Joint Task Force on Universal Health Care

September 30, 2021

Chair Bruce Goldberg

Vice-Chair Zeenia Junkeer

Agenda

- Opening remarks and reflections
- Oregon’s health care policy landscape
- Community engagement
- Public comment
- Revised extension work plan
- External communications
- Wrap up and next steps

Public Testimony – September

- Regional variation in Medicare spending and its relation to the use of physician services, hospital and intensive care beds, and other “supply-sensitive” factors. Highlighting higher-spending regions are not necessarily associated with the Triple Aim.
- Concerns with a potential sales tax as a source of revenue for universal coverage. Encourages the task force to replace any sales tax with the Corporate Activity Tax to create a dedicated health care fund.
- Need to explain to voters' actual costs currently going to pay for health care (hidden or indirect); any proposed revenue sources will be fair to residents; tell which individuals, by income bracket, will pay more or less under a universal system.
- Proposed list of considerations around public engagement efforts: expand number of regions, do not limit participation to 20-25 individuals per region, shorter meetings (2 hours, not 4 hours), and allocation of limited resources to support participant stipends.

The Oregon Health Care Landscape: An Update

Task Force on Universal Health Care

September 30, 2021

Jeremy Vandehey, Director

Health Policy & Analytics Division

Oregon Health Authority

Background: We've made significant progress

Improved health and delivery…

Percent change among CCOs, 2011-2019

93%
Adolescent well-care visits

117%
Depression screening

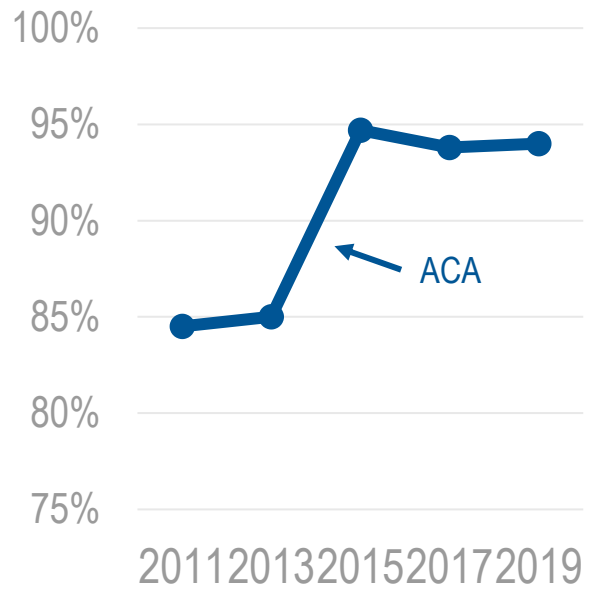
…while lowering costs

Projected expenditures versus actual

$2.2 billion
Projected expenditures versus actual
2013-2017

94% of people in Oregon are insured

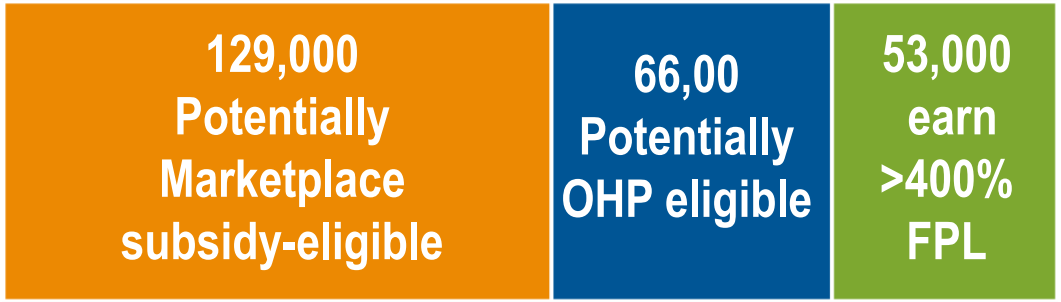
Oregon Health Insurance Survey



Background: Oregon's Uninsured

Of the 6% (or 248,000) uninsured individuals in Oregon, more than half may be eligible for Marketplace subsidies

Another quarter may be eligible for OHP and another fifth may be eligible for temporary subsidies due to ARPA

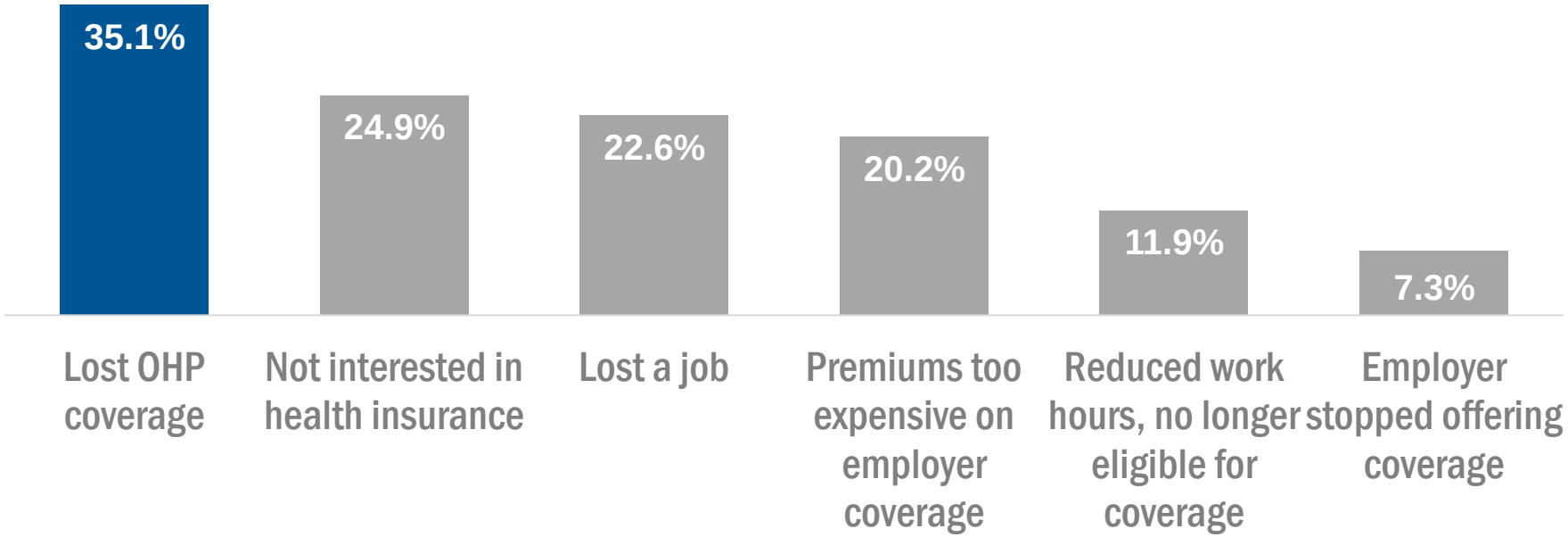


The American Rescue Plan Act (ARPA) temporarily increased Marketplace subsidies and changed how they're calculated.

Now, individuals earning more than 400% FPL may be eligible for subsidies

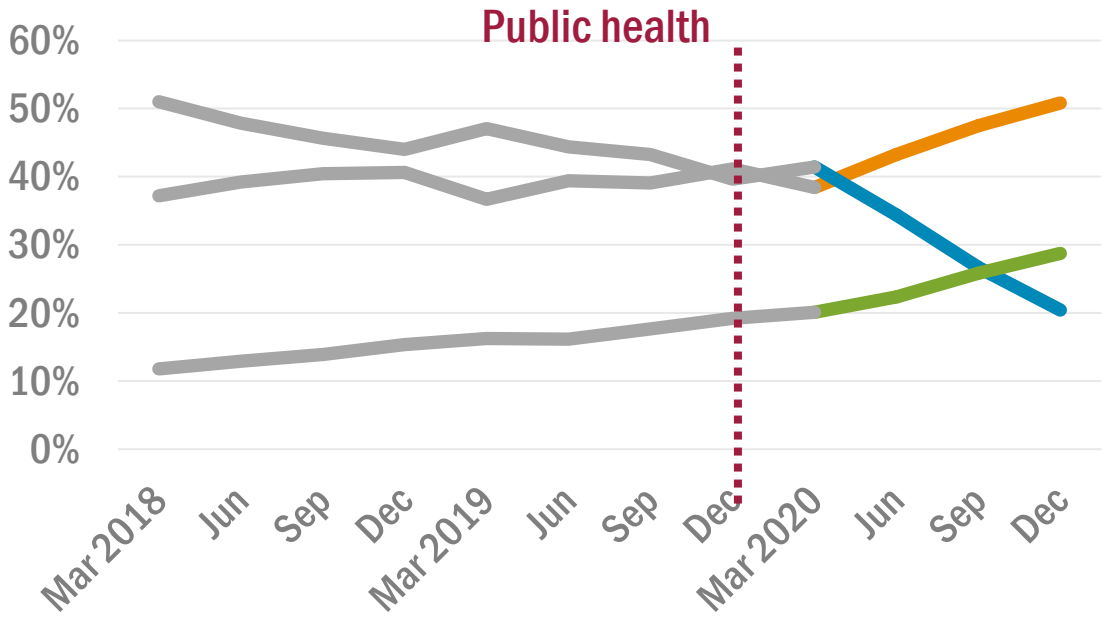
Background: Reasons for being uninsured

"Lost OHP coverage" is the most common reason for being uninsured at the time of survey



Background: Reduced Churn

Churn in Medicaid has decreased since the public health emergency began



The percent of enrollees **brand new to Medicaid** or who **had Medicaid 2+ years ago** have **increased** since the emergency

The percent of returning enrollees who **had Medicaid at another point within the past 2 years** significantly **decreased** since the emergency began (recent "churn")

Legislative Session Takeaways

Equity

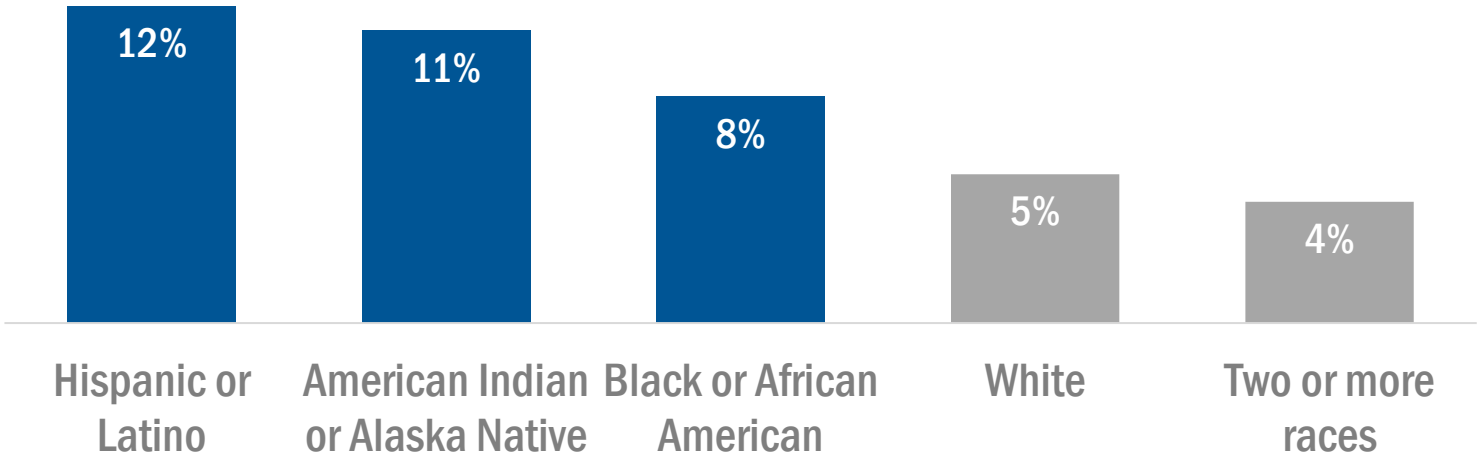
Cost

Coverage

Equity

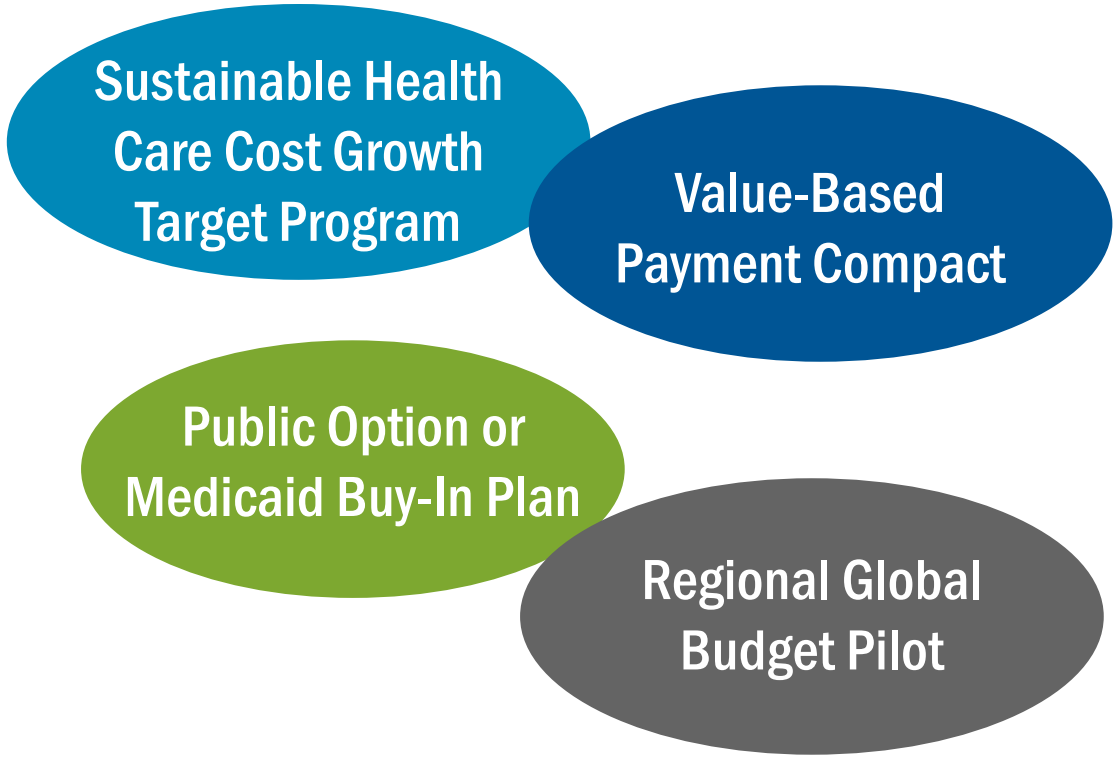
Background: Racial Inequities

Communities of Color are more likely to be uninsured in Oregon



Cost

Containing Costs & Aligning Across Markets



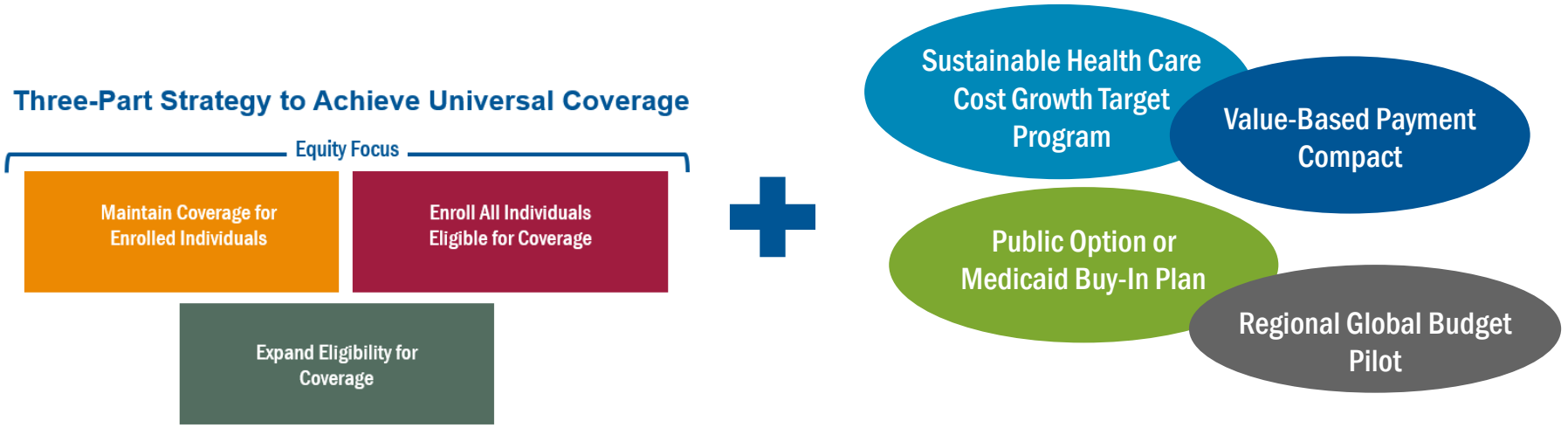
Coverage

Coverage

Three-Part Strategy to Achieve Universal Coverage

Universal Coverage, Cost Containment & Quality

Achieving universal coverage is a critical piece to the larger vision of equitable cost containment & quality improvement



Thank You

Oregon Health Authority

Community Engagement

Laurel Swerdlow

Dr. Zeenia Junkeer

Public Engagement Audiences

Communities

- Rural and underserved communities
- Communities throughout the state
- Communities that experience health care disparities
- *BIPOC*
- Individuals whose insurance coverage represents a range of current insurance types
- Individuals needing disability services and long-term care services

Business

- A range of businesses, based on industry and employer size
- *Unions*

Health Care industry

- *Providers*
- *Health care administrators*
- *Payers*

“Public engagement” refers to the process of soliciting public input.

It includes community engagement, business engagement, and health care industry engagement.

Today's focus is on community engagement.

Community Engagement: Logistical Decisions

REMOTE MEETINGS

REGIONAL RECRUITMENT

2 PHASES

FINANCIAL SUPPORT OF CBOS

Public Policy Participation Model

- Formerly "Citizens Jury"
- Members of public hear "expert testimony" on relevant issues
- Small groups discuss questions with support of trained facilitator
- Advantages of model
  - Well-suited for politically divisive/complex issues; emphasizes learning & dialogue
  - Opportunity to be informed before responding
  - Humanize the issue and people's responses in small groups
  - Centers participants as experts in their own experience

Community Engagement Goals

- Design a plan to improve the health status of individuals, families and communities
- Remind the public of the Task Force charge in SB770 (2019)
- Share elements of June 2021 interim status report and explain process
- Provide authentic space for public to learn, react, ask questions
- Get feedback from communities on specific questions and issues
- Allow space to build trust between and among the public and Task Force

New Hybrid Proposal

Phase 1: Public Policy Participation Focus Groups

Phase 2: Listening Sessions

Updated Sample Community Engagement Approach

- Sep – Oct: CBO Outreach, Facilitator Procurement
- <u>Phase 1: Nov – Feb - Remote Focus Groups</u>
  - 8 remote Public Policy Participation model focus groups organized in partnership with CBOs
  - Regionally recruit: 8 regions
  - Participant Stipends
  - **Focus on interim status report and outstanding design elements**
- Feb – Mar (2022): Integrate Feedback

<u>Phase 2: Apr – Jul - Remote Listening Sessions</u>

- 8 remote listening sessions organized in partnership with CBOs
- Regionally promote: 8 regions
- **Focus on Phase 1 integration and finance and revenue**

- Aug – Sept (2022): Integrate Feedback, Draft and Submit Report

Public Comment

Task Force Workplan Proposal

Oliver Droppers

Dr. Bruce Goldberg


Outstanding Design Elements
Financial Plan
Public Engagement

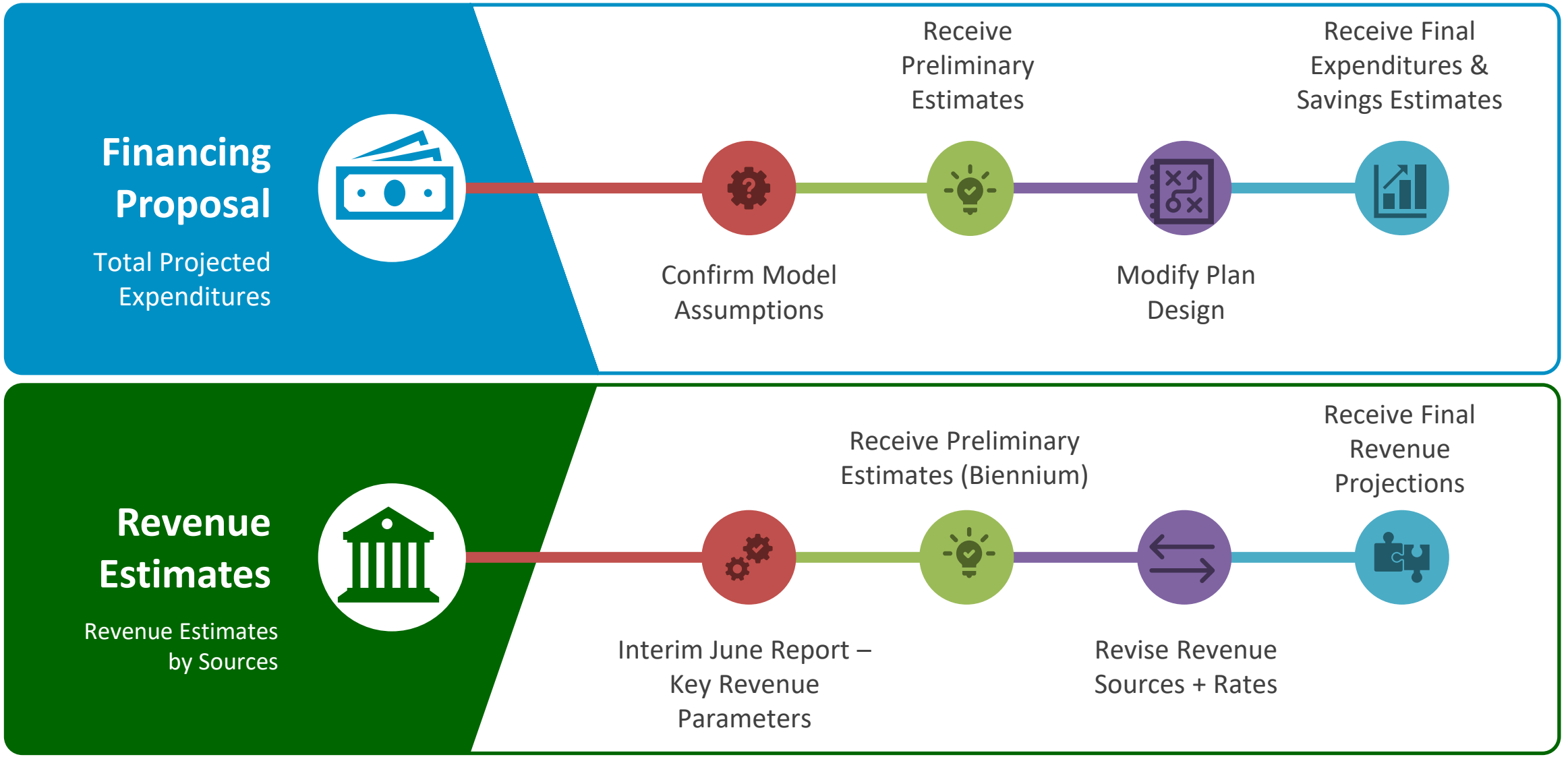
Confirmed Outstanding Design Elements

1. Address social determinants of health and covering health related services
2. Long term care services and supports
3. Provider participation requirements and conditions
4. Supplemental coverage
5. Existence of reserve fund and financial emergency preparedness
6. High level transition timeline

Confirmed Financial Analysis Scope

- Cost/Savings Analysis
- Revenue Analysis
- Distribution Analysis
- Federal Considerations

Financing and Revenue Interplay



Finance and Revenue Development Process

1. Review and confirm final set of assumptions used to develop cost projections for multi-year estimates of the Plan
2. Modify plan design based on preliminary cost estimates; variables include but not limited to benefit coverage, provider rates, out-of-pocket costs, etc.
3. Refine revenue funding proposal based on June status report parameters
4. Modify revenue sources and/or tax rates based on prelim financial estimates
5. Finalize financing and revenue proposal as a package

= Task Force input

= Task Force approval

Proposed Public Engagement

Community Engagement
2 Phased Approach

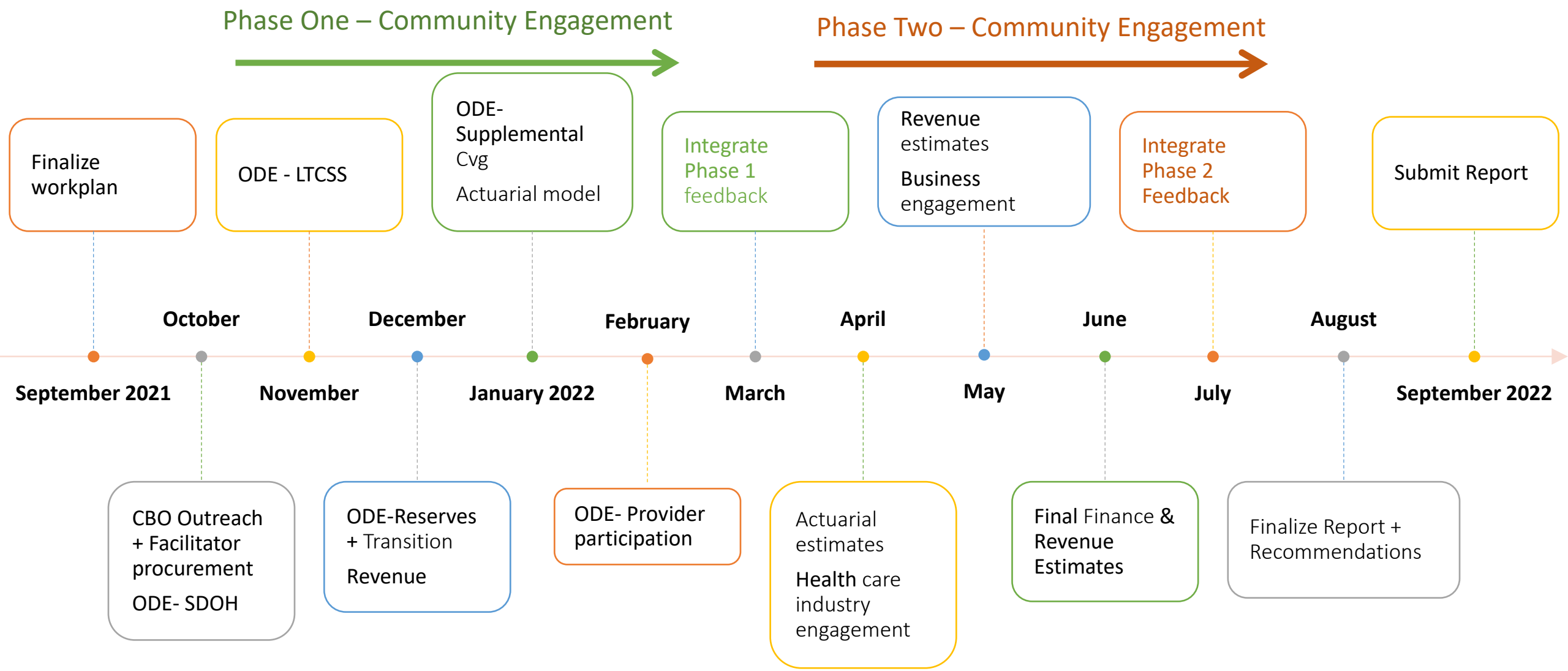
Business Forums

Health Care Industry Forums

Proposed Community Engagement Approach

Phase 1: Public Policy Participation Focus Groups

Phase 2: Listening Sessions



*Any in-person meetings will depend on the status and severity of the COVID-19 pandemic and necessary public health precautions

Discussion

Communications

Oliver Droppers

Dr. Bruce Goldberg

Task Force – External Communications

Revised Guidelines

- Voting members agree they have different perspectives and can respond, independent of one another, as long it is clear a member is speaking on their **own behalf** and do not represent the views of the task force.
- Members who prepare individual communications, should **coordinate** with other task force members.
- Voting members should be able to **respond quickly** and not wait till a task force meeting to review formal written responses prepared on behalf of the task force.
- Formal written communications representing the work of the task force (e.g., deliberations, draft proposals, community forums) are to be **reviewed and agreed** upon by the full task force prior to its dissemination and posting on OLIS.

October Task Force Schedule

- Engage national actuarial firm
- Finalize engagement plan including facilitator procurement
- October 28 Task Force Meeting
  - Outstanding Design Element – SDOH
  - Community engagement – tools and resources