TASK FORCE ON SCHOOL NURSING

July 8th

12:30-3:30

Portland State Office Building

Room 1A

WELCOME AND INTRODUCTIONS

- Approve June minutes
- August meeting date
- Parking
- ODE update

HOUSEKEEPING

BIKE RACK SUMMARY

- Identified Funding Ideas
  - Poverty money
  - Medicaid ✔
    - MAC
    - Direct billing
    - Free Care rule
  - Private Insurance
  - Coordinated Care Organizations
  - Community Benefit money
  - Marijuana tax money
  - Soda Tax
  - Oregon Health Authority ✔

- Identified Support items (which could lead to cost savings and potential new streams of funding)
  - New model – SN/SBHC, LHA/SBHC, other
  - Technology access – EHR/EMR
  - FERPA/HIPAA – changes to allow for efficient coordination of care between health and education
  - Policy change allowing an independent RN to bill for services (with applicable criteria)
  - Tele-health/-nursing
  - Identify and eliminate duplicate services

Commercial Insurance Coverage of School Nursing Services

Division of Financial Regulation

Commercial Insurance Basics

- Markets
  - Individual
  - Small group
  - Large group
    - Self insured
    - Fully insured
  - Other
- Plan Types
  - Health Maintenance Organization (HMO)
  - Preferred Provider Organization (PPO)
  - Exclusive Provider Organization (EPO)
  - Point of Service (POS)

Commercial Insurance Basics (cont.)

- State and Federal Regulations
  - Oregon Insurance Code and Administrative Rules
  - Patient Protection and Affordable Care Act (PPACA)
  - Health Insurance Portability and Accountability Act (HIPAA)
  - Employee Retirement Income and Security Act (ERISA)
  - Mental Health Parity and Addiction Equality Act (MHPAEA)
  - Various federal regulations (example: Title 45 of the Code of Federal Regulations)
  - Other regulatory bodies
    - Department of Labor
    - United State Preventive Services Task Force
    - Centers for Medicare and Medicaid Services (CMS)
- Miscellaneous
  - Rate and plan filings
    - Individual and small group filings due nine months before plan start date

Commercial Insurance Basics (cont.)

- Fee For Service Model
- Metal Levels (individual and small group)
  - Bronze
  - Silver
  - Gold
  - Platinum
- Cost Share Structure
  - Maximum Out-of-Pocket (MOOP)
    - 2017: $7,150/$14,300
  - Deductible
  - Copayments/coinsurance
  - In-network vs. out-of-network coverage
- Benefit Structure
  - Essential Health Benefits (EHB)
  - Covered services
  - Exclusions

Considerations

- Provider contracting
  - Not all insurers contract with all providers
  - Oregon isn't an "any willing provider state"
  - Negotiated payments
- Credentialing
  - Insurers may develop different requirements
  - Unlicensed staff
- Billing
  - Coding requirements
  - Claim administration
- Patient privacy
  - Collection, transmission, and storage of health information

Considerations (cont.)

- Medical necessity
  - Services must be medically necessary and otherwise covered
  - School requirements vs. medical necessity
- Exclusions
  - Instructional or educational programs
  - Activities of daily living
  - Private nursing services
- Mandates
  - New state mandated coverage requirements after December 31, 2011
- Services (generally)
  - Length of appointment
  - Multiple patients with different insurers
  - Multiple medical needs
  - Educational vs. medical

Questions

Tashia Sample
Senior Policy Analyst, Division of Financial Regulation
Department of Consumer and Business Services
tashia.m.sample@oregon.gov
503-947-7210 (office)
971-283-0102 (cell)

CCO Opportunities for School Nurses: Credentialing, Alternative Payment Methodology, and Community Benefit

Jeremiah Rigsby
Senior Manager, State/Federal Regulatory Affairs

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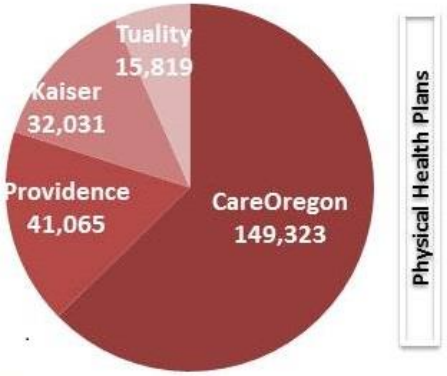
- Approximately 12,000 members
- 44% of members under the age of 65
- 83% in metro area

- Columbia, Tillamook, Clatsop Counties
- 29,000 members
- 80% in PCPCH

- Jackson county
- 30,000 members
- 70% in PCPCH

Health Share of Oregon



Primary Care Provider Network

All CareOregon members are assigned a primary care provider (PCP) to manage medical needs. CareOregon contracts with the following PCPs and Specialists:

- Audiologists
- Behavioral Health Specialists
- Certified Nurse Midwife
- Clinical Pharmacist
- Doctor of Dental Surgery
- Doctor of Dental Medicine
- Denturist
- Doctor of Medicine
- Doctor of Naturopathy
- Doctor of Osteopathy
- Doctor of Podiatric Medicine
- Dental Practitioners
- Licensed Acupuncturist
- Licensed Electorologist
- Nurse Practitioner
- Occupational Therapist
- Physician Assistant
- Speech Therapist
- Physical Therapist

A few PCP Responsibilities

- Provide accessible outpatient care within 4 weeks for routine visits
- Provide accessible outpatient care within 24 hours for any member with an urgent problem
- Provide access to telephone advice for member questions 24 hours per day
- Arrange and authorize specialty consultation with a network consultant within 24 hours for any member with an urgent problem requiring such consultation
- Arrange for hospitalization in a network institution when required (and post-discharge care coordination)
- Evidence of current professional liability insurance coverage in the amount of no less than $1 million per incident, $3 million aggregate, or equivalent protection

Organization Credentialing

CareOregon credentials institutional providers or supplier such as hospitals, skilled nursing facilities, home care agencies, behavioral services, clinical laboratories, rural health centers and FQHCs

Alternative Payment Methodology Example

Eligibility

All clinics that are assigned CareOregon members and are certified at any Tier in Oregon PCPCH Program.

Model

Level 3
- Report monthly on 5 selected measures
- Improve 3% on at least 3 measures

Level 2
- Report monthly on 5 selected measures
- Improve 3% on at least 1 measure

Level 1
- Report monthly on 5 selected measures

In general, the Levels will be paid at the following levels (**these will be risk-adjusted by clinic**):

Level 1: $4 pmpm
Level 2: $8 pmpm
Level 3: $12 pmpm

Community Benefit Program

CareOregon accepts Development Investment, Capacity Investment and Sponsorship requests from non-profit organization with programs or services within Oregon. Areas of focus include:

- Childhood Development
- Member and Community Empowerment
- Supporting Community Health Improvement Plans
- Social Determinants

- What is your recommendation for a *sustainable funding source for school health services that could be used to fund……?*
  - 5 minutes per Task Force member

TASK FORCE RECOMMENDATION HOMEWORK

- Open to members of the Task Force

GOOD OF THE ORDER

PUBLIC COMMENT PERIOD

- Next meeting – August 12th in Salem

THANK YOU!