Developing a Model for a Coordinated Care Organization (2011)

The Client:
Oregon Health Leadership Council, Portland, Oregon

The Challenge:
A plan was needed to develop a Coordinated Care Organization (CCO) that would involve all providers serving the Medicaid population in the region around Portland, as required by the Oregon legislature.

The Approach:
In 2011, HMA was engaged by the Oregon Health Leadership Council (OHLC) to develop an integrated delivery model and a creative financing strategy to respond to the State of Oregon’s mandate for the establishment of CCOs to assume responsibility for the Medicaid population. HMA worked with the leadership of OHLC—the CEOs of the region’s health systems and health plans—to:

1. complete an assessment of the health status and utilization patterns of the target population;
2. determine the various roles of critical providers that served the Medicaid and uninsured populations in the area—including three county health departments delivering mental health services, a diverse group of FQHCs, all five of the major health systems and several free-standing physician groups;
3. develop a model of care utilizing all providers in an integrated system;
4. recommend a creative financial model that identified new revenues to offset imminent budget cuts and demonstrated long term sustainability, building upon delivery system changes;
5. identify options for relationships between the new integrated delivery system and managed care plans; and
6. determine priorities for infrastructure development, care management and information technology.

The report was developed through regular interaction with the steering group of system CEOs, augmented by key stakeholders from the counties, the state, private physicians, and FQHCs. The plan was unanimously endorsed by the OHLC Board of Directors.

The Results:
The plan was the basis for what became the Health Share CCO, one of the most successful CCOs in the state.

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