ELIGIBILITY, BENEFITS & AFFORDABILITY TECHNICAL ADVISORY GROUP (TAG)

Attendees	Glendora Claybrooks (lead); Michael Collins; Dr. Zeenia Junkeer; Ed Junkins;
	Sarah Knipper (OHA staff)
Absent	Dr. Sharon Stanphill
Date/Time	November 19, 2020 10AM-12PM

Meeting Purpose/ Desired Outcome	 Review and discuss Oregon insurance status, options, coverages and disparities. Identify key issues regarding eligibility and enrollment.
Key Issues	 Our goal is not simply to provide insurance for the 6% of Oregonians who are currently uninsured; our goal is to create a system that is fair and equitable for all, and that covers healthcare all Oregonians need. In response to the question, "Who is eligible?" our answer is, "Everyone in, nobody out."
	• There will be a lingering question regarding the payer of last resort. Who will pay when Oregonians are covered both by a federal program and by the Health Care For All Oregon Plan? Issues of benefits, multiple coverages, payer of last resort questions – let's make sure we're intentionally avoiding those landmines so that they are not suffering unintended consequences.
	• Not only do we want to provide acceptable coverage, we want to provide desirable coverage. As it stands, publicly funded plans are often considered "good enough" for a subset of the population. We envision an Oregon plan that will be desirable and preferable to other plans. This is different than the Colorado approach, in which they created an option that may not be preferable for everyone.
	 We should have more conversations about retroactively enrolling people in the moment, so everyone gets care. Enrollment needs to be simple so we address inefficiencies.
Actions Items (e.g., data requests, next meeting agenda)	• We need a better understanding of how this plan may intersect with federal coverage. We do not want to inadvertently jeopardize coverage that already exists by creating a new program. It should not be a liability to existing benefits if Oregonians want to participate in this plan. VA, Medicare and IHS will all consider to exist. What will it mean for someone enrolled in Medicare to have other coverage available to them. OHA will work on materials/flow chart/grid to outline the issues that OHP enrollees/VA/IHS/Medicare enrollees will face if we create a plan that offers alternative coverage.

	 If members of this TAG have questions for the CAC, they should email Glendora and Sarah Knipper.
Follow-up Questions	 Question for the CAC: What would you be willing to give up for a universal plan? It would be really helpful to have a facilitated CAC discussion of this question.
Revisit Later	 Does a company based in the state count the same as a non-resident working in Oregon? (e.g., someone living in New York who works for Nike – do they need to be offered coverage through this plan? Is it the same as someone living in Vancouver who works for Adidas? The former will create a lot of challenges.)
	 Next meeting on the 3rd will continue this conversation. It will be helpful to be clear about what questions we need to answer. What are the questions we need to send elsewhere? We will punt on the question of whether we would like to schedule a fifth meeting.
Items to Report Out to Task Force	 At a high level, this TAG supports the "Nobody out, everybody in" approach to the plan. We understand there are a lot of details that need to be figured out underneath this. It should be a priority to figure out how multiple coverages and dual eligible will fare in this plan. If someone is eligible for Medicare, who will pay first/last? We need to figure out how to avoid unintended consequences. A visual representation of eligibility options and coverages may help with this. Getting specific feedback from the CAC about tradeoffs will be helpful for
Meeting Materials	 this TAG. Meeting agenda Eligibility TAG Meeting 1 Summary State Health Access Data Assistance Center Kaiser Family Foundation Oregon Medicaid Eligibility Summary
Upcoming Meetings	 Thursday 12/3 9AM-11AM Thursday 12/17 9AM-11AM