart of Health Share's mission, vision, and values, so we fully engaged in them.



2ND ANNUAL HEALTH SHARE TRANSFORMATION ALIGNMENT SUMMIT

We convened 44 partner and community organizations to discuss transformation efforts underway, connect with colleagues, and share best practices.



INVITED TESTIMONY

In April, CEO Janet Meyer, CMO Maggie Bennington-Davis, and Clackamas County Behavioral Health Director Mary Rumbaugh testified before the state Joint Ways and Means Subcommittee on Human Services about the future of behavioral health in Oregon. The testimony focused on Health Share Pathways and our journey to integrate mental health and substance use services within the Tri-County region.

DIGITAL MEDIA CAMPAIGN

Health Share increased its digital media presence over the past year, including a robust online advertising campaign aimed at enrolling members in the Oregon Health Plan.

23 per 1,000

Overall click-through rate
(national average: 8 per 1,000)

63 per 1,000

Facebook ad click-through rate
(national average: 8 per 1,000)

240% increase

Facebook page "likes"

OPINION PIECES AND MEDIA MENTIONS

With the local and national dialogue focused on the future of Medicaid, CEO Janet Meyer wrote and published two op-eds, and we were actively engaged in conversations in the press, with more than 30 media mentions in local and national outlets.

OP-EDS:

- "On Obamacare and Medicaid, let's learn from Oregon and pivot toward what's working," The Hill, January 6, 2017
- "Local actions matter in Oregon health care," The Oregonian, December 18, 2016

SHARING KNOWLEDGE, CONVENING PARTNERS

301

Partner meetings convened

9

Community events and \$22,000 in sponsorships

176

Committees or workgroups that Health Share staff serve on

566

Clinicians trained at Health Share-sponsored learning collaboratives

13

Health Share staff equity trainings



COMMUNITY ADVISORY COUNCIL

Health Share is committed to transparency and accountability to our community. In 2012, we seated our first Community Advisory Council to serve as the primary liaison between Health Share and the public. Over the past year, our Council worked to identify strategies to increase member engagement, strengthen community partnerships, and become a more cohesive body that is responsive to our diverse membership. As part of that process, we seated a new Council. They started meeting in July 2017 and immediately began work on our next Community Health Improvement Plan.



Quality incentive measures

The Oregon Health Authority uses a set of quality measures to determine how successful coordinated care organizations are at improving care, making quality care accessible, and curbing the rising cost of health care for the populations we serve.

In 2016, Health Share of Oregon qualified for 93 percent of the incentive funding for which we were eligible (\$41 million). Each CCO was evaluated in 18 areas. To earn the full incentive payment, a CCO must have met benchmarks or improvement targets for at least 14 of the 18 incentive measures. Here's how we did:

ACHIEVED THE BENCHMARK

Follow-up after hospitalization for mental illness

Alcohol and drug misuse screening (SBIRT)

Screening for clinical depression and follow-up

Cigarette smoking prevalence

Developmental screening

Colorectal cancer screening

Controlling high blood pressure

Patient-Centered Primary Care Home enrollment

Dental sealant

MET THE IMPROVEMENT TARGET

Assessments for children in Department of Human Services custody

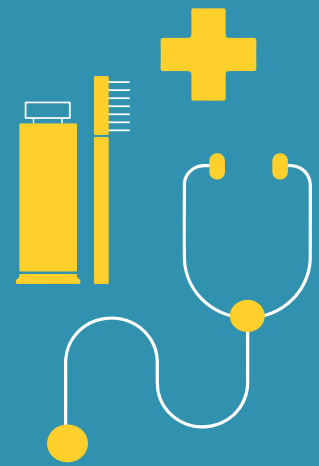
Timeliness of prenatal care

Adolescent well-care visits



Health Share of Oregon qualified for 93% of the incentive funding for which we were eligible.

93%



IMPROVING SCREENING AND ACCESS TO CARE FOR VULNERABLE CHILDREN

In 2017, Health Share transitioned coordination of the Department of Human Services Assessment incentive metric (which tracks physical, dental, and mental health assessments for children in DHS custody) to a newly developed web-based care coordination platform. The Referral Manager platform creates a shared environment for Health Share's 16 health plans to coordinate efforts to schedule and track the required assessments in real time, and also integrates partners from local Child Welfare to assist with any barriers preventing timely care from reaching this vulnerable population. Performance on this measure jumped 10 percent in the first quarter of 2017.



2012-2016 LEADERSHIP HIGHLIGHTS

Five years of transformation

Since launching in 2012, Health Share has been at the helm of an impressive, transformative effort within our health care system. Here's some of what we've accomplished for our members and our community, in collaboration with many partners:

Within the past year



10 PERCENTAGE POINTS

Upped the assessment rate for children entering state custody by 10 percentage points. This involves coordination across all 16 of our plans, the Department of Human Services, and many community providers.

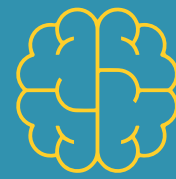


Improved provider access to patient health information with Health Share Bridge, which provides secure access to information that helps coordinate care



NEARLY DOUBLED

Nearly doubled the rate of alcohol and drug screening and brief intervention (SBIRT)



50%

Achieved a nearly 50% increase in the depression screening rate

Long term, continuous improvement



NEARLY DOUBLED

Nearly doubled developmental screening rates since 2013, focusing on reaching families in communities that are less likely to screen their kids

50%

Increased the rate of adolescent well-care visits to almost 50%



\$900

Saved \$900 per patient per month for each member helped through our Tri-County 911 program, which provides intensive support to frequent 911 callers

Transparency for the triple bottom line

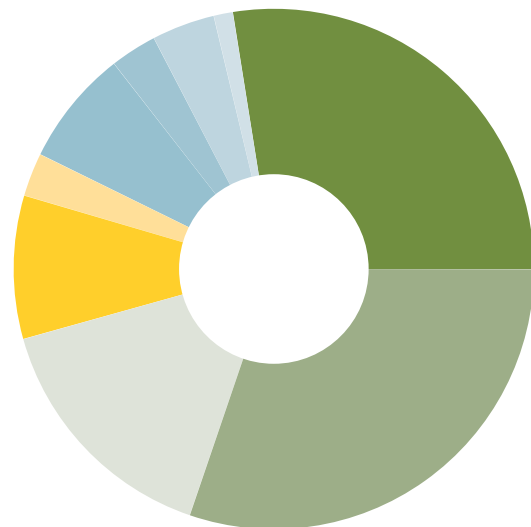
Our work is publicly financed, so transparency and smarter spending are key parts of Health Share's value system.

In 2016, Health Share had a member benefit ratio—the proportion of premium revenue spent on direct services to members—of 91 percent. The 9 percent in administrative costs was spread among administrative allowances built into subcapitation payments to subcontracted health plans, as well as 1 percent for Health Share operations and 0.2 percent for state-imposed financial solvency requirements.

2016 MEMBER BENEFITS RATIO

Member Benefits	91.0%
Health Plan Administration	9.0%
Health Share CCO Operations	1.0%
State Financial Solvency Requirements	0.2%

2016 REVENUE ALLOCATION



- 27.5% Physical health professional services
- 30.3% Hospital services
- 15.4% Pharmacy
- 8.9% Mental health
- 2.7% Substance use disorders
- 7.2% Dental health
- 2.9% Non-emergent medical transportation
- 3.9% Incentive metrics
- 1.2% CCO administration and reserves

Excludes all hospital reimbursement adjustment (HRA) pass-through revenue.

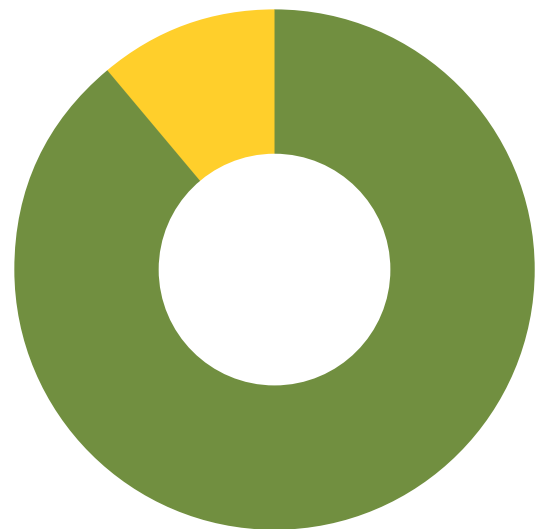
Program Investments & Partnerships

Health Share invested \$5.8 million from 2014 P4P funds in strategic initiatives. Below is a breakdown of how and where those funds have been invested.

Partners and Programs that Received Funds

- 211Info — *Provider line, Help Me Grow*
- Albertina Kerr — *Project ECHO*
- AMR — *Community Paramedic*
- Aspire — *Peers*
- Calcagno Pediatrics — *Foster Care APC*
- Collective Medical Technologies — *PreManage*
- CODA — *Project Nurture*
- DHS — *Medical Liaison*
- Hillsboro Pediatrics — *Foster Care APC*
- IRCO — *Earl Boyles CHW*
- Kaiser — *Foster Care APC*
- Legacy — *Project Nurture, Foster Care APC*
- LifeWorks — *Project Nurture*
- MetroWest — *Community Paramedic*
- Multnomah County — *TC911, Foster Care APC*
- OHSU — *Project ECHO, Project Nurture, Foster Care APC*
- ORCHWA — *CHW Infrastructure*
- PHTech — *Care Coordination Tool*
- PointB — *CHW Infrastructure*
- Problem Gambling Solutions — *Peers*
- Providence — *Project Nurture, Foster Care APC*
- Providence CORE — *Evaluation*
- Providence Swindell's — *Peer Family Navigator, Help Me Grow*
- Reach Out and Read — *ROR*
- Tualatin Valley Fire & Rescue — *Community Paramedic*
- Women's Health Associates — *Integrated BH/ Maternity Care*

2.0 STRATEGIC PLAN FUNDS — \$5,818,280



- **89%** Providers and community partners
- **11%** Regional trainings, CME, collaboratives, and administration

Leading, together

Innovation takes teamwork, and Health Share's success wouldn't be possible without the guidance and collaboration of our dedicated board of directors and partner organizations. Through shared accountability and alignment around a united vision of transformation, we're leading the way toward better care, smarter spending, and healthier people—together.

ERIC HUNTER

Board Chair
CareOregon

MARNI KUYL

Board Secretary
Washington County

ED BLACKBURN

Member Director
Central City Concern

CYREENA BOSTON-ASHBY

Community-at-Large Director
Oregon Public Health Institute

DORANE BROWER

Member Director
Adventist Health

GEORGE BROWN, MD, FACP

Member Director
Legacy Health

TIM FLEISCHMANN

Member Director
Tuality Healthcare

KEITH FORRESTER

Member Director
Kaiser Permanente

JOANNE FULLER

Member Director
Multnomah County

JILL GINSBERG, MD, MPH

Primary Care Director
North by Northeast Community
Health Center

W. GARY HOFFMAN, MD

Specialty Care Director
Women's HealthCare Associates

JOAN KAPOWICH

Member Director
Providence Health & Services

JACQUELINE MERCER

Addictions Treatment Director
Native American Rehabilitation
Association

MARY MONNAT

Mental Health Treatment Director
LifeWorks NW

JEAN-CLAUDE PROVOST, NP

Nurse Practitioner Director
Housecall Providers

DALILA SARABIA

Chair
Community Advisory Council

ELI SCHWARTZ, DDS, MPH

Dental Director
OHSU School of Dentistry

RICHARD SWIFT

Member Director
Clackamas County

MITCH WASDEN

Member Director
Oregon Health & Science University

RAMSAY WEIT

Community-at-Large Director
Retired

OUR FOUNDING PARTNERS: ADVANCING CARE



Adventist Health

At their Diabetes and Endocrine Center, Adventist identifies patients who need more support managing diabetes and pre-diabetes and engages their primary care providers, integrating care and improving outcomes.



CareOregon

Together with providers, CareOregon has better integrated behavioral, physical and dental health. Care now includes innovative substance abuse programs, transitions from hospital to home, trauma-informed care and more.



Central City Concern

Together with partners, Central City Concern expanded recovery options for opioid use disorder. The new Wheelhouse program provides professional medical training to clinics to expand access to medication-assisted treatment.



Clackamas County

Clackamas County hired a new dental navigator to reach patients who weren't aware they had dental coverage and assist members in improving oral and overall health.



Kaiser Permanente

To advance health equity, Kaiser Permanente now includes social, behavioral, and economic needs assessments in members' electronic health records. This reduces health disparities through conversation and recommendations for assistance.



Legacy Health

In January, Legacy Health and partners co-launched the Unity Center for Behavioral Health, an innovative patient-centered care environment for adults and adolescents experiencing a mental or behavioral health crisis.



Multnomah County

Multnomah County and Health Share are continuing the Tri-County 911 program, connecting frequent 911 callers with social services. The program reduces use of emergency services, maintains connection to outpatient care, and lowers costs.



OHSU

OHSU partnered with Health Share to pilot Oregon's first Medical Legal Partnership. It aims to improve the health and wellbeing of vulnerable populations by integrating legal aid into health care.



Providence Health & Services

Providence partners with Health Share in the Community Paramedicine program. Specially trained paramedics act outside their usual role to care for underserved populations in their home or in the community.



Tuality Health Alliance

Tuality invested in a variety of community-based programs: improved literacy through Reach Out & Read, integrated behavioral health in primary care settings, and culturally specific resources through Youth Contact.



Washington County

Washington County opened the Hawthorn Walk-in Center for mental health and addictions care in Hillsboro. The center is open daily, with services provided by LifeWorks Northwest.

“The future is not someplace we
are going, but one we are creating.
The paths to it are not found,
but made...”

— Peter Ellyard



Health Share of Oregon