

## 2020 Olympic Community of Health Implementation Partner Payment Model

### Principles

The OCH Implementation Partner 2020 Payment Model will:

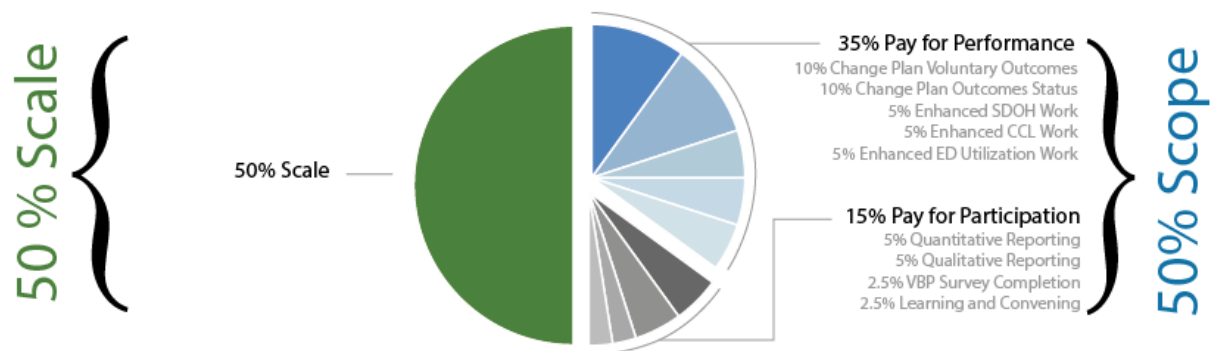
- Facilitate and support partner success toward the broad MTP vision and goals
- Encompass the full body of work requested of partners
- Ensure flexibility to adapt to unforeseen requests and opportunities
- Uphold and align with the established funds flow methodology
- Employ a simplistic approach
- Acknowledge and incent work that results in transformation

### Scale/Scope Split

On March 12, 2018, the Board approved the following: “Each subsequent year, an increasingly larger proportion of incentives will be earned based on performance.”

Additional detail determined by Funds Flow, May 29, 2018:

Year	Proportion of Payment Based on Scale	Proportion of Payment Based on Scope
2019	60%	40%
2020	50%	50%
2021	50%	50%
2022	40%	60%
2023	30%	70%



NOTE: Percentages are absolute, 50% scale, 50% scope, and 100% total.

## Scale=50%

50% of 2020 payments will be based on the following scale criteria as self-reported by partner type:

- Primary Care = 2019 Medicaid lives
- Behavioral Health = 2019 Medicaid encounters
- CBOSS = Number of OCH core metrics impacted (based on 2020 change plan)
- Hospital = Scale calculation does not apply to payment calculation, although data are collected

## Scope=50%

<i>Pay for Participation - 15% absolute - elements apply to all change plan types. Pay for participation aims to incent partners for participation elements.</i>		
<b>Scope element</b> (with absolute percent of payment)	<b>Description</b>	<b>Frequency</b>
Quantitative reporting (5%)	Reporting on required OCH intermediary metrics.  <i>Incentives for reporting on optional metrics is included in 2020 operations budget, not this payment model.</i>	Twice per year  <i>Report on optional metrics only once</i>
Qualitative reporting (5%)	Complete all qualitative reporting elements (change status, narrative questions, HCA P4R metrics including MeHAF assessment for BH) that apply to change plan type.	Twice per year
VBP survey completion (2.5%)	Complete HCA value-based payment survey, which is part of the HCA P4R requirement. CBOSS partners not eligible to participate will automatically receive credit for this element.	VBP survey is once per year
Learning and convening (2.5%)	Participation at convenings, summits, trainings, OCH committees, and other OCH-hosted events. Governance related committees and workgroups do not apply (Board of Directors, Executive Committee, Finance Committee, Funds Flow). Committee participation such as P MEC and 3CCORP do apply.	Attend a minimum of 4 learnings/ convenings per year (counted by number of events per change plan, not number of people)

*Note: Site visits are not part of the payment model in 2020 and are a part of contract monitoring.*

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<i>Pay for Performance – 35% absolute – elements apply to all change plan types. Pay for performance aims to incent partners for doing transformational work.</i>		
<b>Scope element</b> (with absolute percent of payment)	<b>Description</b>	<b>Frequency</b>
Change plan voluntary outcomes (10%)	Selected voluntary outcomes in 2020 change plan. Calculated as a percentage of selected voluntary outcomes of the total available voluntary outcomes.	Once per year, based on 2020 change plan

Change plan outcomes status (10%)	Self-reported status on selected outcomes (not started, planning, testing, limited implementation, fully implemented, scaling and sustaining). 50.0% or more of <u>all</u> selected change plan outcomes status' must be at "limited implementation", "fully implemented", or "scaling and sustaining" to receive credit.	Once per year (second reporting of the year), to be completed with qualitative reporting
Enhanced Social Determinants of Health work (5%)	Participation in a regional SDOH assessment (component of 2020 site visit agenda)	Once per year
Enhanced community-clinical linkage work (5%)	Demonstration of implementation of new work to advance community-clinical linkage work selected in change plan (second half of 2020, staff to provide guidance based on above SDOH assessment).	Once per year
Enhanced emergency department utilization work (5%)	Participate in strategy session(s) to determine collaborative action toward ED utilization P4P metric.	Once per year

Acronyms:

*BH – Behavioral Health, CBOSS – Community Based Organizations and Social Services, CCL – Community Clinical Linkages, ED – Emergency Department, HCA – Health Care Authority, OCH – Olympic Community of Health, P4R – Pay for Reporting, SDOH – Social Determinants of Health, VBP – Value Based Payment*