

OREGON CPC+ HIGHLIGHTS

2017-2018

Comprehensive Primary Care Plus (CPC+) is a federal initiative that seeks to strengthen primary care through care delivery transformation and multi-payer payment reform. Oregon was one of 18 regions selected by the Centers for Medicare & Medicaid Services (CMS) to join the program, which began in 2017. CPC+ builds upon the Comprehensive Primary Care Initiative (CPCI, or CPC Classic), in which Oregon participated. CPC+ is consistent with many of Oregon’s innovations, which include delivery system transformation, investment in primary care and an emphasis on value-based payment models.

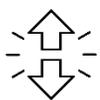
Participating Oregon payers meet monthly to identify areas for alignment and learn from one another. Together, they created a roadmap with goals and milestones, guiding their efforts for the duration of the program.

CARE DELIVERY TRANSFORMATION SUPPORTED BY NEW PAYMENT MODELS

The CPC+ initiative supports practices to develop comprehensive primary care capabilities through innovative payment models.

CPC+ payments from CMS include performance-based incentive payments (PBIPs) based on clinical quality measures, patient experience scores, and utilization metrics. The payment model also includes care management fees and an alternative to fee-for-service payments. Oregon payers participating in CPC+ seek to offer similar payments and align with CMS where possible.

To meet the requirements of CPC+, participating practices enhance their care in the following domains: access and continuity, care management, comprehensiveness and coordination, patient and caregiver engagement and planned care and population health. Oregon practices have made these improvements:



Risk stratification (identifying patients who need more care to prevent poor outcomes) increased from 69% to 93% of Oregonians seen in a CPC+ practice.



Collecting patient feedback from Patient and Family Advisory Councils has nearly tripled across CPC+ practices from 33% to 95%.



90% of patients with 3+ chronic conditions received education and support to increase their skills and confidence in managing their care.

Oregon CPC+ By the Numbers

14 payers	More participating payers than any other CPC+ region
Over 150 practices	<ul style="list-style-type: none"> • 34 independent practices • 117 practices housed within 19 health systems • 38 rural practices • 118 urban practices
62 returning practices	Participated in CPC Classic from 2012-2016
1,158	Practitioners
118,982	Medicare FFS beneficiaries
Over 500,000	Commercial, Medicaid, and Medicare Advantage members
More than \$93 million	Invested in value-based payments by CMS and Oregon payers
Over 18,000 hours	Staff time by Oregon payers to implement CPC+ payment models, including multi-payer group meetings and investment in changing operations and infrastructure that can be leveraged for other value-based models
More than 1,200 participants at four in-person learning sessions	Other technical assistance to practices includes: <ul style="list-style-type: none"> • Thousands of emails • Over 800 calls • Over 50 site visits

CPC+ PAYER GROUP ACTIVITIES



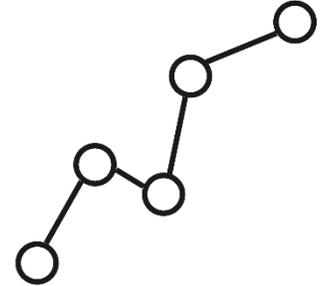
Alignment discussions underway include CPC+ payment approach focused on attribution, payment documentation to practices, and quality measure alignment.



The Payer Group is working to evaluate the impact and **return on investment** of CPC+, leveraging other evaluation efforts and sharing results with local stakeholders.

Selection of **HealthInsight as the CPC+ data aggregator** for Oregon.

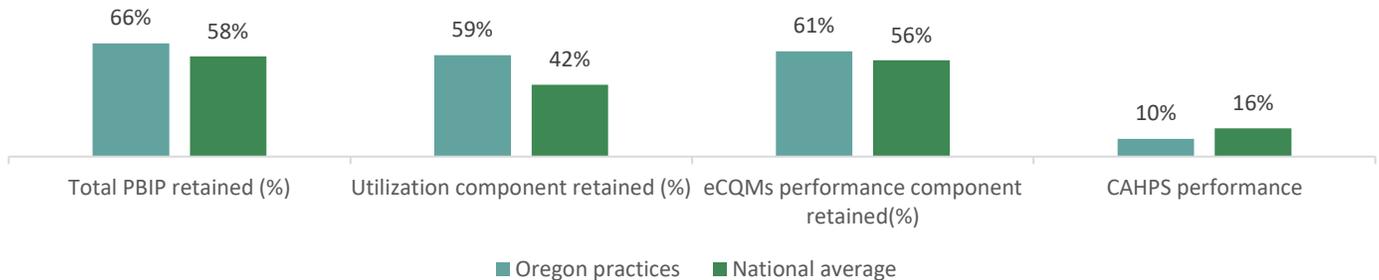
- The investment from CMS and CPC+ Payers supports expanded outreach and technical assistance to CPC+ practices to help them access and use the portal, which provides aggregated claims data reports.
- These resources also will fund expanded functionality, including four new expenditure measures to help practices better understand and address costs associated with their patients. This additional information about inpatient, outpatient, specialty and total expenditures will give practices increased visibility into cost drivers.
- The Reporting Portal contains over 50 quality and utilization measures that includes claims data from eleven payers, including commercial health plans, Medicaid and Medicare.
- 145 CPC+ practices have accessed the portal. HealthInsight is working with CPC+ practices to understand how they specifically are using the aggregated claims measures to track overall clinic performance.



OREGON PRACTICE HIGHLIGHTS

Data from CMS show that for Medicare, Oregon practices are earning additional dollars due to lower utilization and better clinical quality measure scores. Both Oregon and national practices need continued focus on CAHPS performance.

Comparison of Oregon and National 2017 Incentive Payments



The Oregon region retained **\$1,294,373** in PBIP funds. Nationally, only 14 practices retained their full PBIP—two of those practices were from Oregon.

This document contains information from the following CPC+ Payers:

AllCare CareOregon Moda/Eastern Oregon CCO Oregon Health Authority PacificSource Health Plans	Primary Health Providence Health Plan and Providence Health Assurance Trillium Community Health Willamette Valley Community Health	Yamhill CCO Centers for Medicare & Medicaid Services Additional participating CPC+ Payers: Advanced Health, InterCommunity Health Network and UnitedHealthcare
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The CPC+ Payer Group is convened and coordinated by Artemis Consulting, HealthInsight Oregon and the Oregon Health Leadership Council. Questions about the group's activities may be directed to:

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