

Draft CCO Certification Criteria

Entities wishing to form a CCO must submit an application to the State Governing Board describing their capacity and plans for meeting the goals of the Oklahoma State Innovation Model initiative, including being prepared to enroll and deliver services to all eligible individuals within the CCO's service area on the "go-live" date. Applicants must describe their demonstrated experience and capacity for:

- 1) Managing financial risk and establishing financial reserves
- 2) Meet minimum financial requirements set by the State Governing Body (e.g., maintaining a level of restricted reserves and net worth)
- 3) Operating within a fixed global budget
- 4) Utilizing best practices in the management of finances, contracts, claims processing, payment functions, and provider networks
- 5) Assembling an adequate network of providers to deliver timely, quality care to enrolled individuals
- 6) Coordinating and integrating the delivery of physical health care, mental substance abuse services, and other required services delineated by the State Governing Body
- 7) Developing and implementing alternative payment methodologies that are based on health care quality and improved health outcomes
- 8) Rewarding providers for achieving quality outcome benchmarks
- 9) Engaging community members and health care providers in improving the health of the community, including through the coordination, use, and development of social service resources
- 10) Participate in statewide interoperability through connecting to a Health Information Exchange that is participating with the eHealth exchange and sharing data for CCO participants within the Health Information Network. The CCO will also demonstrate having the ability to report timely on standardized outcome and quality measures required by the State Governing Body to participating providers.

CCOs will also be required to implement policies and procedures that protect member rights and assure each member receives integrated person-centered care and services designed to provide choice, independence, and dignity. To meet this requirement, a CCO application must describe, a minimum, the following:

- 1) A mechanism to monitor and protect against underutilization of services and inappropriate denials
- 2) Planned or established policies and procedures that protect member rights

- 3) Planned or established mechanisms for a complaint, grievance, and appeals resolution process, including how that mechanism will be communicated to members and providers
- 4) A strategy for ensuring health equity and elimination of avoidable gaps in health care quality and outcomes, as measured by gender, race, ethnicity, language, disability, sexual orientation, age, mental health and addiction status, geography, and other cultural and socioeconomic factors

Governance of the CCOs will be crucial to their success and ensure key stakeholders from the community are given an opportunity to direct their care. CCO applicants must have a plan in place to meet governance requirements that, at minimum:

- 1) Clearly describe how the governance structure makeup reflects community needs and supports the goal of health transformation, the criteria used to select governance structure members, and how it will assure transparency in governance
- 2) Identify key leaders who are responsible for successful implementation and sustainable operation of the CCO
- 3) Describe how its governance structure will reflect the needs of members with high health care needs, such as those with severe and persistent mental illness and multiple chronic conditions

The CCO will be governed by a CCO Board, along with a Board of Accountable Providers and Community Advisory Board as described previously. CCO applicants must identify a governing body for the CCO that includes:

- 1) Persons that share in the financial risk of the organization, and who must constitute a majority of the governing body
- 2) The major components of the health care delivery system
- 3) At least three health care providers in active practice, including an Oklahoma licensed physician, a nurse, and a mental health or substance abuse treatment provider
- 4) At least two members from the community at large, to ensure the organization's decision-making is consistent with the values of the members and the community
- 5) At least one member of the Community Advisory Board

Each CCO must convene a Community Advisory Board and describe how it will be administered to achieve the goals of community involvement and development, the integration of social and environmental determinants of health to improve health outcomes, adoption and participation in updating of the community health assessment and community health improvement plan. The CCO Community Advisory Board must include representatives from:

- 1) Consumer and patient advocates, forming a majority of the membership

- 2) Non-profit community organizations
- 3) County health departments from the counties served by the CCO
- 4) Tribal nations in the CCO service area
- 5) FQHCs operating within the service area