Kate Brown, Governor



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## **MEMORANDUM**

**TO:** The Honorable Sen. Elizabeth Steiner Hayward, Senate Co-Chair

The Honorable Rep. Dan Rayfield, House Co-Chair

Subcommittee on Human Services

**FROM:** Janell Evans, Budget Director, Oregon Health Authority

**DATE:** June 6, 2017

**SUBJECT:** Responses to May 31 Informational Hearing Questions

During OHA's presentation before your committee on Wednesday, May 31, committee members asked questions that required additional follow-up.

**OHA Clarification:** Before providing our responses, I want to clarify a misunderstanding about the Special Needs Rate Group (SNRG). During the hearing, Rep. Hayden implied that moving individuals from fee-for-service to the SNRG rate group in coordinated care organizations (CCOs) created savings for OHA. The savings did <u>not</u> result from these individuals being less expensive in managed care than fee-for-service. The savings are a result of the settlement of the CCO SNRG risk corridor. The risk corridor was set up on this rate group as a risk sharing mechanism given the uncertainty of the costs to cover this group. The settlement, which was received in early 2017, resulted from CCOs spending less on these individuals than what OHA paid CCOs in their capitation rates.

The following are the committee questions and our responses:

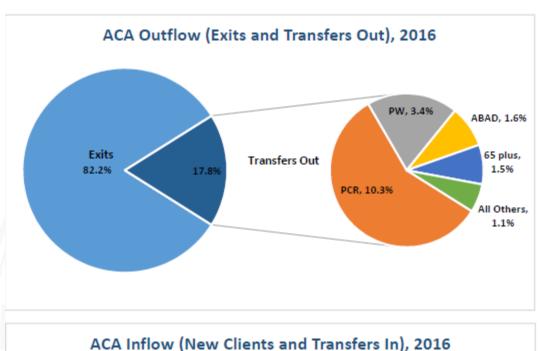
**Sen. Steiner Hayward**: During re-determination process, people have been determined to be eligible for pre-ACA (i.e., traditional Medicaid) categories and have therefore

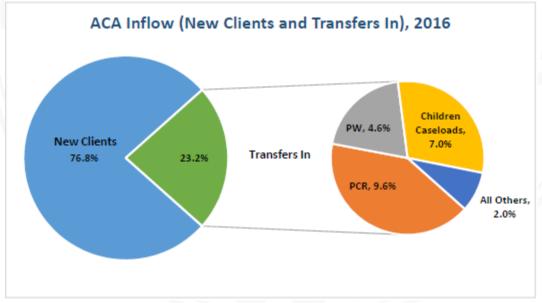
moved out of the ACA group. Do we know how many have come off of the ACA group categorically versus those who have come off entirely?

The display below provides 2016 data on the outflow and inflow of individuals into the ACA Adult caseload.

## ACA Adults Summary Statistics for CY 2016

Total ACA caseload at starting point in time (Dec 31, 2015)	433,134
Total Outflow (Exits and Transfers Out)	212,303
Total Inflow (New Clients and Transfers In)	157,298
Total ACA Caseload at ending point in time (Dec 31, 2016)	378,129





**Rep. Hayden**: In terms of a comparison between the cost of fee-for-service versus those in CCO – I got an answer when I previously asked this question but it was "we don't track that." Why can't you track that? Is there a technical glitch?

As indicated during the hearing, the agency will further examine the comparison of costs for an individual in fee-for-service versus managed care.

**Sen. Winters**: Could you provide us with the distribution (down to the county level) across the state for the fee-for-service population?

Please see the attached chart titled "Counts of Open Card and Total OHP Members, Physical Health Plan Type by County, January 2017" at the end of this memo.

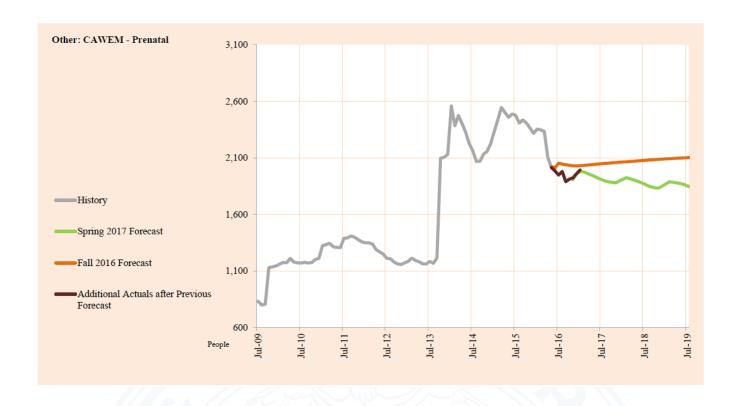
**Sen. Steiner Hayward**: I'm struck by the decrease in pregnant women. Does someone know if our birth rate is dropping (which would be a sign that we're doing a good job reducing unplanned pregnancies) or is it because the same number of people are having babies just not on Medicaid?

The crude birth rate in Oregon is decreasing. According to the Center for Health Statistics, Oregon's rate in 2016 is 11.2 births per 1,000 population. The rate has consistently decreased (see attached table), and remains under the U.S. birth rate.

OHA is looking at several measures that indicate a reduction in unintended pregnancy. These measures include: increases in effective contraceptive use (metric), decreases in abortion, and improvement in maternal and child health.

**Rep. Hayden** (1 hr 4 min): Going back to pregnant women – The CAWEM population is separate, correct? Is that number shifting?

The CAWEM Prenatal population is a separate population. For your reference, that caseload chart is provided below.



**Rep. Buehler**: In regards to the ACA population – can you tell me how much of the decrease is due to the redetermination versus people naturally moving off with the improved economy?

As stated during the hearing, we don't have data that can specifically answer this question. We can identify the movement of individuals into and out of the caseload, as provided in the chart on page 2, above, but not the precise reasons why individuals leave the program.

## Counts of Open Card and Total OHP Members, Physical Health Plan Type by County, January 2017

Count of Persons on 15th of the Month

	Open Card	All OHP
Baker	1,046	4,569
Benton	2,908	14,218
Clackamas	12,993	70,969
Clatsop	2,314	10,422
Columbia	2,363	11,263
Coos	4,180	20,543
Crook	1,178	6,721
Curry	1,472	6,369
Deschutes	7,356	41,881
Douglas	6,813	33,768
Gilliam	84	435
Grant	345	1,747
Harney	460	2,178
Hood River	1,087	6,402
Jackson	12,394	65,118
Jefferson	3,545	8,775
Josephine	4,806	30,362
Klamath	5,664	21,616
Lake	576	2,159
Lane	19,302	97,552
Lincoln	3,651	14,514
Linn	6,910	35,634
Malheur	2,239	11,151
Marion	18,430	97,992
Morrow	740	3,316
Multnomah	32,672	195,696
Polk	4,005	18,909
Sherman	106	417
Tillamook	1,493	6,753
Umatilla	4,958	21,538
Union	1,553	7,198
Wallowa	419	1,970
Wasco	1,783	8,119
Washington	16,852	98,906
Wheeler	105	365
Yamhill	5,846	25,051
Out-of-State	359	406
Total	193,007	1,005,002

Data Source: DSSURS, 30 Apr 2017