

January 26, 2022

Introduction

This document summarizes the preliminary estimates for status quo expenditures, revenues, and related considerations. Estimates are based on 2019 to establish a pre-COVID baseline using the best available data. Expenditures will be projected forward to an “implementation year” in future iterations of the estimates.

General Estimation Strategy

Where possible, reported actuals are utilized for the preliminary estimates. Estimates for current payer sources with incomplete public reporting are generated using extrapolation of national data coupled with state-specific data sources to triangulate a reasonable result.

Outstanding Model Refinements

Through the data validation process and insight provided by various state experts these estimates will be updated to reflect the best available information. For example, recent meetings with state staff identified weaknesses in federal reporting of exchange plan participation and costs. Specifically, federal reporting that is used for the current estimates for this population are based on selection of plans on the exchange and not actual enrollment following premium payment. The state can provide more accurate information for this data than was reported by the federal government and updates will be made accordingly. This is a good example of both the need and process for ongoing validation of estimates by continuing to verify results against multiple sources of information/reporting even when the original source appears reasonable. A list of key ongoing validations and pending refinements are outlined below.

It is important to note that there are multiple areas where data does not exist, and estimates will have to remain assumption based. One example is charity care. There is not comprehensive reporting that can be used to evaluate what would be covered by a single-payer plan in the future.

Revenue Estimates

- Pending data for portions of state employee revenue used to support coverage (E.g., Medicaid revenue for PEBB, OEBC contribution distribution, PEBB 2019 employee contributions)
- Pending validation of Oregon-specific Medicare financing
- Pending potential adjustment for cross program duplication of funding assumption (E.g., Medicaid contractor employees having their premiums built into Medicaid administrative reporting and into Private Health Insurance reporting)

Expenditure Estimates

- Pending data for small group plans and off-exchange individual plans
- Pending data for OEBC final expenditures
- Pending validation of 2019 PEBB expenditures/enrollment
- Pending data for indigent behavioral health expenditures for services paid by SAMHSA that would transition to coverage under the single payer model
- Pending refinement of charity care assumption
- Pending refinement of out-of-pocket expenditures as final step in status quo model
- Pending validation that any potential duplication between Medicaid and Medicare are correctly addressed

Preliminary Calendar Year 2019 Revenue Estimates by Source

Revenue Streams	Status Quo Revenues
Employer	\$13,134,706,416
Employee/Individual	\$8,840,621,158
Federal Title XVII	\$7,939,899,816
Federal Title XIX	\$7,014,534,661
Federal Title XXI	\$291,520,443
Other Federal Funds	\$2,112,620,374
State Funds	\$2,762,964,911
Charitable Contributions	\$195,000,00
Total	\$42,291,867,779

Preliminary Calendar Year 2019 Expenditure Estimates by Current Program

Program / Population	Population ⁽¹⁾	Status Quo Expenditures ⁽²⁾	Notes
Private Health Insurance	2,299,968	\$15,575,752,563	
Individual – Exchange	148,180	\$995,769,600	
Individual – Off Exchange	Pending	Pending	
Small Group	Pending	Pending	
PEBB	137,367	\$972,800,000	
OEBB	154,823	\$1,096,419,187	
All Other Employers	1,859,598	\$12,510,763,776	Off-exchange included. Refinement pending results for off-exchange data
Employees Living in Border States and Their Dependents	272,646	\$1,930,813,287	
Medicare	782,445	\$9,682,804,654	
Medicaid	859,481	\$9,426,870,932	
CHIP	128,696	\$448,492,989	
Military (DOD/VA)	37,932	\$1,511,602,294	
Out of Pocket	N/A	\$3,520,531,060	May be refined as other categories finalized
Uninsured	299,241	N/A	
General Assistance (Charity Care)	N/A	\$195,000,000	
Indigent Behavioral Health	N/A	Pending	
Total	4,680,409	\$42,291,867,779	

(1) The Medicaid population totals exclude dually eligible members from the population count. Medicaid reimbursed expenditures are reflected in Medicare. All other Medicare covered expenditures are included in the Medicare row.

(2) Expenditure totals exclude long-term care and dental for all payer sources other than Medicaid.