

List of Provider Organizations for Oregon's Cost Growth Target Program, 2018-2020

About

Oregon's sustainable health care cost growth target applies at four levels: statewide, by market, by payer, and by provider organization. The Cost Growth Target Implementation Committee provided several parameters for determining which provider organizations should be held responsible for their performance relative to the cost growth target (see details on the next page).

- Provider organizations that can be held accountable for Total Medical Expenditures
- Provider organizations that have sufficient patient volume

This document lists the provider organizations that have been identified as meeting the criteria for inclusion in the Cost Growth Target Program from the initial cost growth target data submission covering CY 2018 – 2020.

What does this mean for provider organizations?

Cost Growth Target Program implementation is phased in over the next several years (see Timeline on the next page). OHA will not publicly report performance relative to the cost growth target for this initial measurement period for any provider organizations on this list, nor will any accountability measures such as Performance Improvement Plans be applied.

OHA will reach out to provider organizations on this list this spring to provide more information about the Cost Growth Target Program and to share and validate data from the initial data submission. This will be an opportunity for provider organizations to better understand the Cost Growth Target Program and discuss their cost growth and underlying cost drivers. These conversations will be a 'practice run' before future years where cost growth target performance is publicly reported and any accountability measures apply.

For more information

Contact us at HealthCare.CostTarget@dhsosha.state.or.us

List of Provider Organizations for Oregon’s Cost Growth Target Program, 2018 - 2020

Cost Growth Target Implementation Timeline¹

CGT Year	Initial	1	2	3	4	5
Cost growth between	2018 – 2020	20 – 21	21 – 22	22 – 23	23 – 24	24 - 25
Payers submit data in	2021	2022	2023	2024	2025	2026
Performance reported?	No	Yes	Yes	Yes	Yes	Yes
PIPs?	No	No	Yes	Yes	Yes	Yes
\$ Penalty?	No	No	No	No	No	Yes (based on Years 1-5)

Implementation Committee Parameters for Provider Organizations²

Provider organizations that can be held accountable for Total Medical Expenditures

Provider organizations that can be held accountable for Total Medical Expenditures include only those organizations that could in theory take on contracts where they are responsible for the total cost of care because they (1) include primary care providers who direct a patient’s care, and/or (2) can influence where a patient receives care to promote high value providers and care.

These include health systems, hospitals with primary care providers, medical groups with primary care providers, and a subset of specialists that provide care coordination (e.g., some oncologists) or provide a majority of primary care-like services.

Health care cost growth is measured for provider organizations, not individual clinicians.

¹ Adapted from Implementation Committee Recommendations Report, January 2021

<https://www.oregon.gov/oha/HPA/HP/HCCGBDocs/Cost%20Growth%20Target%20Committee%20Recommendations%20Report%20FINAL%2001.25.21.pdf>

² Ibid

List of Provider Organizations for Oregon’s Cost Growth Target Program, 2018 - 2020

Provider organizations that have sufficient patient volume

Provider organizations must have sufficient patient volume to be able to detect accurate and reliable changes in annual per capita Total Medical Expenditures, and to help prevent situations where smaller provider organizations may exceed the health care cost growth target due to a few unusually complex and expensive cases.

Sufficient patient volume is defined as: Provider organizations with at least 10,000 unique all-payer attributed lives, or at least 5,000 attributed lives within any one market (Medicaid, Medicare, Commercial). To align with CGT data submissions, these thresholds were converted to provider organization member months: at least 120,000 member months across all markets or at least 60,000 member months within one market.

How Attribution Works

The provider organizations in Oregon that meet the above criteria for inclusion in the Cost Growth Target Program are identified using payer data submissions each year. Payers attribute members to specific provider organizations using a primary care-based attribution method.³

Primary care attribution includes attribution to organizations (i.e., hospitals, health systems, medical groups, federally qualified health centers, independent practice associations, etc.) that employ or contract with primary care providers.

Attribution includes both member choice of provider and methodologies to attribute a member to a specific organization based on utilization or other factors. Not all of a health plan’s members will be attributed. Payers must attribute members using three hierarchical tiers:

Tier 1	Member selection: Members who were required to select a primary care provider or a primary care home by plan design should be assigned to that primary care provider’s organization.
Tier 2	Contract arrangement: Members not included in #1 who were attributed to a primary care provider or a primary care home during the measurement period pursuant to a contract between the payer and provider should be attributed to that primary care provider’s organization. For example, if a provider is engaged in a total cost of care arrangement, than the payer may use its attribution model for that contract to attribute members.
Tier 3	Utilization: Members not included in #1 or #2 who can be attributed to a primary care provider or a primary care home based on the member’s utilization, using the payer’s own attribution methodology.

³ Cost Growth Target CGT-2 Data Specification Manual, version 1.2, 2021.

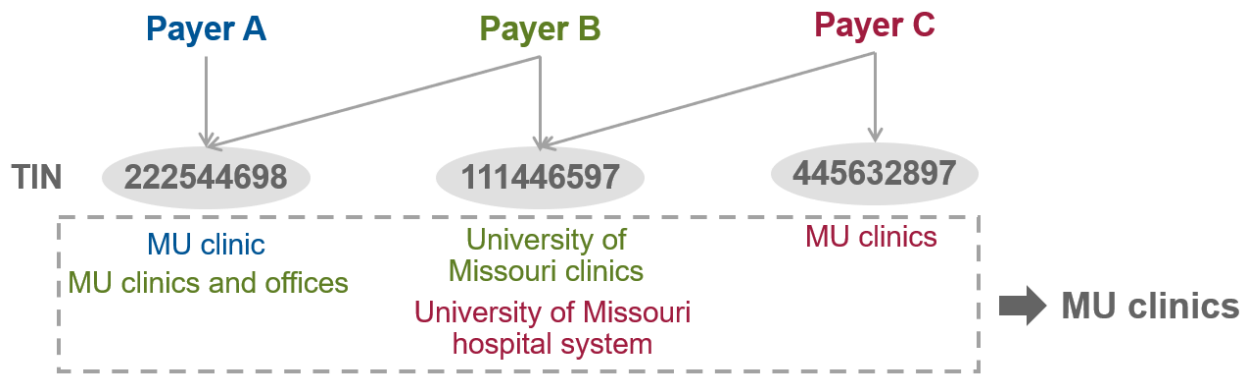
<https://www.oregon.gov/oha/HPA/HP/Cost%20Growth%20Target%20documents/CGT-2-Data-Specification-Manual.pdf>

All attributed lives were included in identifying the provider organizations below.

Methodology

Provider organizations were identified using finalized CGT files from all reporting payers. Data in the PROV_ID tab was analyzed to determine overlapping TINs and the greatest common provider entity. This process created a “Master TIN”, a dummy variable OHA can relate back to the TIN and provider organization name lists.

Example of the logic:



In this example, the Master TIN would be 222544698 (identified as the first one listed, it is not the most correct but a unique ID that OHA uses to link back to the original list of TINs). This Master TIN would be associated with the following TINs (222544698, 111446597, and 445632897) since all three TINs have names that are identified to be the same provider organization when all payers’ CGT-1 files are examined. OHA would call this provider entity “MU clinics” based on logic and most common name used. This logic was implemented across all finalized payer files. Once the Master TINs were aggregated, OHA reviewed the total member months for each provider organization by year and by market.

Provider Organizations (as of 4/14)

The list of provider organizations is sorted by 2020 member months⁴. Not all provider organizations listed below meet the criteria for each year in the initial measurement period.

For inclusion in the Cost Growth Target Program, a provider organization must have at least 120,000 member months across all markets, and at least 60,000 in at least one market (e.g. Medicaid, Medicare, Commercial). Provider organizations that met the member month criteria for one market are highlighted.

Provider Organization	2018 mm	2019 mm	2020 mm
Kaiser Permanente	5,457,821	5,648,230	5,697,429
Providence Health & Services	2,319,046	2,352,354	2,359,993
Legacy Health	656,522	654,824	775,990
PeaceHealth	796,751	761,932	674,275
Oregon Health & Science University (OHSU)	550,404	550,725	580,275
Salem Clinic	363,117	366,277	558,645
Oregon Medical Group	552,483	521,893	514,191
Yakima Valley Farm Workers Clinic	229,872	249,266	497,010
Multnomah County Health Department	466,029	474,165	487,153
Praxis Medical Group	443,565	434,250	468,973
North Bend Medical Center	414,034	426,270	449,190
Adventist Health	338,171	361,856	398,695
Virginia Garcia	330,105	371,902	379,404
Salem Health	130,465	135,087	364,004

⁴ This list uses validated CGT files as of 4/14 (three reporters are still in validation and their data is not included here)

List of Provider Organizations for Oregon's Cost Growth Target Program, 2018 - 2020

Provider Organization	2018 mm	2019 mm	2020 mm
Samaritan Hospital	360,746	356,883	305,420
St. Charles Health System	273,790	284,314	299,399
Lane County Health Department	216,650	245,751	273,651
Asante Health System	269,591	261,831	254,765
Mosaic Medical	230,394	231,709	247,598
Metropolitan Pediatrics	212,782	230,690	240,959
Bend Memorial Clinic	211,215	212,306	227,838
The Corvallis Clinic	212,095	209,891	211,070
Springfield Family Physicians	232,740	216,567	196,246
Central Oregon Pediatrics	175,874	182,888	195,288
The Portland Clinic	212,804	206,796	194,792
Salem Pediatric Clinic	83,911	83,933	183,163
La Clinica Del Valle	149,020	149,240	176,572
The Children's Clinic	154,103	163,032	174,841
Northwest Primary Care	154,983	160,407	164,214
Childhood Health Associates of Salem	-	-	154,142
Oregon Integrated Health	84,866	103,101	151,733
Northwest Human Services	-	-	149,074
Neighborhood Health Center	108,037	101,004	148,141
Nova Health	-	-	144,531
Siskiyou Community Health Center	95,367	97,058	136,547

List of Provider Organizations for Oregon's Cost Growth Target Program, 2018 - 2020

Provider Organization	2018 mm	2019 mm	2020 mm
Centennial Medical Group	-	124,695	135,499
Rogue Community Health	107,227	113,898	125,023
Grants Pass Clinic	-	-	122,080
Physicians Medical Center	-	120,286	121,368
Umpqua Community Health	102,947	112,997	119,256
Grande Ronde Hospital	120,548	118,187	118,577
Clackamas County Health Department	114,213	112,663	110,642
Broadway Medical Clinic	115,071	108,033	107,692
Willamette Family Medical Center	-	-	107,359
Eugene Pediatric Associates	-	-	103,275
Columbia Medical Clinic	76,937	85,595	95,661
Umpqua Health	85,460	-	91,133
Hillsboro Pediatric Clinic	-	82,430	89,222
River Rock Family Practice	-	-	88,801
One Community Health	76,099	80,659	83,599
Valley Family Health Care	-	70,969	76,544
WVP Medical Group ⁵	123,855	115,092	-
Rose City Medical	103,669	83,957	-
Rogue Valley Physicians	139,981	-	-
Oregon City Medical Northwest	73,951	-	-

⁵ WVP Medical Group was acquired by Salem Health Hospitals & Clinic in 2019 and rolled up with Salem Health's member months for 2020.