2022 Quality Pool Distribution Plan

Template

Due: August 29, 2022

Purpose

Exh. B, Pt. 10, Sec. 4, Para. e in the 2022 Coordinated Care Organization (CCO) describes the requirement for each CCO to create a written distribution plan for its Quality Pool and Challenge Pool earnings. The CCO must also make its plan publicly available. The purpose of the plan is to inform the CCO’s Participating Providers, including Social Determinants of Health and Equity (SDOH-E) and public health partners, about CCO strategies and processes for distribution of Quality Pool funds.

2022 is the first year this deliverable has been required. The Oregon Health Authority (OHA) has developed this reporting template to ensure CCOs meet the contract requirements and to give Participating Providers and other interested parties clear and consistent information about CCO strategies for Quality Pool distribution.

Instructions

The CCO must answer all questions in this template to satisfy the contract requirements. Supporting materials and links may be provided, but they must only supplement the answers provided in the template document. A person reading the CCO’s responses provided in this template should have a clear and complete picture of the CCO’s Quality Pool distribution, without reliance on any other sources.

Unless otherwise noted in a specific question, this template pertains only to Quality Pool funds received in 2022 (Distribution Year 2022) for achievement of 2021 incentive metrics (Measurement Year 2021).

All references to “Quality Pool” within this template include both Quality Pool and Challenge Pool earnings.

Process

The CCO must submit the completed template in PDF format to CCO.MCODeliverableReports@dhsoha.state.or.us by August 29, 2022. The CCO must also make the completed template publicly available on its website.

OHA will review the submitted template for completeness. If any response is found to be incomplete, OHA will send a written request for additional information to the CCO contact person listed on the template. The CCO will then have 30 days to provide the requested additional information.

Once OHA approves the submitted template, OHA will notify the CCO via email. OHA will also add a link in the completed template to the CCO’s most recent Exhibit L and send it back to the CCO. CCO should not publicly post its completed template until it receives confirmation from OHA that no additional information is needed.

Questions?

Any questions about the template should be directed to metrics.questions@dhsoha.state.or.us.
1. Provide an overview of the methodology and/or strategy your CCO uses to distribute Quality Pool and Challenge Pool earnings to Participating Providers, including SDOH-E and public health partners.

Health Share's process for distribution of Quality Pool funds is consistent with the CCO Contract and supports the CCO’s Value-Based Payment model by rewarding entities based on their achievement of clear quality improvement expectations as part of a capitated risk arrangement for their assigned members. This aligns with the Oregon Health Authority’s Value-based Roadmap for CCOs for supporting advanced population-based payment models.

Health Share distributes the Quality Pool funds to its subcontractors to align use their funds to support their delivery networks to achieve quality metrics, support clinical transformation, align with Health Share’s commitment to health equity, and to support strategic objectives as identified by the Board of Directors and Community Health Improvement Plan.

Physical health, behavioral health, and oral health are all rewarded for their contributions to achieving metrics. Physical Health will receive the amount of the Quality Pool commensurate to the proportion of the Physical Health revenue for the same calendar year measure period and the remainder of the Quality Pool is allocated to the Behavioral Health and Dental Health Integrated Community Network.

Health Share subcontractors support Participating Providers, including SDOH-E and public health partners, with the quality pool earnings, through a variety of mechanisms, including direct payments to primary care medical homes, specialty care providers, hospitals, community partners, and additional strategies to support member outcomes.

2. Describe your CCO’s process for evaluating the contributions of Participating Providers and connecting those evaluations to distributions of funds.

Health Share and its subcontractors track performance on quality metrics through data sources, monitoring high and low performers, and also using data to identify opportunities for improvement, learning collaboratives, and investment needs. The quality pool is used both to reward providers who achieve metric performance as well as invest in key strategies to support future transformative quality efforts.
3. Does your CCO’s distribution strategy consider payments made previously to Participating Providers (such as up-front funding to a clinic or non-clinical partner that is intended to help the CCO achieve metrics related to the Quality Pool)? If yes, please describe.

Improvement in quality metrics necessitates multiyear strategies. Sustainability investments are critical part of supporting an ongoing quality metric program (e.g. supporting the primary care medical home model) as well as new investments to spearhead pilot or transformational work.

4. Describe how Participating Providers (including SDOH-E and public health partners) may qualify for CCO distribution of Quality Pool earnings.

Health Share subcontractors engage participating providers (including SDOH-e and public health partners) in a variety of ways through the Value-Based Payment programs. Receiving quality pool earnings may be as a bonus for achieving quality metrics or strategic investment for future work. These are specific to each subcontractor and the metric area focus.

5. Describe how your CCO distributed its 2020 Quality Pool (Measurement Year 2020) funds to Participating Providers.

Health Share has a Value-Based Payment model with its subcontractors who then distribute funds to Participating Providers. Oversight of the Quality Pool funding is conducted by the Health Share Quality and Health Outcomes Committee who reviews Health Share overall and subcontractor performance and determines distribution of the Quality Pool. In 2020 Health Share distributed early release funds quickly to subcontractors to respond to the COVID public health emergency, and the remaining quality funds according to CCO policy based on relative contribution to metric success.

6. Describe how your CCO plans to distribute Quality Pool funds in future years (beyond 2021).

Health Share plans on continuing the current Value-Based Payment distribution model with its subcontractors and Participating Providers, including SDOH-E and public health partners. As OHA continues to explore embedding a greater equity focus in the incentive metrics program, Health Share is simultaneously examining opportunities to modify its distribution strategy to further support achieving health equity.

7. Please provide a link to where the 2022 Quality Pool Distribution Plan (this document) will be publicly available on your CCO’s website.

https://www.healthshareoregon.org/providers/provider-resources