



PacificSource Health Plans

Written Testimony in Opposition to HB 2132-1

Chair Greenlick, Vice-Chairs Keny-Guyer and Thompson, and members of the House Health Care Committee, thank you for allowing us to briefly share our concerns regarding HB 2132-1. PacificSource Health Plans is an independent, not-for-profit community health plan serving the Northwest. We serve commercial, Medicaid and Medicare members and we are the contracted Coordinated Care Organization in both Central Oregon and the Gorge. We have also submitted our application to become a Qualified Health Plan and intend to offer commercial products both inside and outside of the Health Insurance Exchange. Our chief concerns are as follows:

- Once people are no longer eligible for the Oregon Health Plan, they become health care consumers/purchasers – just like any other eligible Oregonian. To enable auto-enrollment into *any* plan runs contrary to consumer choice.
- Since all plans within the Exchange are accredited and meet minimum quality standards, the Exchange should not favor enrollment in one plan or another. All plans must cover the same Essential Health Benefits and meet network adequacy requirements, including contracting with essential community providers. We believe it is problematic for the state to show a preference toward any specific Qualified Health Plan.
- There are also technical issues that would make this legislation both difficult to administer and likely cost-prohibitive for the state, in terms of the technology required to perform the specified functions. We also believe it is not entirely clear that the targeted population would be uniquely identifiable.

We recognize the need for adequate education and information to assist consumers in making informed choices; however Health Plans and CCOs address continuity of care issues every day with new enrollees. We are confident in the ability of CCO's and Plans to be able to coordinate around the needs of these individuals and in the case of PacificSource specifically, our business model aims toward serving seamlessly, any member of a community regardless of how their health care is paid.

We believe that with full implementation of state and federal health reform, Oregonians will be served in a very different way, having additional resources and supports available. HB 2132 -1 is both un-necessary and inhibits consumer choice. We urge a "No" vote.

Thank you.