

April 1, 2021

Oregon State Legislature House Health Care Committee 900 Court St. NE Salem, OR 97301

Re: House Bill 2010-6 - Public Option

Chair Prusak, Vice Chairs Salinas and Hayden-

On behalf of Oregon's community hospitals and the patients they serve, the Oregon Association of Hospitals and Health Systems (OAHHS) appreciates this opportunity to provide initial comments on the -6 amendment to House Bill 2010. OAHHS strives to strengthen Oregon's hospitals and health systems, deliver quality care, and best serve our communities while promoting health and well-being for all Oregonians. During a continued challenging time for Oregonians and the health care system, moving this conversation towards the interim allows all involved to have in-depth conversations and give the concept the time it deserves. We appreciate the more thoughtful approach to continuing a conversation through the interim on how best to serve Oregonians to ensure better health, better care, and lower costs.

As this conversation continues and we continue to review this amendment, we wanted to highlight some questions and potential challenges ahead with this work.

- Oregon has one of the largest per capita enrollments in Medicaid, and one of the most competitive health care marketplaces in the nation. With passage of the American Rescue Plan, Oregonians will be eligible for increased subsidies in the health insurance exchange making health care more affordable. Most notably, subsidies no longer end at 400% of the federal poverty level which will provide more affordable, accessible health insurance options to Oregonians and their families with household incomes over that amount. It is critical that the work moving forward consider these significant policy shifts, and any other coverage changes at the federal and state level. The landscape is changing as this conversation continues and future work must account for and specifically provide analysis for this.
- Oregon has set a health care vision based on coordinated care, community health
  investments, and providing value to health care consumers. We have collectively committed
  to a goal of decreasing costs for all through the Health Care Cost Benchmark Program and
  we should maintain that strong commitment. The work ahead should ensure alignment and
  analysis of not that work and the overall goals of health reform.
- A key component of Oregon's success in health reform as been partnership and
  collaboration most recently highlighted by the leadership shown through the value-based
  payment compact. We will continue to raise concerns about regulatory requirements or
  mandates for payment caps or required participation that will only serve to stifle
  innovation and transformation. We hope the work outlined in this amendment will consider
  the consequences of any requirements not just on cost but on access and quality of services
  to consumers.
- Lastly, we hope as this work moves to the agencies there continues to be a clear expectation of working with industry and specifically hospital leadership to not only understand the

progress but to continue to understand the challenges facing Oregonians this policy is attempting to solve. As we have seen, policy not informed by operational reality will not achieve its desired intent. It is by working together under a shared understanding we can work to form the best policy on behalf of Oregonians.

Our organization and our members thank you for your time and your commitment to Oregonians during this challenging time. We look forward to working with the legislature, OHA, DCBS and other stakeholders on this issue.

Thank you,

Sean Kolmer

Senior Vice President of Policy and Strategy

Oregon Association of Hospitals and Health Systems