



## Summary of Community Engagement in the Development of Oregon’s Coordinated Care Organization (CCO) Incentive Metrics on Social-Emotional Health Services for Young Children April 2026

A primary and driving force behind the conceptualization, development, implementation, and benchmark recommendations for the Coordinated Care Organization [Young Children Receiving Social-Emotional Issue-Focused Intervention/Treatment Services](#) has been community engagement, including parents with lived experience of children enrolled in CCOs and needing these services, front-line primary and behavioral health providers, early learning provider, and health systems. Given Metrics and Scoring’s interest in how community engagement informs metric selection, the Oregon Pediatric Improvement Partnership (OPIP) provides this summary to describe how community engagement shaped this metric and why it should be part of every metric development process. Secondly, as Metrics and Scoring welcomes many new members in Spring/Summer 2026, this summary preserves prior community input so communities are not asked to repeat their feedback due to committee turnover. Appendix A provides a high-level visual summary of community engagement that has been conducted over the last 8 years to guide the work. **Overall, Metrics and Scoring has received 58 public comments of support for the metrics, with an unprecedented number from CCO member parents, front-line providers, early learning providers, and other health system leaders.**

### Community Engagement Informing the Need for a CCO Incentive Metric Focused on Social-Emotional Services

- In 2019, as a subgroup of Metrics and Scoring, the [Health Aspects of Kindergarten Readiness work group](#) (HAKR) was convened by the Oregon Health Authority and the Children’s Institute.
- To inform this workgroup, Children’s Institute funded Portland State University to conduct focus groups with parents of Medicaid-insured children on essential elements of health care that prepare children for kindergarten and school success - a social determinant of health. Services that address a child’s social-emotional development and target early delays were identified in the focus groups.
- This HAKR Workgroup engaged community members including parents, early learning providers, front-line primary care providers, and health system leaders in a 9-month process to develop a consensus recommendation for Metrics and Scoring.
- The HAKR Workgroup recommended a multi-measure, multi-year strategy that included developing a glidepath, system-level metric focused on social-emotional services, to later transition to a child-level metric assessing priority services with known gaps. This strategy was endorsed by the Health Plan Quality Metrics Committee and by Metrics and Scoring.

**CCO Member Voice:** *“My middle son was kicked out of preschool and then again from kindergarten due to behaviors that no one knew what to do with. We were bounced around multiple systems experiencing layer upon layers of trauma... If there was a metric that supported upstream services for my son, I believe that not only would the cost of long-term services have been less for the involved systems, but my son would not carry the stigma, trauma and historical marginalization that he lives with today because of these experiences.”* (Tammy Paul, mother of three)

### Community Engagement Informing the Development & Implementation of the (CCOs) System-Level Incentive Metrics on Social-Emotional Health Services for Young Children

- OPIP led the development of the **System-Level Social-Emotional Health Metric** included in the CCO Incentive Metric set from 2022 through 2024.
- This metric focused on building up the health care system to improve access to CCO-covered behavioral health services for children from birth to age five and their families, with the goal of advancing equitable, needs-based care to support healthy social-emotional development.





- As part of this metric’s development, the community partners noted above were engaged through cross-sector surveys and by compensating parents to serve as advisors based on their lived experience accessing services for their children.
- The four-part System-Level Metric also required engagement of a defined list of community parents, including parent and parent advocacy groups.
- At the time of Metric and Scoring deliberations, community partners, providers, and parents with lived experience submitted [23 public comments in 2020-2021](#) and 7 public comments in 2023 in support of including the metric in the Incentive Metric set and prioritizing it within the challenge pool.

**CCO Member Voice:** *“When young children are showing signs of mental and emotional health problems, the lack of a metric focused on social emotional wellness effectively denies access. It closes the door to help, and it forces families into more intensive, more costly, and more life altering treatment downstream... if it’s not measured and financially incentivized, it’s not likely to happen.”* (Carol Dickey, mother of five children adopted through foster care)

### **Community Engagement Informing the Development & Implementation Child-Level Metric** focused on [Young Children Receiving Social-Emotional Issue-Focused Intervention/Treatment Services](#).

- In alignment with the multi-year, Metrics and Scoring endorsed strategy, the System-Level metric was replaced with the **Child-Level Metric** focused on [Young Children Receiving Social-Emotional Issue-Focused Intervention/Treatment Services](#). This metric measures and incentivizes improvements in access to clinically recommended behavioral health services delivered by CCO-contracted providers to address identified social-emotional needs.
- The metric was informed by more than **160 community voices**. This included parents of CCO members, parent advocacy organizations (such as *Oregon Family Support Network, Oregon Family and Communities Together and Oregon Family to Family*), front-line primary care and behavioral health providers, early learning and other community groups, and health system leaders across Oregon. This included focus groups, community meetings, and input sessions held to inform metric strategy, specifications, and benchmarks. To OPIP’s knowledge, this metric has involved the broadest community engagement and has received the greatest level of public comment compared to other metrics.
- Three parents with lived experience of obtaining CCO covered services served as paid advisors throughout the development process.
- **Unprecedented Public Comment to Metrics and Scoring.** 27 public comments were submitted in favor of its inclusion between March and August of 2024. Notably, ten **parent CCO members shared public comments** supporting the metric inclusion in the set and as a challenge pool metric.
  - This is a [video of oral public comments](#) to Metrics and Scoring in support of the Child-Level Social Emotional Health Metric.
  - This is a [document of written public comments](#) to Metrics and Scoring in support of the Child-Level Social Emotional Health Metric.

**CCO Member Voice:** *“For the last decade, we’ve been fighting an uphill battle to secure the necessary supports for them in the care provided in our CCO. When he finally got an evaluation and received a diagnosis, I was just given a list of providers, who all said they didn’t see young children or they had enormous waitlists, or they didn’t exist.”* (Karra Crane, mother of two living in Douglas County)

In total, across the system-level and child-level metric, **58 public comments of support** were received, including public comments from CCO Member parents, front-line providers, early learning providers, and other health system leaders.

