



May 24, 2022

TO: Bridge Plan Task Force  
FR: Maribeth Guarino, Health Care Advocate, Oregon State Public Interest Research Group (OSPIRG)  
RE: Plan Design for a Bridge Plan

OSPIRG is a consumer advocacy group with members across the state working towards a healthier, safer world for all of us. We have been a proponent of health policy solutions that work to lower costs for Oregonians, including the Medicaid churn population, for years. As a stepping stone between the Oregon Health Plan (OHP) and private insurance, the bridge plan must have a strong plan design that allows Oregonians to continue their treatments, get necessary procedures, and maintain the same quality of care that they received on their previous plan. It should not feel so drastically different in coverage levels or cost compared to OHP that consumers experience a lapse in care.

Though the bridge plan is intended to mostly benefit the Medicaid churn population, with a 1331 waiver in place there will be Oregonians who, due to changing income levels, will also join the bridge plan from the Health Insurance Marketplace. Therefore, the plan design must take into account the differences between private plans and OHP. The bridge plan should include at least the essential health benefits required of plans on the ACA marketplace, but we should strive to cover more. A plan that mirrors the OHP's level of services and coverage would be better, allowing for better continuity and access to care as Oregonians switch between these plans; at the same time, it leaves the door open for Oregon to adopt a public option in the private market that mirrors the bridge plan design there, and in the meantime may encourage private insurers to cover those services to accomplish the same goals for those switching to private plans.

In designing the bridge plan, the task force should carefully consider what services and type of care we are promoting. The plan should be designed to promote primary and preventative care, offer services like dental and behavioral health, and eliminate low-value care and redundant or unnecessary services. We have a unique opportunity to shape the system in creating this plan, and we should use it to improve the experience for Oregonians and the quality of care they receive.

The bridge plan should also minimize cost-sharing and premiums for consumers. One of the goals for this program is to reduce the impact of Oregonians going from paying little-to-nothing on Medicaid to paying large premiums and deductibles for private coverage. The cost-sharing for this plan should reflect the nature of the bridge plan as a stepping stone between public and private coverage. This task force should pursue all possibilities in reducing consumer costs,

including sliding scale fees, caps on cost-sharing based on a percentage of income, and any federal funds available through a waiver to provide subsidies to bridge plan enrollees.

The bridge plan is an opportunity to improve the health care system in Oregon by reducing costs and improving care. We should take every opportunity available to us to do so.