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LOCAL FINANCING INNOVATIONS

YAMHILL COMMUNITY CARE ORGANIZATION (OREGON)

Sites have a track record of innovation in their communities that predates their involvement with Bridging for Health: Improving Community Health Through Innovations in Financing, sponsored by the Robert Wood Johnson Foundation. This series allows site leaders to reflect on innovations aimed at financing improvements in population health already underway in their communities. This reflection of ongoing work can serve to possibly reinvigorate existing efforts (e.g., expand scope or partners) or inspire others interested in spreading such innovations to other communities.

In asking communities to think about their existing innovative work at creating health system change, the Georgia Health Policy Center facilitators established the following criteria to select relevant efforts. Innovations highlighted in this series address upstream drivers of health, do not solely rely upon grants, involve multisector partners, and maintain a long-term focus, rather than fixing an immediate community need.

Family CORE Home Visitor Network

YCCO is the only community care organization in the state to be awarded an Early Learning Hub by the Oregon Department of Education's Early Learning Division. Embedding an Early Learning Hub in a community care organization enables a holistic system of care to improve the health and education of children through collaboration between medical providers, social service providers, early learning providers, and school districts.



Because the first 1,000 days of life are key for childhood social, physical, and academic development, the Family Coordinated (Age) 0-5 Referral Exchange (CORE) and the home visiting network, within YCCO's Early Learning Hub, provide early parenting supports and effective service coordination for children 0 to 5 years old in Yamhill County, especially high-risk and underserved populations.

The Family CORE is a multi-disciplinary group of agencies, but it utilizes a single referral form, which any provider or community member can use to refer to the entire group. The group meets to review referrals and assign them to the most appropriate resources. Some of the services provided include respite for parents, parent education, diaper and resource banks, addiction and social support, free meals, mental health services, transportation, and home visiting.

Because home visiting is a key part of the Family CORE mission, YCCO Early Learning Hub convened a home visitor network from county agencies to coordinate communication and provide continuing education. The home visitors range from public health nurses to peer support providers, and they meet regularly for continuing education on topics like cultural competency, trauma, and working with incarcerated families.

YCCO's Family CORE and home visiting network are possible through coordination of a variety of partners including Medicaid, Yamhill County Public Health, Head Start of Yamhill County, early childhood special education providers, and community-based organizations (Provoking Hope and Lutheran Community Services — A Family Place). Since 2016, Family CORE has received more than 1,200 referrals for health care, social support, and counseling. The most common reasons for referral are that a child has a medical condition, is at risk for developmental delay, or there is risk of maternal depression. By connecting these families to services early, the county expects to see a reduction in health and academic disparities.

Alternative Payment Methodology

Health care transformation in Oregon is based around the Triple Aim of improving the patient care experience, improving population health, and reducing costs. One of Yamhill Community Care Organization's (YCCO's) strategies to address these aims is the alternative payment methodology. It is a multitier payment system for primary care clinics, designed to incentivize the provision of quality, patient-centered primary care delivery.



Transformation funding in Oregon is in its fourth year. Funding is based on patient engagement at participating clinics; progress toward a series of incentive metrics defined annually by the state; and infrastructure measures, which include behavioral health integration, team-based care, case management, electronic health record use and reporting, and patient-centered primary care home status. In addition, the alternative payment methodology has add-on structures, where clinics may receive additional funding for lowering emergency department utilization, reducing opioid use, and participating in a comprehensive primary care initiative, which is designed to further shift reimbursement from fee-for-service to pay-for-performance.

YCCO has nine partner clinics participating in the program. The quality pool distribution is funded through Oregon Health Authority and federal Medicaid funds. To date, YCCO has received 100% of the funding for meeting the required metrics. The YCCO board of directors makes the final payout determination, but generally funds are redistributed back to contracted partners to support further innovations in workflow and coordinated care delivery. Reinvestment decisions are at the discretion of the provider partners, but multiple clinics have reinvested resources in developing streamlined electronic health record and data-sharing processes, integrating behavioral health providers, and becoming certified to store and deliver vaccines.

Opioid Reduction Initiatives

Opioid misuse and overprescribing is a nationwide problem and Oregon is no exception. In 2012, 24% of Yamhill County residents received at least one opioid prescription, with an average of 3.8 prescriptions dispensed per person.

To combat this problem, the entire community came together to create a multisector, multistrategy approach. These comprehensive efforts include annual Opioid Summits, persistent pain programs for patients, utilization of the Prescription Drug Monitoring Program, a monthly Opioid Guidepath Workgroup, exploring and funding alternative pain treatment, Narcan distribution and education, Medication Assisted Treatment plans, building communication pathways between behaviorists and pharmacists, and the development of YCCO Opioid Prescribing guidelines.



Collectively, these initiatives have the shared goal of reducing opioid-related deaths in Yamhill County. The number of health-related participants has grown — evolving from largely primary care and specialty providers who accept Medicaid to a broader range of medical, dental, and behavioral health providers. Additionally, the number of nonhealth sectors participating in these efforts has increased, including law enforcement entities and social service and peer support providers.

Oregon Health Plan, the state Medicaid program, includes acupuncture and chiropractic care as a covered benefit. YCCO expanded these benefits for its members to allow increased access and has begun contracting with local providers of these services to ensure they will accept Medicaid patients. Additionally, YCCO offers a Persistent Pain Program to its members, which pairs pain-management education with movement therapy.

Clinics contracted with YCCO to serve Medicaid patients have reduced their opioid prescribing considerably. YCCO has made changes to its health plan coverage in order to guide prescribers and members toward healthier opioid alternatives. These changes include limiting opioid coverage for new opioid users and releasing guidelines for opioid prescription. At the end of 2014, more than 25% of YCCO members who were chronic opioid users were taking more than 120 morphine equivalent dosages (MED). By the end of 2017, 6% were taking more than 120 MED and 16% were under 90 MED. YCCO has tied alternative payment methodology quality payments to clinics having no patients on more than 120 MED, and at least three community clinics have no patients taking those dangerously high doses of opioids.