



Actions 	2011	2012	2013	2014	2015
Set a target for health care spending in Oregon	Foster innovation and efficiency to achieve target				
Aligned purchasing					
<ul style="list-style-type: none"> Standardize certain provider payments to Medicare methodology (not rates) to set the stage for future payment reform 	Legislature passes standards and authorizes statewide application OHA begins to implement its own purchasing	Public and private implementation continue	Statewide implementation achieved		
<ul style="list-style-type: none"> Focus quality and cost improvement efforts in areas with the greatest potential for improvement to achieve critical momentum 	OHA identifies focus areas; continues work on uniform quality and efficiency measures	Focus areas incorporated into all OHA reform work (quality improvement, payment reform, benefit design, etc.) OHA explores technical assistance to help providers engage patients and families as advisors			
<ul style="list-style-type: none"> Introduce innovative payment methods that reward efficiency and outcomes 	OHA establishes P4P metrics and 5-10 service bundles OHA explores stopping payment for “never events”	Implement innovative payment methods in OHA’s focus areas and lines of business	Work with partners to extend innovative payments beyond OHA	Refine and expand	
Reduce administrative costs in health care	DCBS adopts “uniform companion guides” Legislature authorizes DCBS to apply standards statewide OHA begins to implement	First set of standards phased in; public and private standardization by Oct. 2013 OHA workgroup develops standards for additional kinds of transactions		Administrative simplification continues OHA finds ways to ensure that administrative savings are passed on to health care purchasers and consumers	
Decrease obesity and tobacco use	OHA: - sets nutrition standards for public institutions - makes all state facilities tobacco-free - supports other evidence-based tobacco prevention	OHA works with partners to extend nutrition standards and tobacco policy statewide			
Establish a mission-driven public corporation to serve as the legal entity for Oregon Health Insurance Exchange	Legislature authorizes exchange and public corp. Governor appoints corp. board	2012-2013: Implementation work, including marketing and education 2013: Federal government approves Oregon’s exchange plan		Enrollment and coverage begin Jan. 1	

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Promote local and regional accountability for health and health care	OHA explores and develops regional frameworks with stakeholders				
Build the health care workforce					
<ul style="list-style-type: none"> Use loan repayment to attract and retain primary care providers in rural and underserved areas 	Legislature and Office of Rural Health develop financing plan	Implement and expand loan repayment; revise eligibility in line with workforce needs			
<ul style="list-style-type: none"> Standardize prerequisites for clinical training via a student “passport” 	OHA partners develop consensus requirement	Introduce passport Explore standardizing students’ clinical liability			
<ul style="list-style-type: none"> Revise “adverse impact” policy to enable public educational institutions to respond to workforce training needs 	OHA partners revise policy				
<ul style="list-style-type: none"> Improve diversity and cultural competency of health care workforce 	OHA and partners identify best methods to ensure ongoing cultural competency	OHA incents use of Community Health Workers in primary care homes			
<ul style="list-style-type: none"> Extend participation in Oregon’s Healthcare Workforce Database to all health professional licensing boards. 	Legislature authorizes database expansion	Incorporate reporting from new health care professional licensing boards as data needs dictate and board readiness allows			
Move to patient-centered primary care, first for OHA lives (Medicaid recipients, state employees, educators) and then statewide	OHA implements Patient-Centered Primary Care Homes (PCPCHs) where it has significant purchasing power	Implementation expands			75% of all Oregonians have access to PCPCH
Introduce value-based benefit designs that remove barriers to preventive care	OHA does additional design and modeling work OHA develops roll-out plans include. education and outreach	OHA and partners offer value-based benefit package (VBBP) in OHA coverage	VBBP offered in Oregon Exchange		

Expand the use of health information technology (HIT) and exchange (HIE)	OHA consolidates HIE planning in new Office of Health Information Technology (OHIT) Legislature establishes a public-private state-designated entity for HIE	Transition HIE services and operation to the state-designated entity	Widespread adoption and use of electronic health records Leverage HIE to support quality of care, including care coordination	
Develop Oregon guidelines for clinical best practices	OHA and partners create 10 sets of Oregon-based best practice guidelines and standards of care	OHA and partners use standards to increase appropriateness of care and reduce costs		
Strengthen medical liability system performance				
<ul style="list-style-type: none"> Remove insurance concerns as barriers to full disclosure of adverse events by providers and facilities 	Legislature enacts law removing barriers to disclosure	OHA and partners use standards to increase appropriateness of care and reduce costs		
<ul style="list-style-type: none"> Clarify that statements of regret or apology may not be used to prove liability in negligence cases 	Legislature amends Oregon's "apology" law			
<ul style="list-style-type: none"> Explore alternative systems 	OHA pursues funding or team to study alternative compensation system for medical errors			
Performance measurement	OHPB finalizes Scorecard with Oregon standard quality measures OHA sets common standards for diversity data in its systems	Ongoing: OHPB reviews, revises, and holds reforms accountable to Scorecard 2012-14: OHA rolls out diversity data standards in its systems and works to extend them to private sector		

The Board's agenda and ongoing action items are continuing to be developed.