Cost Growth Benchmark Technical Team Meeting #11 September 24, 2020



Agenda

<u>Time</u>	<u>Topic</u>	
1:00 p.m.	I.	Call to Order
1:05 p.m.	II.	Review and Approval of Prior Meeting Minutes
1:10 p.m.	III.	Public Comment
1:20 p.m.	IV.	Input of the Stakeholder Advisory Board
1:45 p.m.	V.	Review Draft Report of Recommendations
2:30 p.m.	VI.	Reflection on Technical Team Process
2:55 p.m.	IX.	Wrap-Up and Next Steps
3:00 p.m.	Adjourn	

Approval of September 10, 2020 Meeting Minutes

Public Comment

• During its September 16th meeting, the Board discussed the Technical Team's suggestions on the following topics:

Cost growth benchmark:

- Primary care target:
- 1. From which insurers will data be requested
- 4. Setting the target

- 2. How risk-adjustment will be applied
- 3. Minimum attribution size for providers
- The Board also discussed how best to ensure the success of these initiatives.

Cost growth benchmark

- The Board voiced no concerns regarding the Technical Team's recommendations related to **insurer data requests**.
- The majority expressed support for having each commercial payer use its own **clinical risk adjuster**, although one member preferred that insurers use a common risk adjuster to avoid 'gaming.'
 - One Board member recommended that payers report not only which risk adjuster they use, but also its underlying methodology to support transparency and understanding.
- The Board would like to do more than "urge" OHS to adjust for social risk. Instead, the Board *strongly recommended* that OHS gather **social risk data** and analyze the relationship between social risk variables and health care spending using APCD data.

Cost growth benchmark

- Board did not object to waiting for results of Oregon's analysis to set minimum population size for publicly reporting data.
 - Several Board members expressed concern that small rural hospitals and smaller provider groups will be left out of public reporting.

Primary care target

- The Board supported establishing a primary care target of 5.0 percent for 2021, although support was not unanimous.
 - One member stated that no target should be set for 2021, and another stated the target lacks underlying patient outcome goals.

Ensuring success

The Stakeholder Advisory Board:

- supported the Technical Team's emphasis on data transparency and communications;
- urged OHS to ensure the benchmark does not have the unintended consequence of limiting access;
- asked that OHS avoid punitive consequences for providers during initial years of implementation;
- urged thoughtful definition of success, noting that MA has not been able to lower out-of-pocket costs for consumers, and
- urged the State to adopt as a standard that consumers must select a PCP when they enroll in health insurance coverage.



1. Does the Technical Team wish to adopt any of the recommendations of the Stakeholder Advisory Board?

Review Draft Report of Recommendations

Draft Report

- The report reflects the results of seven months of research, study and thoughtful deliberation by the Technical Team.
- Recommendations contained in report are considered preliminary.
- OHS anticipates a subsequent hearing at which time additional input will be gathered on the recommendations.

Draft Report



1. Does the draft report accurately reflect the deliberations and preliminary recommendations of the Technical Team?



2. Does the Technical Team have any edits it wishes to make to the report or comments about the report?

Reflections on the Technical Team Process

Reflections (1 of 2)

- We appreciate the time provided and thoughtful deliberations of the Technical Team over these last six months.
- We hope to take some time today to reflect on this process and the future of the cost growth benchmark, the primary care spend target and the data use strategy.

Reflections (2 of 2)



1. For what are you most appreciative from this process, and for what do you have regret?



2. What do you most hope will happen as a result of your participation on the Technical Team?

Wrap-Up & Next Steps

