

Program # 40034B - Quality Improvement for Primary Care

Version 4/25/2013 s

Lead Agency: Health Department Program Contact: Vanetta Abdellatif

Program Offer Type: Support

Related Programs:

Program Characteristics: One-Time-Only Request

Executive Summary

The Quality Improvement for Primary Care contains prepayments received under the Primary Care Renewal program and the Patient Centered Primary Care Health Home (PCPCH) program. These are federal Medicaid-funded programs that pay in advance for future outcomes. Both are prospective payments we receive for serving high-need, high-risk poor and vulnerable Medicaid and uninsured clients, including clients with behavioral health issues and one or more chronic health conditions.

The payments are received in advance while we evaluate which interventions will be most effective in improving the health of our clients. Investments will be in primary-care specific staffing, infrastructure and activities.

Program Description

Health care transformation is changing how Multnomah County delivers care and how we are compensated for our work. The foundation for these changes has been built by the Center for Medicare and Medicaid (CMS), Center for Innovation, the Affordable Care Act and Oregon's 1115 Medicaid Demonstration project.

Today, most of our health-care compensation is a fee-paid-for-service by an eligible physician, nurse practitioner or other provider. In the future, most health care payments will be tied to the improved health of our patients, with little funding linked solely to transactional activities such as office visits, lab test or x-rays. This new reimbursement model is a primary goal of federal and state reform, and of local coordinated care organizations.

In anticipation of this fundamental shift, the County has established a payment transformation sub-fund within the General Fund to distinguish this funding from traditional fee-for-service or activity-based grant funding.

By accepting the payment, we are agreeing to improve our system and quality of care so that patients have better health outcomes. We are also agreeing to sustain these improvements even after the funding ends. The Affordable Care Act and Oregon's Medicaid demonstration project's goals are built around primary care practices that are Patient Centered Primary Care Health Home certified.

The funding in this scaled offer is to insure that resources are available for a system that is rapidly changing under Oregon's 1115 Medicaid Demonstration project. These resources will be invested in personnel and training, improved IT systems, facility improvements, and clinical care that is not billable under the new reimbursement model. Funding would allow critical internal improvements such as paying for substitute providers so that staff could step away to pilot promising clinical changes, care coordination, health promotion, or individual and family support services provided by a nurse or community health worker. Investments could also be made in the IT system improvements needed to track and report on clinical progress.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY11-12)	Current Year Purchased (FY12-13)	Current Year Estimate (FY12-13)	Next Year Offer (FY13-14)
Output	% of ACA-qualified patients with a care plan in their health plan	0.0%	0.0%	0.0%	90.0%
Outcome		0	0	0	0
Quality	Improvement in number of patients who receive developmental screening.	0.0%	0.0%	0.0%	3.0%
Quality	% improvement in nbr of patients over 12 y/o screened/counseled for tobacco use	0.0%	0.0%	0.0%	3.0%

Performance Measure - Description

One of the promises of Health Transformation is a shift in the system that focuses on improved quality and health outcomes. Like other providers in our community, we need to plan for, monitor and meet performance expectations.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds		
Program Expenses	2013	2013	2014	2014		
Contracts	\$0	\$0	\$943,203	\$0		
Internal Services	\$0	\$0	\$86,397	\$0		
Total GF/non-GF:	\$0	\$0	\$1,029,600	\$0		
Program Total:	\$0		\$1,029,600			
Program FTE	0.00	0.00	0.00	0.00		
Program Revenues						
Other / Miscellaneous	\$0	\$0	\$1,029,600	\$0		
Total Revenue:	\$0	\$0	\$1,029,600	\$0		

Explanation of Revenues

This program offer is funded with a \$1,029,600 cash transfer in FY 2014, as the funds are being moved from the Federal/State fund to the General Fund. Funding includes prospective Medicaid payments from Patient Centered Primary Care Health Home and Primary Care Renewal programs. These are not payments for services, medical treatments, activities or specific staff. They are not a grant award or a fee-based payment. The funds are prospective payments made in advance to us for serving high-need, high-risk poor and vulnerable Medicaid and uninsured clients, including clients with behavioral health and one or more chronic health conditions.

These Medicaid dollars are needed to ensure we maintain our certification and increase the reimbursement available to us for this work. This has allowed us to expand access and improve care without increasing the demand on the General Fund for on-going operations.

Significant Program Changes

Last year this program was: