

ELIGIBILITY, BENEFITS & AFFORDABILITY TECHNICAL ADVISORY GROUP (TAG)

Attendees	Glendora Claybrooks (lead); Michael Collins; Dr. Zeenia Junkeer; Dr. Ed Junkins; Dr. Sharon Stanphill; Sarah Knipper (OHA staff)
Absent	None
Date/Time	December 3, 2020 9AM-11AM

Meeting Purpose/ Desired Outcome	<ul style="list-style-type: none"> Address 3 key eligibility/enrollment discussion topics: <ol style="list-style-type: none"> Who is eligible for the plan? What is the <u>intent</u> of who will enroll in this plan? What enrollment mechanisms/requirements will be integrated into the plan?
Key Issues	<ul style="list-style-type: none"> Matrix is a good tool. There is still lack of clarity over the level of detail that we are responsible for to send to the Task Force and other TAGs. Open question that probably needs to be resolved at Task Force level. Universal coverage should mean universal. If someone is visiting here and gets sick or injured, they should have some form of coverage even if that is less than what residents/dependents might get. We want to be a welcoming state. With respect to the issue of whether people will want to move to Oregon just to get coverage, this is not a concern for our most vulnerable citizens and those for whom the stakes of universal coverage are the most significant. Let's focus on serving them rather than worry about who will take advantage of the system. Discussion about whether participation is mandatory, both at an individual and employer level. If we don't require participation, we will limit the viability of the plan because the health of the risk pool will be jeopardized. TAG did not settle on this and wants to get CAC input + more discussion. We might consider developing a proposal that is similar to WA so that incentives are aligned for residents in both states to stay where they are. We need to be sure and focus on an equitable enrollment process. We should consider how the enrollment process affects health outcomes, particularly for our most vulnerable and impacted populations. Enrollment process should be smooth and accessible; passive enrollment should be prioritized. Stories of people on OHP who are cut off after a few months because they haven't 'verified' their enrollment – this sort of interruption needs to be avoided.

Actions Items (e.g., data requests, next meeting agenda)	<ul style="list-style-type: none"> • Suggestion that we extend the next meeting by 30 minutes since we still have issues related to eligibility/enrollment to discuss • If members of this TAG have questions for the CAC, they should email Glendora and Sarah Knipper.
Follow-up Questions	<p>Questions for the CAC:</p> <ul style="list-style-type: none"> • How do people feel about individuals and/or employers being required to participate (e.g., “contribute”, however that is defined) in a plan? • If we separate health insurance from employment, how do people feel about that?
Revisit Later	<ul style="list-style-type: none"> • Definition of ‘temporary’ resident – how is this legally defined elsewhere?
Items to Report Out to Task Force	<ol style="list-style-type: none"> 1. Everybody in Oregon gets covered. <ul style="list-style-type: none"> ○ Visitors get covered to a certain extent. ○ If we don’t have to establish a residency duration requirement, we don’t want to. 2. Ideally, Medicaid, Medicare and other public programs will be fully integrated into the Plan. We wish to pursue this option until we can’t. 3. We want to decouple insurance from employment. 4. Enrollment should be as simple and easy as possible.
Meeting Materials	<ul style="list-style-type: none"> • Meeting agenda • Eligibility TAG Meeting 3 Summary • Eligibility & Enrollment discussion guide • SB 770 Decision-Making Matrix • “What if the Road to Single-Payer Led Through the States?” – New York Times (November 8, 2019) • “Key Questions When Considering a State-Based, Single-Payer System in California” – California Health Care Foundation (November 2017) • “Green Mountain Care: A Comprehensive Model for Building Vermont’s Universal Health Care System” – Governor Peter Shumlin (December 2014) a. Chapter 2: Who Would be Covered? <ul style="list-style-type: none"> ○ Appendix A-2: Coverage for Vermont Populations under GMC ○ Appendix A-3: Legislative Council Memorandum on Residency
Upcoming Meetings	<ul style="list-style-type: none"> • Thursday 12/17 9AM-11AM