



Joint Task Force on the Bridge Health Care Program Meeting Summary

Attendees	<ul style="list-style-type: none">• <i>Senator Kennemer – video</i>• <i>Senator Steiner Hayward – video</i>• <i>Representative Prusak – video</i>• <i>Representative Hayden – video</i>• <i>Matthew Sinnott - video</i>• <i>Patrick Allen – video</i>• <i>Stefanny Caballero - video</i>• <i>Adrienne Daniels – video</i>• <i>Antonio Germann – video</i>• <i>Lindsey Hopper – video</i>• <i>Eric Hunter – video</i>• <i>Kirsten Isaacson – video</i>• <i>William Johnson – video</i>• <i>Andrew Stolfi – video</i>• <i>Sharmain Johnson Yarbrough – video</i>• <i>Keara Rodela – phone</i>• <i>Alicia Temple – video</i>• <i>John Hunter - video</i>
Absent	<ul style="list-style-type: none">• <i>Jonathan Frochtzwajg</i>• <i>Fariborz Parkseresht</i>• <i>Heather Jefferis</i>
Date/Time	June 14, 2022 8:30-12:00 AM OLIS (recording)

Agenda	Welcome and Introductions Roadmap, Updates and Goals for the Day Actuarial Analysis Plan Design, Part 2 Public Comment Wrap-up and Next Steps
Discussion of Key Issues	Roadmap, Updates and Goals for the Day Shauna Petchel (Legislative Policy and Research Office) provided status updates relevant to the Task Force’s work, including: <ul style="list-style-type: none">• Meeting materials include a report recently submitted by Oregon Health Authority (OHA) and Oregon Dept. of Human Services (ODHS) to the Legislature regarding planning for the public health unwinding (link below).• The Community and Partner Workgroup required by HB 4035 met for the first time on May 26th to advise on the redeterminations process. The workgroup’s meeting materials may be of interest to the Task Force.• The Centers for Medicare and Medicaid Services (CMS) posted proposed revisions to the 2023 federal funding formula for the Basic Health Program



(BHP) for public comment. Staff are monitoring revisions that are relevant to Task Force planning.

- A consumer listening session has been scheduled for July 21st, 5-7pm. Staff requested that Task Force members share information with their organizations and communities and connect with staff if interested in assisting with planning efforts related to that event. Staff also offered to connect with Task Force members interested in helping plan the listening session.

Actuarial Analysis

Joel Ario (Manatt) presented an actuarial analysis of a BHP for Oregon. The analysis was a preliminary assessment of whether it would be financially feasible for coordinated care organizations (CCOs) to offer BHP coverage as envisioned in HB 4035.

The analysis focused on a subset of the BHP-eligible population, including:

- Approximately 21,300 people who earn between 138-200% of the federal poverty level and are uninsured; and
- Approximately 32,500 people earning 138-200% FPL who purchase subsidized coverage in the Marketplace.

The analysis did not include consideration of people continuously enrolled in Medicaid during the public health emergency (PHE) who would be eligible for the BHP (estimated 55,000).

Key findings include:

- Federal funding *for the study population* would range from \$329-386 million depending on whether temporary enhancements to premium tax credits under the American Rescue Plan Act (ARPA) are renewed beyond 2022. These estimates did not consider a proposed federal change that removes a penalty for states with 1332 waivers.
- Estimated costs to cover *the study population* were \$317 million at Medicaid reimbursement levels.
- A projected surplus of \$12-69 million *for the study population* could support higher-than-Medicaid rates paid to CCOs.
- The program could reduce the uninsured rate by 0.5%; this reduction could be impacted if the program included premiums or cost sharing.
- Transitioning the study population to a BHP is not projected to directly change the average morbidity of people who would continue to buy coverage in the Marketplace; however, it may increase premiums for those in the Marketplace due to the elimination of an effect called “silver-loading.”

Further analysis will be needed to support the Task Force’s work including a) analysis of revenues and costs for people enrolled in Medicaid and b) those earning more than 200% FPL who would remain in the Marketplace. A carrier data call is planned in the coming weeks to obtain data needed for further



analysis to be completed over the summer.

Plan Design, Part 2

Tim Sweeney (OHA) provided an overview of how the plan design assumptions in the feasibility study relate to program design decisions. The feasibility study was based on a potential BHP plan that covered essential health benefits (EHBs), included dental coverage, and did not include premiums or cost sharing for enrollees. This plan design meets the requirements of House Bill 4035 and matches initial preferences expressed by the Task Force at the May 26th meeting.

While the feasibility study suggests federal funding may be sufficient to finance the program as initially envisioned, additional work is needed through the summer. CMS will also conduct its own actuarial analysis to determine funding levels. Thus, Task Force recommendations need to provide a framework for benefits design that can be applied to a range of funding scenarios rather than a single estimate.

Task Force members discussed initial recommendations for how to prioritize among program design elements in the event that costs must be reduced. Introduction of enrollee cost sharing was generally identified as the preferred first step. Considerations included:

- Use of premiums rather than co-pays or deductibles, with a preference for state-administered rather than CCO-administered premium collection due to CCO operational constraints.
- Attention to how premiums create barriers to enrollment, and the need to keep premiums affordable through a sliding scale approach coupled with navigation support to streamline coverage transitions.

Limits to covered services were identified as the preferred second step. Considerations included:

- Operational impacts to CCOs from limiting or eliminating services from the benefits package.
- Attention to how limits on covered services may impact continuity of care.

Task Force members generally expressed a preference to avoid setting rates lower as a mechanism to reduce program costs, to avoid exacerbating workforce pressures and delivery system strain.

Wrap-up and Next Steps

The next Task Force meeting on July 12th will continue discussion of actuarial analysis, further explore how the creation of a Bridge Program may impact Marketplace premiums and enrollment, and begin discussion of mitigation strategies.



Action Items	<ul style="list-style-type: none"> Members are encouraged to share information with their networks regarding the consumer listening session on July 27th (5pm).
Follow-up Questions	<p>Members requested a crosswalk to better understand differences between the Essential Health Benefits (EHB) package and OHP covered services.</p> <p>Other questions included:</p> <ul style="list-style-type: none"> How to estimate the cost of enrollment churn, as it may not be well captured in analyses of Medicaid or Marketplace enrollees. What plan design options exist for customizing how co-pays may apply to certain services? What options exist for ensuring health care provider reimbursements are maximized? What research exists regarding the relationship between premiums and enrollment? How to consider the future costs of deferred care that may result from barriers to care experienced during the pandemic.
Meeting Materials (OLIS)	<ul style="list-style-type: none"> Slides: Roadmap for the Task Force Slides: Actuarial Analysis Slides: Plan Design, Part 2 Glossary of Key Terms and Acronyms (updated) Background reading materials (updated) HB 2934 (2015) Work Group Recommendations HB 4035 (2022) OHA Report on Unwinding the Federal Public Health Emergency American Community Survey demographic profile of potential BHP enrollees

Future meetings are scheduled at 8:30am – 12:00pm on the following days unless otherwise noted:

- July 12th
- July 27th (consumer listening session, 5-7pm)
- July 26th
- August 9th
- August 30th