

2024 Quality Pool Distribution Plan Template

Due: October 9, 2024

Purpose

Exh. B, Pt. 10, Sec. 4, Para. e in the 2024 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.

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 2024 (Distribution Year 2024) for achievement of 2023 incentive metrics (Measurement Year 2023).

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

Process

The completed Quality Pool Distribution Plan template is due to OHA via the CCO Contract Deliverables [Portal](#) by October 9, 2024. (The submitter must have an OHA account to access the portal). 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 notify the CCO via the portal. The CCO will then have 30 days to provide the requested additional information. The 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@odhsoha.oregon.gov.

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CCO Name: Umpqua Health Alliance, LLC

Contract Number: 161767

CCO Contact Person (name and email): Keith Lowther, CFO | klowther@umpquahealth.com

- 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.**

Umpqua Health Alliance (UHA) has a robust Quality Team whose primary focus is the OHA Quality Incentive Metrics. This team works to develop tools for the staff and provider community to utilize and measure their progress throughout the year regarding the CCO Quality Incentive Metrics. The UHA teams meet with the provider community not less than quarterly to go over the current scorecards, analyze and communicate where gaps are being seen, and discuss strategies to improve quality outcomes for the annual CCO Quality Incentive Metrics.

UHA and its provider community are committed to excellence regardless of the barriers they may encounter. To ensure our provider community is supported financially, UHA budgets fixed amounts for its Value-Based Payment (VBP) quality incentive programs based on expected Quality Pool earnings from OHA. These budgeted amounts include performance on the CCO Quality Incentive Metrics for participating Primary Care, Dental, Mental Health and SUD providers and contractually set Targeted Metrics for specific provider contracts aimed at improving quality in identified focus areas. UHA uses this approach as it recognized the importance of having all provider types participate in quality outcomes and making available Quality Incentives to a larger subset of its provider community would return better outcomes for the community.

Funds distributed to providers through the UHA payment methodology are derived from the Quality Pool funds UHA receives from the OHA. OHA distributes funds to UHA based on the total number of incentive measure improvement targets the CCO meets or exceeds.

Challenge Pool earnings are considered separately. If the total quality metrics earnings fail to cover the budgeted incentive amounts for the Quality Metrics, Targeted Metrics and PCPCH, any challenge pool funds earned will go to covering the shortfall. If additional challenge pool funds exceed the budgeted incentive amounts, the UHA Executive Committee will determine the allocation of the funds and has historically allocated those funds to the provider community.

The 2023 Primary Care VBP Quality Incentive Program follows the payout methodology outlined in the table below based on performance towards all CCO Quality Incentive Metrics. Other provider types (i.e. Dental, SUD, and BH) receive a Quality Incentive Program distribution based on performance on a subset of CCO Quality Incentive Metrics. Additional payments are made to providers who contribute to gap closure on a given CCO Quality Incentive Metric measure for

example, the Assessments for Children in DHS Custody measure.

[illegible]

Lastly, the services rendered by public health partners are delivered through a contracted FQHC. As a result, those services and related incentives are allocated in the FQHC's 2023 Primary Care VBP Quality Incentive Program payment. UHA has an additional agreement established with its local Public Health Department that allocates quality pool dollars for achieving specific milestones and metric performance on a subset of the CCO Quality Incentive Metrics.

UHA's robust CCO Metrics Manager tool has been widely accepted by PCPs to access through a secure provider portal, Umpqua Health Business Intelligence (UHBI). PCPs view their attainment of overall or individual quality metrics that are updated daily through claims data and EMR connectors. This tool identifies member level gaps, and gaps to target for each metric. PCPs can

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search for assigned members by name to identify members that may be on the provider's schedule. They can sort number of outstanding gaps and proactively schedule members to close multiple gaps in a single visit. Additionally, UHA sends out monthly gap lists to each participating provider. UHA uses the results of the CCO Metrics Manager tool to determine final attainment of CCO Quality Incentive Metrics at the provider level and prepare distributions based off the year-end results for the 2023 Primary Care VBP Quality Incentive Program.

For the 2023 VBP Targeted Measures, UHA's Decision Support Department uses claims data and other source data as applicable to monitor and measure final performance results. UHA distributes monthly performance updates to these providers if requested and meets with some of the provider groups monthly to review performance. Participating providers may qualify for the distribution of CCO quality pool earnings by either being assigned a member panel or by contractually agreeing to targeted metrics. UHA has provided incentive funds to non-PCPs such as emergency department provider groups, hospitals, hospitalists, behavioral health providers, dental care organizations, and organizations that focus on child abuse and neglect services.

- 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.**

No.

- 4. Describe any changes your CCO plans to make to its process for distributing Quality Pool funds in future years (beyond MY2023).**

UHA is continuously working to improve the CCO Quality Incentive Metrics and associated Quality Pool payouts for providers who demonstrate measurable improvements, but we do not anticipate any significant changes to UHA's Quality Pool distribution methodology in 2025.

- 5. Please provide a link to where the 2024 Quality Pool Distribution Plan (this document) will be publicly available on your CCO's website.**

<https://www.umpquahealth.com/provider-forms/>