

Rodney A. Cook Director

November 23, 2022

Board of County Commissioners Clackamas County

Approval of an amendment to a revenue agreement with CareOregon, Inc. for the Operational & Quality Incentive Program. Total value of this amendment is \$800,000.00. This amount is in addition to the \$2,760,000.00 fee for service revenue we anticipate receiving under this provider agreement. Total revenue of \$3,560,000.00 is anticipated for fiscal year 22/23. Funding through CareOregon, Inc.

County General Funds are not involved.

Purpose/Outcomes	The purpose of this amendment is to support Clackamas Health Centers in improving operational know how and quality improvement activities.	
Dollar Amount and	CareOregon will pay Clackamas Health Centers a total of \$800,000.	
Fiscal Impact		
Funding Source	No County funds. This is a revenue agreement with CareOregon, Inc.	
Duration	July 1, 2022 – December 31, 2022	
Previous Board Action	Briefed at Issues: November 22, 2022; Amendment # 13: Approved June 2, 2022; Amendment # 10: Approved May 13, 2021; Amendment # 9: Approved February 25, 2021; Amendment # 8: Approved November 25, 2020; Amendment # 7: Approved January 9, 2020; Amendment # 6: Approved August 8, 2019; Original Approved May 5, 2016.	
Strategic Plan	1. Individuals and families in need are healthy and safe.	
Alignment	2. Ensure safe, healthy and secure comminutes.	
Counsel Review	1. October 17, 2022 2. KR	
Procurement	1. Was the item processed through Procurement? yes □ no X	
Review	2. If no, provide brief explanation: item is revenue agreement.	
Contact Person	Sarah Jacobson, Health Center Interim Director – 503-201-1890	
Contract No.	7642_14	

BACKGROUND:

Clackamas County Health Centers Division (CCHCD) of the Health, Housing & Human Services Department requests the approval of an amendment to a revenue agreement with CareOregon, Inc. for funding and administration of the Operational & Quality Incentive Program.

This amendment will better align health plan and system work focused on achieving Triple Aim objectives, improved quality of care, and effective management of the cost of care. CCHCD will utilize the funding to meet the two following goals:

- Improve and optimize supporting social health needs, such as social need screening workflows, engaging and/or onboarding in community information exchange, partnerships with community-based organizations, and staff to support social health.
- Enhance electronic health record reporting and workflows and/or population health analytics.

The dollar value of this agreement is \$800,000.00. CareOregon will pay CCHCD 50% upon contract execution and the remaining 50% by January 30, 2023. This amendment is effective July 1, 2022 and will terminate December 31, 2022.

RECOMMENDATION:

Staff recommends approval of this contract, and authorizes the Chair to sign on behalf of the County.

Respectfully submitted,

Rodney A. Cook
Rodney A. Cook, Director

Health, Housing & Human Services Department

AMENDMENT # 14

To The

CareOregon Provider Agreement

Between

CareOregon, Inc.

and

Clackamas County, by and through its Health Centers Division

This is the 14th Amendment to the CareOregon Provider Agreement (the "Amendment") by and between CareOregon Inc. ("CareOregon") and Clackamas County, by and through its Health Centers Division ("Provider") as made and entered into as of June 1, 2016.

NOW THEREFORE, the parties mutually agree to amend the Agreement as follows:

This Amendment sets forth the understandings and commitments concerning funding and administration of the Operational & Quality Incentive Program ("Program"). For purposes of this Amendment, CareOregon and Provider may each be referred to individually as a "Party" and collectively as the "Parties".

I. Program Description:

The purpose of this Amendment is to support Provider in improving operational know how and quality improvement activities, related to the key drivers of total cost for their attributed members.

The parties are entering into this agreement to better align health plan and system work focused on achieving Triple Aim objectives, improved quality of care, and effective management of cost of care.

II. Program Objectives:

The Provider will utilize the funding provided to meet two of the following goals, of their choosing:

- Utilize funding to support and/or increase THW ("traditional health workers") services within the clinic.
- Utilize funding to improve and optimize supporting social health needs, such as social need screening workflows, engaging and/or onboarding in community information exchange <Connect Oregon>, partnerships with community-based organizations, staff to support social health.

- Utilize funding to expand operational and quality for inhouse pharmacy services (such as: delivery, scanners, label translation, med sync).
- Utilize funding to support transitions of care from inpatient psychiatric care and medical inpatient (such as: telehealth access, outreach teams, care management, support for Behavioral Health Navigation and Integrated behavioral health services) inclusive of workflow development and optimization.
- Utilize funds to enhance EHR ("electronic health record") reporting and workflows and/or population health analytics.

Provider agrees to prepare and submit a narrative progress report, no later than December 30, 2022, attesting to the utilization of funds, inclusive of % of fund allocated, and describing progress within their two chosen areas of focus. Progress should identify the needs you were trying to address during the year and how the funding helps close gaps or enables improvement in chosen area.

III. Payment:

- A. CareOregon will pay Provider fifty percent of the not to exceed amount upon execution of the Amendment, with the additional fifty percent payable no later than 30 days upon submission of the narrative progress report, which shall be due no later than December 30, 2022. The funds distributed are for services provided for the period of July 1, 2022 through December 31, 2022.
- B. Total payment under this Amendment will not exceed \$800,000.00.
- C. Nothing in this Amendment implies or guarantees ongoing funding or payment for this Program beyond December 31, 2022.
- D. This Amendment shall immediately terminate as appropriate in the event these services are determined to be funded through a new revenue source.
- E. Any and all costs incurred by Provider which are not eligible for payment under this Amendment shall be the sole obligation of Provider. In addition, CareOregon is under no obligation to pay for, or participate in any cost increases, change orders, cost overruns, or additional Program expenses of any kind.

IN WITNESS WHEREOF, the parties have executed the terms of this Amendment to be effective **upon signature of both parties**. In all other respects, the Agreement shall remain in full force and effect.

Agreed to on behalf Provider:	Agreed to on behalf of CareOregon, Inc.:
Signature	Signature
Name:	Name: Teresa Learn
Title:	Title: Chief Financial Officer
Date:	Date:

COVER SHEET

☐ New Agreement/Contrac	t		
☐ Amendment/Change/Extension to			
□ Other			
Originating County Department:			
Other party to contract/agreement:			
Document Title:			
After filing please return to:			
]	☐ County Admin		
	Procurement		
If applicable, complete the following:			
Board Agenda Date/Item Number:			