Integration of Dental Care into the Accountable Care Organizations - the Oregon Model

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Oregon Health Care Transformation
A Fast Moving Train

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Outline

I. Background: Oregon Health Plan & Managed Care in Oregon
II. Oregon Health Care Transformation Timeline
III. Coordinated Care Organizations: Oregon’s ACO
IV. Dental Quality Metrics
Oregon Health Plan & Managed Care (Demonstration 1.0)

- Developed in 1993 & championed by then state senator and would be governor Dr. John Kitzhaber.
- Federal waivers granted by Clinton Administration
  - Managed Care capitation structure
  - Prioritization of services
- Growth
  - 240,000 in 1994 to approx. 900,000 in 2014
Oregon Healthcare Transformation Timeline

2009
- Created Oregon Health Authority
- Public Health, Adult Mental Health, Medicaid, Public Employee Benefits Board and Oregon Education Benefit Board under one roof

2010
Environment
- Affordable Care Act of 2010 passed.
- Dr. John Kitzhaber re-elected Governor of Oregon

2011
Policy: House Bill 3650
- Coordinated Care Organizations (CCO)
- Medicaid Expansion
- Health Insurance Exchanges
### Transformation Work Plan (CMS Application)

#### Today

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*Information from Public Health Institute*
OHP: Demonstration 2.0

Federal waiver

- Agreement with federal government to reduce projected state and federal Medicaid spending by $11 billion over 10 years.
- Lower the cost curve two percentage points in the next two years.
- $1.9 billion from the U.S. Dept. of Health and Human Services over five years to support coordinated care model.
- OHA and CCOs will be held to high standards for health outcomes.
Coordinated Care Organization (CCO)

One organization with a single global budget
- Delivery, management and quality assurance of care to the specific population of patients enrolled with the organization.

Medical, Dental, Mental, Rx, County Programs, Medicare, Medicaid, Specialty, Hospital, PCPCH

Fragmented, Silo System

Coordinated System

CCO
- Shared Systems & Learning
- Coordination & Communication
- Local Accountability
- Global Budget
Oregon Health Plan (Medicaid)
Health Care Delivery system before August 2012

Oregon Health Authority
Oregon Health Plan (OHP)

- 33 OHP contracts
  Capitation $$ PMPM

  - 8 Dental Care Organizations (DCO)  
  - 15 Fully Capitated Health Plans (FCHP)  
  - 10 Mental Health Organizations (MHO)

Siloed care: Minimal to NO coordination/collaboration

Oregon Health Plan Members
Approximately 600,000
Oregon Health Plan (Medicaid) Health Care Delivery system in 2014

Oregon Health Authority
Oregon Health Plan (OHP)

$ PPM Global Budget

16 Local Community CCOs

CCO contracts

Oral
Physical
Mental

HEALTH

Navigators

Primary Care Homes

Coordinated care – Coordination/collaboration incentives

Oregon Health Plan Members
Approximately 900,000 after Medicaid expansions

Oregon Health Plan (Medicaid) Health Care Delivery system in 2014

Oregon Health Authority
Oregon Health Plan (OHP)

$ PPM Global Budget

16 Local Community CCOs

CCO contracts

Oral
Physical
Mental

HEALTH

Navigators

Primary Care Homes

Coordinated care – Coordination/collaboration incentives

Oregon Health Plan Members
Approximately 900,000 after Medicaid expansions
Oregon CCOs

- 16 statewide
- All but 2 501 C3 non profit organizations
- Physical Health integrated 2012
- Mental Health integrated 2013
- Dental Health fully integrated June 2014
- (community based, local governance, varying degrees of preparedness for complexity of integrated model)
CCO Organization Structure

- Board of Directors
  - Transformation Center of OHA
    - Clinical Advisory Panel
    - Community Advisory Counsel
    - Community Health Assessment
Innovator Agent for each CCO
Current Status

- 200K new Medicaid members predicted over span of 2014
- **195K enrolled in 1st month of enrollment**
- Access strains felt immediately
- Primary care access is heavily effected
- Adult dental is also heavily strained
- System has been thoroughly disrupted
History and Current Status of Oral Health In CCO Model

- Petition introduced to OHA to delay dental integration into CCO—*Denied*
- Legislation introduced to carve Dental out of Global Budget to 2017—*Failed*
- CCOs began integrating Dental mid 2013
- June 2014 all Medicaid Dental Services will be contracted from state through Coordinated Care Organizations
Maternal Child Health Conversation

Maternal Health
- QI with OB offices to screen/refer
- Direct referral to dental networks

Early Childhood Intervention
- Public Health approach
- WIC Headstarts

Medical Benefit Incentives
- Payment
  - PCMH Well Child Visits
  - Maternal Medical Home

Adult Care Coordination
- Assisted Living
- Geriatric Care
- Emergency Dept Redirection
- Opiate Prescribing Policy
Moving Oral Health Care from Volume to Value**

**Value = health outcomes achieved per dollar spent over the lifecycle of a condition
Oral Health Care During Pregnancy: A National Consensus Statement

Summary of an Expert Workgroup Meeting

A Profession in Transition: Key Forces Reshaping the Dental Landscape

The 2011 IOM Reports on Oral Health
Positive Results

✓ Every CCO is living within their global budget.

✓ The state is meeting its commitment to reduce Medicaid spending trend on a per person basis by 2 percentage points.

✓ State-level progress on measures of quality, utilization, and cost (for the first 6 months of 2013) show promising signs of improvements in quality and cost and a shifting of resources to primary care.

✓ Progress will not be linear but data are encouraging.
## Progress

### Decreased

- ED utilization: 8%
- Specialty care visits: 9%
- All readmissions: 12%
- COPD admission: 28%
- CHF admission: 29%
- Asthma admissions: 14%

### Increased

- Patient-centered primary care home enrollment: 36%
- Primary care visits: 18%
- EHR adoption doubled from 28% to 57%

[www.health.oregon.gov](http://www.health.oregon.gov)