

HEALTH SHARE AS AN INNOVATIVE THOUGHT PARTNER

Health Share is the CCO serving over 348,000 Oregon Health Plan (OHP) members throughout Clackamas, Multnomah, and Washington counties. Our collaborative model allows us to leverage resources to support providers and sustain member access to services during COVID-19. As we assess the ongoing effect of the pandemic in Oregon, Health Share hopes to offer its expertise as a thought partner in navigating difficult decisions throughout the 2019-2021 and 2021-2023 biennia. We recognize that times are challenging for all, but we are committed to working together to forge the best path forward for all Oregonians.

IMPACT OF POTENTIAL CCO RATE REDUCTIONS

Impact to the Oregon Health Plan

Unlike other potential general fund cuts, federal Medicaid matching means every \$1 million state general fund cut amounts to a \$2.55 million or more cut to the Oregon Health Plan (OHP).

- A decline in funding would mean a decrease in payments to providers who are serving low-income Oregonians, which could impact member access to services and harm other businesses and industries downstream.
- Congress has temporarily increased federal medical assistance percentage (FMAP) by 6.2% during the emergency. Cuts mean Oregon could lose the benefit of ongoing increased match rates.

IMPACT TO OREGON HEALTH PLAN MEMBERS AND THEIR PROVIDERS

COVID-19 has impacted providers in ways we never imagined, leaving them financially vulnerable when we need them most.

The closing of healthcare to all services except urgent/emergent has left many providers financially at risk as they have seen a dramatic decrease in revenue. Many have already laid off staff and clinicians. Providers are also bracing for growth in patients with OHP coverage as more people lose their jobs. With demand for services on the rise, now is the worst time to divest in Medicaid. CCOs have poured resources into sustaining provider networks during the pandemic, and cuts will roll back the positive impact of those efforts. As the health system reopens and OHP members seek access to services, we must recognize the need to preserve provider capacity and networks hit hard by the pandemic.

Behavioral Health: Health Share maintains a broad network of Behavioral Health providers, with the ability to prioritize members' ability to maintain their providers as they transition from commercial plans to OHP. Increases in the Behavioral Health funding over the last couple of years has allowed for progress in improving behavioral health access. Any cuts to behavioral health funding could hamper that progress and impact the services available to members.

Oral Health: Oral health providers were unable to deliver routine care for 60+ days and it continues to be a challenge to resume normal scheduling. This has led to the financial instability of oral health providers. Rate cuts could destabilize this important network and further impact members' ability to access services.

Physical Health: Primary Care, Specialty, and Hospital providers have all been impacted by COVID-19. Provider networks must remain financially stable to provide members the care they need to maintain health. Cuts on top of the impact of COVID-19 put their financial stability at risk.

Community Health Services: Significant progress has been achieved through investments in social determinants and social services. Cuts put these successes at risk as they could cause a scaling back of investments in housing subsidies, nutrition, and other programs.

HEALTH SHARE'S PANDEMIC RESPONSE

Health Share and its partners have stepped up to demonstrate our commitment to serving our members and our community during the pandemic.

- Proactively reached out to over 65,000 members who were identified as "at risk" to ensure they not only had their healthcare needs met, but also their other health needs like food and housing.
- Developed systems to ensure new Health Share members have the option of keeping their current providers, as they transition from commercial coverage to OHP. Invested in provider sustainability payments including behavioral health providers.
- Saw a 1000X increase in the number of telehealth visits in March and April 2020 compared to 2019.
- Are utilizing flexible service funds to reimburse the cost of smartphones to increase access to telehealth.
- Eased access by pausing prior-authorization and in-network requirements.
- Created member, provider, and community resource webpages, and social media campaigns to spread COVID-19 information.