Overview and Opportunities of Draft Cost & Equity Framework

Educational Webinar Series

May 30, 2024

Created by Cost & Equity Workgroup of the Cost Growth Target
Advisory Committee



HEALTH POLICY AND ANALYTICS
Office of Health Analytics

Agenda

- Intro: Strategies to Advance Equity in Health Care Cost Growth
 - Rooting in Health Equity
 - Strategies to Advance Equity in Other States
- Overview of DRAFT Cost & Equity Framework
 - Background & Intent of Framework
 - Integrating Equity into CGT Program Cycle
 - What has happened with the Framework since it was presented in December 2023?
- Opportunities and Barriers to Promoting Equity in CGT work
- Potential Next Steps



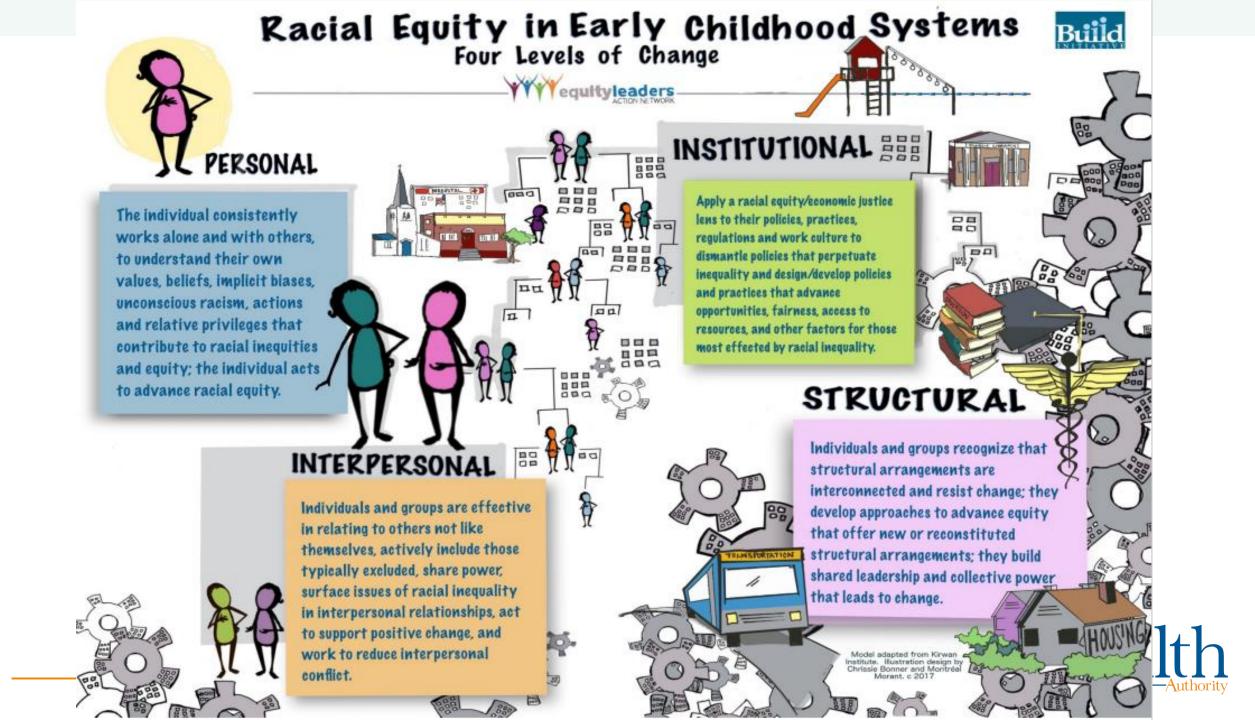
INTRODUCTION: STRATEGIES TO ADVANCE EQUITY IN HEALTH CARE COST GROWTH

Definition of Health Equity

Oregon will have established a health system that creates health equity when all people can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, age, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.

Achieving health equity requires the **ongoing collaboration** of all regions and sectors of the state, including tribal governments to address:

- The equitable distribution or redistribution of resources and power; and
- Recognizing, reconciling and rectifying historical and contemporary injustices.



LITERATURE REVIEW: Proposed Strategies to Advance Equity in Health Care Cost and Affordability

National Academy for State Health Policy:

- Leverage payment systems to enable community investments
- Improve chronic care management

Center for American Progress:

- Combat market consolidation
- Establish quality benchmarks and incentives
- Prioritize population health in data collection

LITERATURE REVIEW: Proposed Strategies to Advance Equity in Health Care Cost and Affordability

Commonwealth Fund: State Strategies for Slowing Health Care Cost Growth in the Commercial Market

- Implement a health care cost growth target
- Promote adoption of population-based provider payment
- Cap provider payment rates or rate increases
- Contain growth in prescription drug prices

- Improve oversight of provider consolidation
- Strength health insurance rate review
- Adopt advanced benefit designs
- Promote use of community paramedicine
- Improve behavioral health crisis systems
- Reduce administrative waste

What have other states done?

Milbank: Ensuring Health Care Cost Growth Targets Promote Health Equity

DESIGN

- Populations included in CGT measurement
- Representation on governance bodies

ANALYSIS

- Cost driver analysis
- Monitoring for negative impacts
- Defining and measuring affordability

REPORTING

- Using appropriate language
- Contextualizing performance

Complementary policies to promote health equity



MASSACHUSETTS: Practices for Bringing an Equity Focus into Work Products

Practical questions to consider as work products are developed:

Has the issue been named accurately?

Whose voices are being elevated?

Can valuable context be provided?

CONNECTICUT: Unintended Consequences Measurement Plan

There are three main domains of analyses that can measure effects of the cost growth benchmark of concern, including any unintended consequences that may arise from its

implementation:

CONSUMER OUT-OF-POCKET SPENDING

IMPACT ON MARGINALIZED POPULATIONS

UNDERUTILIZATION



Connecticut Healthcare Affordability Index (CHAI)



Families should **pay no more** than between approximately 7% and 11% of their household expenses to healthcare

CHAI models unaffordable healthcare costs by a variety of demographic factors, including household language.





OVERVIEW: DRAFT COST & EQUITY FRAMEWORK

Background: CGT Implementation Committee Recommendations (2021)

Reporting on a Standard Set of Quality Measures

Monitoring for Negative Impacts

Improving Equity

 $\underline{https://www.oregon.gov/oha/HPA/HP/HCCGBDocs/Cost\%20Growth\%20Target\%20Committee\%20Recommendations\%20Report\%20FINAL\%2001.25.21.p. \\ \underline{df}$

Background: Implementation Committee Recommendations (2021)

Ensuring no harms to quality and access

Prospective: what negative impacts are we worried about / want to make sure we are watching for?

Retrospective: what did we miss and how do we make it better?

Background: Cost & Equity Workgroup Charter (2023)

The Cost and Equity Workgroup of the Cost Growth Target Advisory Committee will explore additional opportunities to infuse an equity approach into the Committee's work and the Cost Growth Target Program.

Deliverable(s): The Health Care Cost and Equity Workgroup will make recommendations to the Advisory Committee and to OHA on steps to further integrate equity into health care cost containment efforts. Recommendation due Sept 2023.

Membership: The Health Care Cost and Equity Workgroup would be comprised of 3-5 Advisory Committee members and several (TBD) members of the Health Equity Committee.

GOALS OF COST & EQUITY FRAMEWORK



Improve program design and implementation

Measure performance relative to the cost growth target





Analyze spending to understand cost trends and cost growth drivers

Report performance and analysis





Accountability



Improve program design and implementation

Goals: Ensure representation on governing bodies and in decision making, align with best practices for data justice¹, consider equity impact in how the target is calculated (modified), consider equity impacts resulting from reduced cost growth

	Past / Current Activities	Potential Future Activities
Legislature	Directed composition of Implementation Committee	
ОНА	Adopted and began implementing REALD/SOGI standards for data collection and reporting	Continue to implement REALD/SOGI standards for data collection and reporting where possible
Committee	Implementation Committee used a variety of economic indicators to set the target, including income and wages. Implementation Committee made recommendations for quality and equity Advisory Committee composition based on sector, demographic, and expertise representation	Continue to use various economic indicators when revising the target in the future; consider using stratified economic indicators for target setting Build equity into target setting (see California statute) Continue to build trust and engagement within the Committee and with other partners across the health system, ensure all perspectives are heard on the committee, encourage broad public comment
Payers		, and a special section of the secti
Provider Orgs		

THE FRAMEWORK LOOK LIKE?



GOAL 1: IMPROVE Program Design and Implementation

- Ensure representation on governing bodies and in decision making
- Align with best practices for data justice
- Consider equity impact in how target is calculated or modified
- Consider equity impacts resulting from reduced cost growth



GOAL 2: MEASURE Performance relative to the Cost Growth Target

 Collect data for as much of the population as possible to make cost growth target performance measurement more comprehensive





GOAL 3: ANALYZE Spending to understand cost trends and cost growth drivers

- Expand data analyses to identify disparities
- Monitor inequities and negative impacts





GOAL 4: REPORT Performance and analytics

- Identify measures for equity
- Develop transparent, easy-to-understand reports that use accessible and inclusive language
- Improve community engagement





GOAL 5: ACCOUNTABILITY

Incorporate equity considerations into all accountability mechanisms





GOAL 6: IDENTIFY & IMPLEMENT opportunities to slow cost growth

- Ensure that any policies and strategies to slow health care cost growth have been analyzed for impact on health equity before recommending or implementing
- Identify opportunities for improving equity by slowing health care cost growth
- Ongoing monitoring of equity impacts during implementation





Updates on Draft Framework since December 2023 Adoption

- Collection of feedback from consultants
- Request to collaborate with the Health Equity Committee on glossary or rules to support this work
- Request to share with the Racial Justice Council





OPPORTUNITIES & BARRIERS: IMPLEMENTING COST & EQUITY FRAMEWORK

COST GROWTH TARGET PROGRAM CYCLE



Throughout the cycle, there are opportunities to integrate equity from different perspectives



OPPORTUNITIES

Implement

Incorporate equity considerations into all accountability mechanisms Ongoing monitoring of equity impacts during implementation



Identify opportunities for improving equity by slowing health care cost growth

Ensure that any policies and strategies to slow health care cost growth have been analyzed for impact on health equity before recommending or implementing

CGT EDUCATIONAL WEBINAR SERIES: MAY 2024



Collect data for as much of the population as possible to make CGT performance measurement more comprehensive

Cost Growth Target



Expand data analyses to identify disparities

Monitor inequities and negative impacts



Identify measures for equity
Develop transparent, easy-to-understand reports
that use accessible and inclusive language
Improve community engagement

PARTNERS IN HEALTH CARE DELIVERY SYSTEM















Oregonians receive preventative & necessary health care...

... from health care providers and pharmacies, who provide pharmaceuticals...

... That are distributed by Pharmacy Benefit Managers...

... and developed by prescription drug manufacturers.

PREMIUMS













Payments flow into or reimbursements are provided by insurance (private commercial, Medicaid, Medicare)



NEXT STEPS: IMPLEMENTING COST & EQUITY FRAMEWORK

Resources: Equity in Health Care Affordability

Milbank Memorial Fund: Ensuring Health Care Cost Growth Targets Promote Equity

Commonwealth Fund: State Strategies for Slowing Health Care Cost Growth in the Commercial Market

NASHP: How States Can Advance Health Equity while Addressing Health System Costs

CAP: How State Health Care Cost Commissions Can Advance Affordability and Equity

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