



Ready + Resilient

START STRONG | SUPPORT RECOVERY | SHARE HEALTH

2017 – 2020

health
share

Health Share of Oregon

Ready+ Resilient

WITH THE READY + RESILIENT PLAN we are creating a long-term roadmap to support the wellbeing of children, families, and communities through prevention, support for recovery, and focused investment in health equity.



Start Strong

Support Recovery

| STRATEGY | KEY OUTCOMES | STRATEGY | KEY OUTCOMES |
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| Strategy 1 Improve quality and quantity of screening for women and children in health care and community settings. | Percent of PCPCH and women's health care providers administering preventive screening will increase. | Strategy 1 Strengthen the behavioral health (BH) workforce. | The retention rate of staff who work directly with our members will increase. |
| | Racial, linguistic, and cultural disparities in developmental screening will be reduced. | | More providers will reflect the culture and language of our members. |
| | More women will be screened for family planning services and connected to desired services. | | Culturally specific communities will increase their use of behavioral health services. |
| Strategy 2 Build and enhance clinical and community interventions and referral systems. | Community referral systems will be in place to respond to needs identified from screening, including social determinants of health. | Strategy 2 Improve the substance use disorder (SUD) system of care. | Members will be served by providers who endorse and adopt best practice treatment guidelines. |
| | Providers will be better equipped to address the developmental, behavioral, and social needs of the families they serve. | | More members will have access to Medication Assisted Treatment services. |
| | Families with developmental, behavioral, or social resource needs will be able to access community and culturally specific supports. | | Fewer children will enter foster care due to parental substance use. |
| Strategy 3 Improve systems of care for populations with complex needs. | Health Share data analytics and communications will increase partner focus on addressing health disparities. | Strategy 3 Improve the availability of information across care settings. | Pregnant women with SUD will have access to high-quality treatment and maternity care. |
| | Children in foster care will have access to a coordinated system of health assessments and foster care medical homes. | | Providers and health plans will have access to health information and analytics in order to decrease disparities and improve integrated care for members. |
| | Our community will establish regional Collective Impact approaches for kindergarten readiness and foster care. | | Data literacy among behavioral health providers will be improved to positively impact our members. |

Tactics & Metrics

START STRONG: Our goal is that children are ready for kindergarten, and families are connected to the health and social resources they need to thrive.

| TACTIC | METRIC |
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STRATEGY 1: Improve quality and quantity of screening for women and children in health care and community settings.

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| 1A: Expand number of practices using scripts, prompts, and tools to identify the need for contraception, mental health treatment, SUD treatment, oral health, and social resource support. | 1A: A greater percentage of women and children will be served by clinics who use best practices for screening and referral. |
| 1B: Develop and test risk stratification methods for pediatric and maternity care based on behavioral health needs and social determinants of health. | 1B: Identification of and recommendation for promising risk stratification methods will enable provider and payer community to optimize care for their maternity and pediatric populations. |
| 1C: Build the capacity to provide culturally responsive screening practices among providers. | 1C: Developmental screening rates within culturally specific populations will increase. |

STRATEGY 2: Build and enhance clinical and community interventions and referral systems.

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| 2A: Increase capacity for families to access community resources for children with developmental and behavioral needs through training, education, and communication. | 2A: Help Me Grow will be established, functioning, and serve 2,500 families. |
| 2B: Partner with public health and Early Learning Hubs to strengthen their capacity to serve children and families to improve kindergarten readiness with explicit focus on culturally specific communities. | 2B: Each county will have two new partner-led initiatives; targets will be established based on the program. |

STRATEGY 3: Improve systems of care for populations with complex needs.

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| 3A: Use data to identify disparities and inform stakeholders to build a case for response. | 3A: Each plan partner will have a plan and dedicated funding to address identified health disparities. |
| 3B: Improve coordinated care for socially and medically complex populations. | 3B: The number of foster children receiving care at a foster care medical home will double. |
| 3C: Promote regional Collective Impact efforts for foster care and kindergarten readiness. | 3C: Collective Impact groups will be established with clear, shared vision, goals, milestones, and metrics in place. |

SUPPORT RECOVERY: Our goal is that people are able to access quality mental health and substance use services delivered by a trauma-informed workforce when and where they need them.

| TACTIC | METRIC |
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STRATEGY 1: Strengthen the behavioral health workforce.

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| 1A: Stabilize the existing BH workforce through policy and rate parity, with integrated administrative processes. | 1A: Mental health and SUD fee schedules at the OHA level will have parity. 1A2: Productivity for the BH workforce will be improved through decreased administrative burdens for providers. |
| 1B: Expand and improve cultural specificity and responsiveness in the BH workforce. | 1B: Access and engagement of individuals of color and non-English speaking members will increase. |

STRATEGY 2: Improve the substance use disorder system of care.

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| 2A: Promote best practice treatment guidelines and recovery oriented system of care including culturally and linguistically appropriate care. | 2A: The number of providers who have adopted best practice treatment guidelines will increase; 50 percent of members served will receive services at those organizations. |
| 2B: Improve care transitions for people with substance use disorders. | 2B: Follow-up within 7 days following detox or ED visits for individuals with SUD will increase by 10 percent. |
| 2C: Create centers of excellence for critical populations. | 2C: Access to suboxone treatment through primary care and maternity providers for individuals with opioid use disorder will increase. |

STRATEGY 3: Improve the availability of information across care settings.

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| 3A: Promote the exchange of health information. | 3A: Percentage of members served by BH providers connected to a health information exchange will increase. |
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