

September 15th, 2022

Chair Goldberg, Vice-Chair Junkeer, and Members of the Joint Task Force on Universal Health Care:

We write today representing the 501(c)(3) non-profit organization Project Access NOW. As a community-based organization providing access to health care and health-related resources for un- and under- insured communities, Project Access NOW has a unique understanding of the dire state of our current healthcare system and just how desperately the people of Oregon need universal coverage. We are writing today to re-emphasize our support for the fantastic work this Task Force has done in developing a Universal Plan for the state of Oregon. While the road ahead is long and uncertain, the foundation already laid by this Task Force will be instrumental in ensuring every Oregonian has equitable access to the healthcare they need, a core tenet of our mission as an organization.

The adoption of a Universal Plan in Oregon stands to materially change the lives of many, if not most, of the community that Project Access NOW currently serves, and as such, we are very pleased to see the inclusion of features in the plan such as:

- 1. Universal Eligibility: A significant portion of the population we currently serve as an organization is made up of individuals who do not qualify for the coverage options currently available to Oregonians, either due to immigration status, income, or other reasons. We believe it is critical that ALL Oregonians be served by the Universal Plan and are pleased to see that the Task Force's report reflects this view.
- 2. Consumer Cost-Sharing and Affordability: We also believe that the affordability of a Universal Plan is critical to its success. Not only are consumers frequently discouraged from seeking health insurance coverage due to monthly premiums they may not be able to afford, but we often see insured individuals who are discouraged from seeking care and using their coverage due to the out-of-pocket costs they may incur. It has been proven empirically time and time again that this results in disastrous health outcomes for individuals and higher costs for health systems due to emergency care usage and exacerbated health conditions that are more expensive to treat. We are very pleased to see that the Task Force has recommended that the Universal Plan not require premiums, co-payments, deductibles, or other consumer cost-sharing methods, as this will increase financial efficiency for both consumers and the entire healthcare system.
- **3. Behavioral Health**: Many of the most vulnerable individuals we serve have intersectional medical and behavioral health issues and we believe that addressing those issues amounts to life-saving care. We are very pleased to see that behavioral



health benefits have been included in the coverage provided in the Task Force's report.

- 4. Social Determinants of Health: As an organization that currently assists CCOs in distributing their Health-Related Services dollars in individual and community investments on behalf of the Oregon Health Plan, we are very pleased to see that a similar commitment to upstream investments in the social determinants of health has been reflected in the Universal Plan. We are also pleased to see that these investments will have local representation via influence by the Regional Entities established by the Plan.
- **5. Governance Board**: An undertaking of the magnitude required by a Universal Plan will require a strong governing entity with equitable representation of a diverse group of stakeholders. We support the structure proposed in the Task Force's report and are especially pleased to see the guarantee that some members of the board will be individuals with lived experience with OHP, Medicare, and being uninsured, and that at least four of the nine members will be focused on public engagement.

Additionally, we would like to offer the following suggestions to strengthen the Task Force's proposal:

- 1. "Resident" definition: How will the term "resident" be defined for the purposes of determining eligibility for the plan? We encourage the task force to concretely define this term in the report as its current ambiguity leaves the potential for an unduly restrictive interpretation to be taken in the future.
- 2. **Alternative Providers**: Providers outside of the traditional physician model such as Community Health Workers or Peer Support Specialists have been proven to be beneficial in providing care to diverse communities and we are pleased that there has been space created in the report for such providers. We encourage the Task Force to continue to refine their language supporting terms such as "other health care professionals" and "non-physician provider personnel" in the "Health Care Providers" section of the report to specifically include the specific types of alternative providers that should be covered to avoid uncertainty in the future.
- 3. **Regional Entities**: We encourage the Task Force to develop a more specific proposal for developing "Regional Entities" to advise the Universal Plan. These entities should be made up of individuals representing local community benefit organizations, consumers, local health workers, and other relevant groups, and this should be reflected in the Task Force's proposal.
- 4. **Enrollment and Assistance**: Community benefit organizations currently serve as assisters to individuals who are seeking health insurance in Oregon. Despite the



automatic enrollment feature indicated in the report, there will still be a significant need for enrollment assistance and community outreach during the rollout of the Plan and beyond. We encourage the Task Force to include language that will reflect the role that CBOs will serve in the Enrollment and Outreach process, and to appropriately resource those CBOs to successfully do that work.

As an organization working every day to change the material conditions of vulnerable communities through access to healthcare, a Universal Plan is near and dear to our hearts. We're very excited to see it becoming closer to a reality in the state of Oregon. Thank you for your attention to this matter, and we look forward to your final report.

Thank you,

Project Access NOW Advocacy Committee

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