

February 11, 2022

TO: House Health Care Committee

FR: Maribeth Guarino, Health Care Advocate, Oregon State Public Interest Research Group

(OSPIRG)

RE: On HB 4035 -1 and a state-based marketplace

Good morning Chair Prusak, Vice Chairs Hayden & Salinas, and members of the committee, for the record my name is Maribeth Guarino and I am the health care advocate at OSPIRG. I'd also like to direct the committee to a letter submitted on behalf of a coalition of 12 organizations from provider groups to policy experts and other consumer advocates that support moving off of healthcare.gov to a state-based marketplace.

While we appreciate the state's efforts to tackle these immediate redetermination issues, it is vital that we are implementing lasting solutions and thinking ahead. A state-based marketplace presents an opportunity to move Oregon forward - towards lower costs and better coverage. As this bill has been under discussion, we were excited to see it in multiple versions of draft language and **are disappointed to not see it in the -1.** 

The Marketplace Advisory Committee and state agencies have identified a state-based marketplace as a system that would benefit a myriad of health care efforts in the state. In 2019, the <a href="HIMAC">HIMAC</a> noted that to "provide better consumer services and to be flexible enough to implement state health policy priorities and initiatives, Oregon would be well served by a transition to its own enrollment and eligibility technology." Just a few months ago, OHA's public option <a href="implementation report">implementation report</a> indicated that a state-based marketplace would be necessary to take full advantage of a 1332 waiver, and would give the state "more autonomy and flexibility in enrollment, marketing and outreach."

We understand that OHA believes it has the power it needs to move forward with a state-based marketplace without further legislative authority. While this is encouraging and we appreciate the statement, it's still concerning that explicit direction is not included in this bill, given the need for legislative approval and Stage Gate processes for Oregon IT projects, as well as the precedent other states have set in using authorizing legislative language to mark the transition to a state-based marketplace. Without a state-based marketplace, many of the purported goals and plans under discussion for Medicaid redetermination and health care transformation are severely hindered, including smoothing transitions from Medicaid to Marketplace plans and implementing a bridge plan or public option.

Oregon should follow the example set by states like Nevada and New Mexico so that we can pursue innovative solutions to health care coverage and costs. With its own platform, Oregon would have the data at-hand to understand Oregonians' health coverage needs, and the infrastructure to serve them more accurately and efficiently without the restrictions that come with using federal interfaces for state services.

I'd also like to touch on the bridge plan in this bill. Creating a task force to develop a bridge plan is a good opportunity to address the immediate needs of Oregonians moving off OHP. However, Oregonians of all income levels struggle with health care costs, and it's important that as we look towards the 2023 long session that it is part of a larger conversation focused on creating a public option available to all Oregonians purchasing insurance on the marketplace.

We look forward to the continued conversation, thank you.