



2022 Quality Pool Distribution Plan Template

Due: August 29, 2022

Purpose

Exh. B, Pt. 10, Sec. 4, Para. e in the 2022 Coordinated Care Organization (CCO) describes the requirement for each CCO to create a written distribution plan for its Quality Pool and Challenge Pool earnings. The CCO must also make its plan publicly available. The purpose of the plan is to inform the CCO's Participating Providers, including Social Determinants of Health and Equity (SDOH-E) and public health partners, about CCO strategies and processes for distribution of Quality Pool funds.

2022 is the first year this deliverable has been required. The Oregon Health Authority (OHA) has developed this reporting template to ensure CCOs meet the contract requirements and to give Participating Providers and other interested parties clear and consistent information about CCO strategies for Quality Pool distribution.

Instructions

The CCO must answer all questions in this template to satisfy the contract requirements. Supporting materials and links may be provided, but they must only supplement the answers provided in the template document. A person reading the CCO's responses provided in this template should have a clear and complete picture of the CCO's Quality Pool distribution, without reliance on any other sources.

Unless otherwise noted in a specific question, this template pertains only to Quality Pool funds received in 2022 (Distribution Year 2022) for achievement of 2021 incentive metrics (Measurement Year 2021).

All references to "Quality Pool" within this template include both Quality Pool and Challenge Pool earnings.

Process

The CCO must submit the completed template in **PDF format** to CCO.MCodeliverableReports@dhsoha.state.or.us by August 29, 2022. The CCO must also make the completed template publicly available on its website.

OHA will review the submitted template for completeness. If any response is found to be incomplete, OHA will send a written request for additional information to the CCO contact person listed on the template. The CCO will then have 30 days to provide the requested additional information.

Once OHA approves the submitted template, OHA will notify the CCO via email. OHA will also add a link in the completed template to the CCO's most recent Exhibit L and send it back to the CCO. CCO should not publicly post its completed template until it receives confirmation from OHA that no additional information is needed.

Questions?

Any questions about the template should be directed to metrics.questions@dhsoha.state.or.us.

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CCO Name: Trillium Community Health Plan- South

CCO Contact Person (name and email): Michelle Kirchoff <Michelle.M.Kirchoff@TrilliumCHP.com>

Link to CCO Financial Information: <https://www.oregon.gov/oha/FOD/Pages/CCO-Financial.aspx>

- 1. Provide an overview of the methodology and/or strategy your CCO uses to distribute Quality Pool and Challenge Pool earnings to Participating Providers, including SDOH-E and public health partners.**

The Trillium South 2021 CCO Incentive Metrics Funding Methodology was determined by the Trillium Compensation Metrics Subcommittee with approval from the Compensation Committee and the Board of Directors. Trillium deducts the administrative fee and taxes from funds received from OHA prior to distribution. Distribution of funds will be determined through a two-stage process. In round one, providers receive funds for measures where Trillium met the improvement target. Remaining funds are distributed in round two, for measures where the PCPCH, behavioral health clinic, dental care organization, or specialist clinic met the measure, regardless of whether Trillium met the measure improvement target. Final distribution payments will be made at the organization/TIN level shortly after receiving quality pool funds from the state.

- 2. Describe your CCO's process for evaluating the contributions of Participating Providers and connecting those evaluations to distributions of funds.**

The 2021 methodology is a performance-based model in which providers are tasked with achieving the Trillium CCO target for each measure. For PCPs and DCO, the plan then takes into consideration the length of time a member was assigned to a provider and calculates member months to assign credit for closing the care gaps. Behavioral health and specialist providers performance utilizes encounter-based criteria to attribute a member.

- 3. Does your CCO's distribution strategy consider payments made previously to Participating Providers (such as up-front funding to a clinic or non-clinical partner that is intended to help the CCO achieve metrics related to the Quality Pool)? If yes, please describe.**

No

- 4. Describe how Participating Providers (including SDOH-E and public health partners) may qualify for CCO distribution of Quality Pool earnings.**

Trillium South distributed Quality pool earnings to participating providers contracted during the 2021 calendar year who remained contracted as of the date of the CCO Incentive Metrics Funding Program payment. Trillium utilized the 2021 CCO incentive measure set posted on the metrics and scoring website to carve out incentive methodologies for various provider types, including primary care providers, dental care organizations, behavioral health providers and specialty groups such as OB/GYNs and entities that provide similar services. Each provider type must also achieve a minimum member threshold.

Only primary care clinics participating in Primary Care Patient Centered Home (PCPCH) with a tier 3 status or higher as of Dec. 31, 2021, will be eligible for the 2021 CCO Incentive Metric Funding Program. To be eligible for the incentive dollars tied to EHR measures, the PCPCH providers will also

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be required to submit data to Trillium on a quarterly basis to monitor performance and address potential data validity concerns prior to the annual submission to OHA.

5. Describe how your CCO distributed its 2020 Quality Pool (Measurement Year 2020) funds to Participating Providers.

The funds were distributed to contracted participating providers in a two-phase process as they were received from OHA. In phase 1, the initial quality pool distribution from April 2020 was used to release funds on a monthly basis to address financial needs from the pandemic. Funds were calculated using CY 2019 metric performance and adjusted based on 2020 membership numbers at each provider group. In phase two, the final distribution of quality pool funds from OHA in June 2021 was used to provide a lump sum payout in October 2021. The Board of Directors determined that Trillium should issue payments to primary care, behavioral health, and dental care providers weighted by measurement year 2020 CCO quality measures. Primary care and dental care providers received payments based off assigned membership. Members are not assigned to behavioral health providers; therefore, the payments were based on distinct member/provider counts.

6. Describe how your CCO plans to distribute Quality Pool funds in future years (beyond 2021).

Trillium will continue to engage with its contracted participating provider network to develop the methodology being sure to include pertinent elements of contract requirements as necessary to drive performance improvement efforts. Typically, the methodology only has minor changes from year to year, therefore we anticipate that future years' methodology will be much like the one outlined above.

7. Please provide a link to where the 2022 Quality Pool Distribution Plan (this document) will be publicly available on your CCO's website.

<https://www.trilliumohp.com/providers/resources/CCO.html>