



About this REPORT

This annual report is required by Oregon Revised Statute 741.222 and submitted to the Legislative Assembly, Gov. Tina Kotek, and the Oregon Health Policy Board. This report explains how the Oregon Health Insurance Marketplace serves its consumers and partners and works to connect Oregonians to coverage. Although Oregon operates a direct enrollment Small Business Health Options Program (SHOP), this report will focus on individual market coverage, which is the primary work of the Marketplace. This report is part of an ongoing conversation to spotlight the people the Marketplace serves, its work, the leaders it collaborates with, and the challenges still ahead.

Other languages and formats

This document is available in other languages, large print, or braille. Contact the Oregon Health Insurance Marketplace at info.marketplace@dhsoha.oregon.gov or call 855-268-3767 (toll-free). The Marketplace accepts all relay calls.



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A welcome from our Director

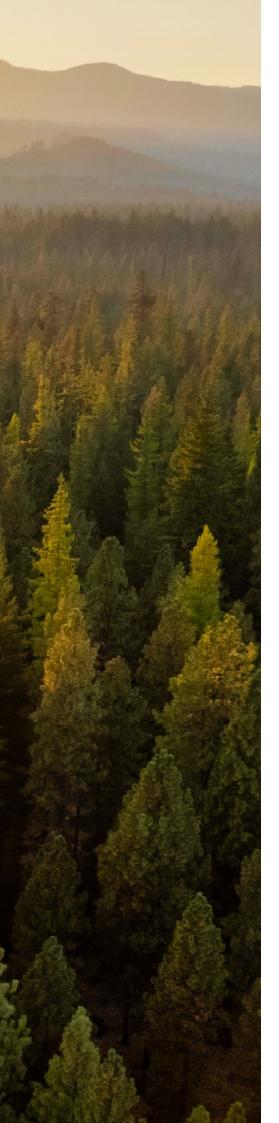
It is with great pleasure that I share with you the progress and achievements we have made in ensuring access to quality health coverage for all Oregonians. As the Director of the Oregon Health Insurance Marketplace, I am proud to report that our efforts have resulted in greater access to health coverage and affordability programs throughout the state.

Over the past year, we have worked tirelessly to continue to help expand access to essential health coverage, enhance the quality of coverage available, and promote equitable access to health coverage and care for all residents of Oregon. Through collaborative partnerships and innovative initiatives, we have helped make strides in improving the health and well-being of our communities. I am grateful for the dedication and hard work of our team, as well as the unwavering support of our partners, in making these accomplishments possible.

I invite you to explore this report to learn more about the impact of our programs and initiatives, as well as our vision for the future of health coverage in Oregon. Your continued support and partnership are invaluable as we strive to help create a healthier and more equitable future for all Oregonians. Thank you for your commitment to our shared mission.

Warm regards,

Chiqui Flowers



Introduction

What is the Oregon Health Insurance Marketplace?

The Oregon Health Insurance Marketplace is the state's health insurance marketplace established in 2015 as part of Oregon Senate Bill 1 (orhim. info/3JbbaxC) and under the Affordable Care Act (2010). The Marketplace is a state-based marketplace which uses the federal platform (HealthCare. gov) for application and enrollment processing. The Marketplace contributes towards the state's goal of eliminating health inequities by 2030 by helping Oregonians understand their health coverage options, connecting people to free local assistance from trained health coverage experts, acting as Marketplace subject matter experts for the community, and certifying the health plans sold to Oregonians through HealthCare.gov.

Who we serve

Most Oregonians have access to health coverage through a job, the Oregon Health Plan (OHP), Medicare, or Veterans Affairs. For those who do not have these options available to them, the Marketplace is available to offer guidance and financial assistance, which helps relieve some of the burden of the cost of coverage for those who qualify. The population of people who purchase coverage through the Marketplace primarily includes lawfully-present immigrants, the selfemployed, entrepreneurs, part-time workers, and employees of smaller employers that do not offer health insurance.

At a glance: 2023 the Marketplace in 2023

Our mission

The Oregon Health Insurance Marketplace empowers Oregonians to improve their lives through local support, education, and access to affordable, high-quality health coverage.

Open enrollment recap



145,509 Oregonians enrolled in Marketplace health coverage during 2024 open enrollment



\$524 average amount of premium tax credits for people receiving them



117,714 people got premium tax credits to help pay for coverage - that's 81 percent of enrollees



\$164 average monthly premium after premium tax credits for those receiving them

2023 Plan choices

- · 6 Oregon insurance companies offering health plans through the Marketplace
- · 26-62 health plans available on the Marketplace from which to choose
- · 6 Oregon insurance companies offering dental plans through the Marketplace
- · 14-20 dental plans available on the Marketplace from which to choose



When we first moved to Oregon, we did not have health insurance, and I had not lined up a full time position yet, and OHP came to the rescue for health insurance coverage...Once situations changed for us, I went through the Marketplace and secured excellent insurance coverage for myself with tax credits. If it weren't for the Marketplace, there is no way I could afford a monthly insurance premium.

Marketplace Enrollee Grants Pass

Outreach and education

1,026 outreach events and meetings attended with a combined estimated attendance of 2,014,735 during 2023 to educate the public and promote the Marketplace

Individual assistance

311 community-based organizations engaged as Marketplace assisters

260 insurance agents engaged to provide Marketplace plan advice and enrollment assistance January: 141,963 Oregonians enrolled in coverage for the 2023 plan year during open enrollment, which ended Jan. 15, 2023.

March: A temporary federal unwinding special enrollment period opened March 31 for individuals who lose Medicaid benefits through November 30, 2024.

April: Oregon Department of Human Services (ODHS) and Oregon Health Authority (OHA) began to issue renewal requests for each of its 1.5 million OHP members.

May: The COVID-19 Public Health Emergency ended on May 11, 2023.

June: The Oregon Legislature passed <u>Senate Bill 972 (orhim.info/SB972)</u>, which directed the Marketplace to begin work on procuring and implementing a state-based marketplace by Nov. 1, 2026.

July: Healthier Oregon Program expanded, extending OHP benefits to all adults ages 19 to 64 regardless of immigration status.

November: Open enrollment began for the 2024 plan year. Open enrollment ended Jan. 16, 2024 with 145,509 Oregonians selecting a private health plan for 2024. This is an increase of 2.4 percent over the previous open enrollment.



What does the Marketplace do?

The Marketplace works to connect people to quality health coverage, financial assistance to make coverage more affordable, and free help from local experts around the state. As a state-based marketplace, Oregon uses HealthCare.gov and relies on its federal partner to provide a website and call center for enrollment, process applications, determine eligibility, and manage enrollments. At the state level, the Marketplace:



Facilitates plan management

Oversees the plans sold to Oregonians via HealthCare.gov. That work is done in partnership with the Division of Financial Regulation (DFR) within the Department of Consumer and Business Services (DCBS).



Works with external partners

Awards grants to qualified insurance agents and community-based organizations that give one-on-one enrollment assistance to people needing coverage. Trains community-based organizations to assist Oregonians with their applications.



Conducts targeted and equity-focused outreach and education

Goes out into the community throughout the state – holding and attending public events, community meetings, and consultations with local leaders – to build awareness of coverage options. Launches an advertising campaign during the annual open enrollment period.



Participates in project work in conjunction with other OHA and ODHS divisions

2023 brought planning work for Medicaid redeterminations and renewals, planning for OHP Bridge (Oregon's Basic Health Program), and transitioning enrollees to the Healthier Oregon Program.



Collaborates with OHP and Senior Health Insurance Benefits Assistance (SHIBA) program

Works with the OHP and SHIBA programs to help people understand their health coverage options, connect them to assistance, and make sure Oregonians are getting the best coverage for their needs.

Commitment to equity

The Marketplace team has a long-standing goal of ensuring all work is done through a lens of equity, with a goal of helping to eliminate health disparities. The Marketplace:

- Provides outreach and education to all communities that is both culturally and linguistically supportive to each community.
- Reaches communities who disproportionately experience social and health inequities via communication strategies and channels where they already seek and trust information.
- Contracts with insurance carriers that are dedicated to providing high-quality affordable coverage to all Marketplace enrollees.
- Convenes focus groups with diverse participants to provide direct feedback on the Marketplace experience, coverage, and communications.
- Administers grant programs with partner agents and community partner organizations who are trusted in their local communities, with an emphasis on partners who work with communities that have historically experienced social and health inequities.
- · Provides education to all small business owners throughout the state, including initiatives to expand information to minority and Tribal business owners and entrepeneurs.
- · Maintains a strong government-to-government relationship with Oregon's Tribal nations.

Connect with us

The task of connecting Oregonians to affordable coverage is challenging, but it is work the Marketplace is doing with both seriousness and eagerness. The Marketplace welcomes discussion and collaboration with lawmakers, other partners in government, and the public about its operations. Contact Chiqui Flowers, Marketplace director, at chiqui.l.flowers@oha.oregon.gov, to get or stay more involved.

You can also join the Health Insurance Marketplace Advisory Committee meetings. Find them listed at orhim.info/HIMAC.

Please consider following us on social media and sharing our messages:



Facebook Facebook.com/ORmarketplace



Instagram
Instagram.com/ORmarketplace



LinkedIn: LinkedIn.com/company/ORmarketplace



Health Insurance Marketplace Advisory Committee

About

The Health Insurance Marketplace Advisory Committee (HIMAC) advises OHA in the governance and operation of the Marketplace. The committee represents a wide range of interested parties including insurance companies, insurance agents, enrollment assisters, health care providers, small businesses, advocates, consumers, and government agencies. The HIMAC, a sub-committee of the Oregon Health Policy Board, met six times in 2023. Learn more at originals.org/

Roster

Active members

- · Chair Kraig Anderson, chief actuary, Moda Health, Portland (completed term in Feb. 2024)
- · Gladys Boutwell, insurance agent, Insurance by Design, Wilsonville
- · Ron Gallinat, insurance agent and consultant, Central Oregon Employee Benefits, Bend
- · Paul Harmon, Vice President of Actuarial Pricing, Cambia Health Solutions, Beaverton
- Ali Hassoun, Interim Director, Oregon Health Authority Health Policy and Analytics (exofficio)
- Vice chair Lindsey Hopper, Executive Vice President, PacificSource Health Plans, Bend
- · Ines Kemper, small business owner, NW Clutter, Mollala (completed term in Feb. 2024)
- · Shannon Lee, entrepreneur and human development expert, Inner Harmonies, Silverton
- Joanie Moore, Sr. Human Resources Manager, Cow Creek Band of Umpqua Tribe of Indians, Roseburg
- Danielle Nichols, medical assistant, Oregon Medical Group and Lane Community College, Springfield
- Holly Sorensen, outreach project manager, Northeast Oregon Network, LaGrande (completed term in Feb. 2024)
- · Andrew Stolfi, Director, Department of Consumer and Business Services (ex-officio)
- Om Sukheenai, Insurance and Financial Professional, Chehalem Insurance Associates, Newberg
- · Nashoba Temperly, Manager of Benefits Navigation, Cascade AIDS Project, Portland

Members who left the committee in 2023

- Maribeth Guarino, health care advocate, Oregon State Public Interest Research Group, Portland
- Drew Tarab, Vice President of Informatics, Providence Health Plans, Bend

Focus

The committee continues to focus on plan affordability and accessibility of coverage in the individual market, including access to coverage through HealthCare.gov. It mirrors the core mission of the Marketplace, which is "to empower Oregonians to improve their lives through local support, education, and access to affordable, high-quality health coverage." HIMAC members bring their unique perspectives and draw on their lived experiences and professional expertise as they consider Marketplace operations. While some aspects of health coverage affordability fall outside the scope of the Marketplace and the committee, the group has been able to contribute concrete and actionable advice to the Marketplace.

Topics discussed

Throughout 2023, the committee considered a variety of topics including:

The implications of the end of the COVID-19 Public Health Emergency (PHE) and what would

- be needed for the Medicaid to Marketplace transition.
- The development of a work plan for 2023-2024, updating the committee charter and bylaws.
- · A legislative concept to transition to a state-based marketplace.
- · The proposed 2024 Marketplace assessment rate.
- Implications of federal policies and resolutions including the <u>No Surprises Act</u> (<u>orhim.info/NoSurpriseAct</u>, part of the <u>Consolidated Approriations Act of 2021, orhim.info/CAA21</u>) and <u>Inflation Reduction Act</u> (2022, <u>orhim.info/IRA</u>).
- The 2023 Legislative Session including discussion on Senate Bill 972 (orhim.info/SB972).
- Mitigation of Marketplace impacts from the implementation of the Basic Health Program (OHP Bridge, ohp.oregon.gov/bridge).

Bridge Program Task Force (BPTF)

Oregon House Bill 4035 (orhim.info/41q5ZCI), passed during the 2022 legislative session, established the BPTF to begin no later than March 31, 2022 to "develop a proposal for a bridge program to provide affordable health insurance coverage and improve the continuity of coverage for individuals who regularly enroll and disenroll in the medical assistance program or other health care coverage due to frequent fluctionations in income." The President of the Senate appointed Lindsey Hopper to serve on the BPTF as representative of the committee. Information about the BPTF can be found at orhim.info/3Jbnl9b.

Community and Partner Workgroup (CPWG)

Oregon House Bill 4035 (orhim.info/41q5ZCI) also established the CPWG "to advise the authority and the departments on the development of outreach and enrollment assistance and communications strategies, within the authority's legislatively approved budget, to communicate and assist medical assistance program enrollees in navigating the redetermination process and the enrollees' transition to coverage through the health insurance exchange." Gladys Boutwell and Nashoba Temperly are two veteran Marketplace partner grantees, and their participation with CPWG has been very impactful. Both partners are trusted resources serving diverse communities that have been harmed by social and healthcare-related inequities. Their experience and technical knowledge have helped provide important perspective relating to the barriers that Oregonians face navigating the complexities of health insurance. Information about CPWG work can be found at orhim.info/3Jbnl9b.



Moving to a state-based marketplace

Background

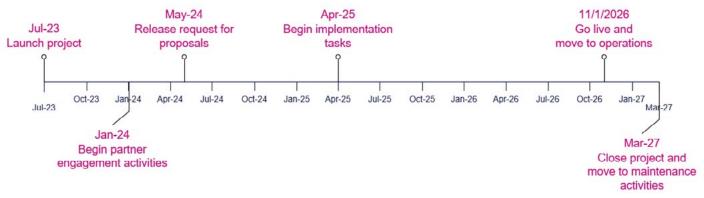
Senate Bill 972 (2023) requires OHA to transition the Marketplace from a state-based marketplace using the federal platform (SBM-FP) to a state-based marketplace (SBM) using its own technology in time for open enrollment for plan year 2027. Specifically, OHA is required to procure and administer an information technology platform or service and call center, separate from the federal platform and call center, to provide electronic access to the health insurance marketplace in this state by November 1, 2026.

The Oregon Health Insurance Marketplace helps people in Oregon access affordable, high-quality health insurance through enrollment in private health insurance and federal subsidies during annual open enrollment and special enrollment periods. A state-based marketplace will give more flexibility to make open enrollment fit the unique needs and budgets of people across Oregon. Additionally, transitioning to a state-based marketplace model will allow the Marketplace to incorporate more meaningful community input into process and procedure changes.

OHA is dedicated to its goal of eliminating health inequities in Oregon by 2030. With a state-based eligibility and enrollment platform, the Oregon Health insurance Marketplace will better serve communities in Oregon harmed by inequities through:

- Ownership of and access to data to better tailor outreach and enrollment strategies to disproportionately uninsured people including people of color and rural residents.
- Additional and more reliable data to allow Oregon to refine its outreach and communication strategies, both overall and in real time to reach priority communities most impacted by health inequities.
- The availability of additional translation and interpretation services to immigrants and nonnative speakers to help them complete the application or to communicate more effectively with navigators, agents and brokers, or the call center.

High-level project timeline



Stay connected with the project

Our goal is to keep our partners in the loop as developments arise. Stay connected by:

- Visiting the SBM Transition project site: <u>orhim.info/SBMtransition</u>
- · Signing up for email updates at <u>orhim.info/SBMupdates</u>
- Tuning in to Health Insurance Marketplace Advisory Committee (HIMAC) meetings.
 Information about the Committee and its meetings is available at originalstyles.org/

Supporting Medicaid renewals: transition project

Background

At the start of the pandemic, the federal Family First Coronavirus Recovery Act provided states an enhanced federal Medicaid match rate of 6.2% and directed that states that accepted the enhanced match rate could not terminate Medicaid members' coverage for the duration of the federal public health emergency (PHE). Oregon participated and, largely as a result, enrollment in Oregon's Medicaid system – the Oregon Health Plan (OHP) – rose considerably from about 1 million to about 1.5 million. Oregon's overall uninsured rate fell from 6.0% to 4.6%, with the largest improvements among priority populations. The enhanced federal match was expected to continue until the expiration of the PHE, at which point states would be required to initiate the regular redetermination process.

In Dec. 2022, Congress passed the Omnibus Consolidated Appropriations Act of 2022 and directed all states to begin Medicaid redeterminations no later than April 1, 2023, effectively decoupling the work that was previously tied to the expiration of the PHE. Starting in April 2023, Oregon began processing the largest volume of OHP renewals it has ever performed, revising temporary program changes in dozens of policy areas and transitioning potentially hundreds of thousands of people in Oregon to a different form of medical coverage in order to preserve the gains in coverage rates experienced during the pandemic. For more background on the PHE unwinding project, please read the <u>Unwinding the Federal Public Health Emergency: HB 4035 Report (orhim.info/HB4035report)</u>.

Marketplace Transition Help Center

In April 2023, the Marketplace launched the Transition Help Center. The primary purpose of the Help Center was to help people in Oregon who had been determined to be no longer eligible for OHP benefits transition to other health coverage, specifically through the Marketplace. The Help Center conducted direct outreach to members no longer eligible for OHP benefits including:

- Sending individualized letters describing the least expensive plan options, evaluating network coverage when able, and offering assistance with Marketplace applications and enrollment.
- · Calling individuals whose letters were returned to the Marketplace.
- · Contacting people by phone, text message, and email if they had not responded by enrolling in coverage or requesting communication be stopped.
- · Conducting outreach to individuals who were scheduled to have their OHP benefits closed due to non-response.
- Connecting individuals to local in-person assistance from assisters and insurance agents/ brokers.

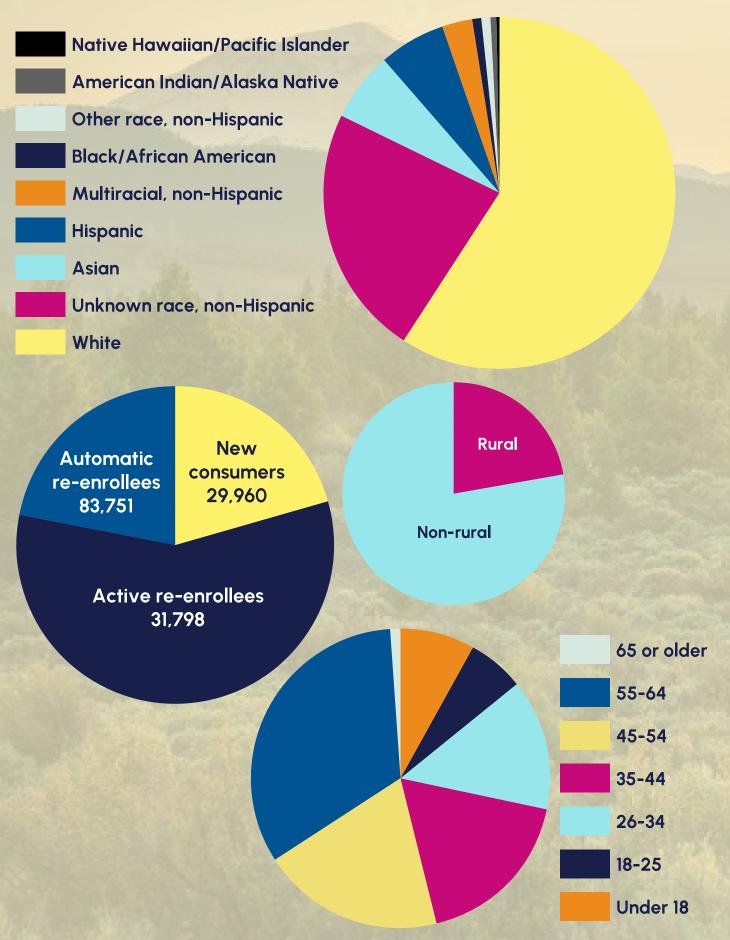
Marketplace transition notices were developed with multiple rounds of internal and external review and included information about plan options and estimated costs based on information recieved from the OHP program, how to enroll, where to find local help, and other financial assistance programs available while people made transitions in their coverage.

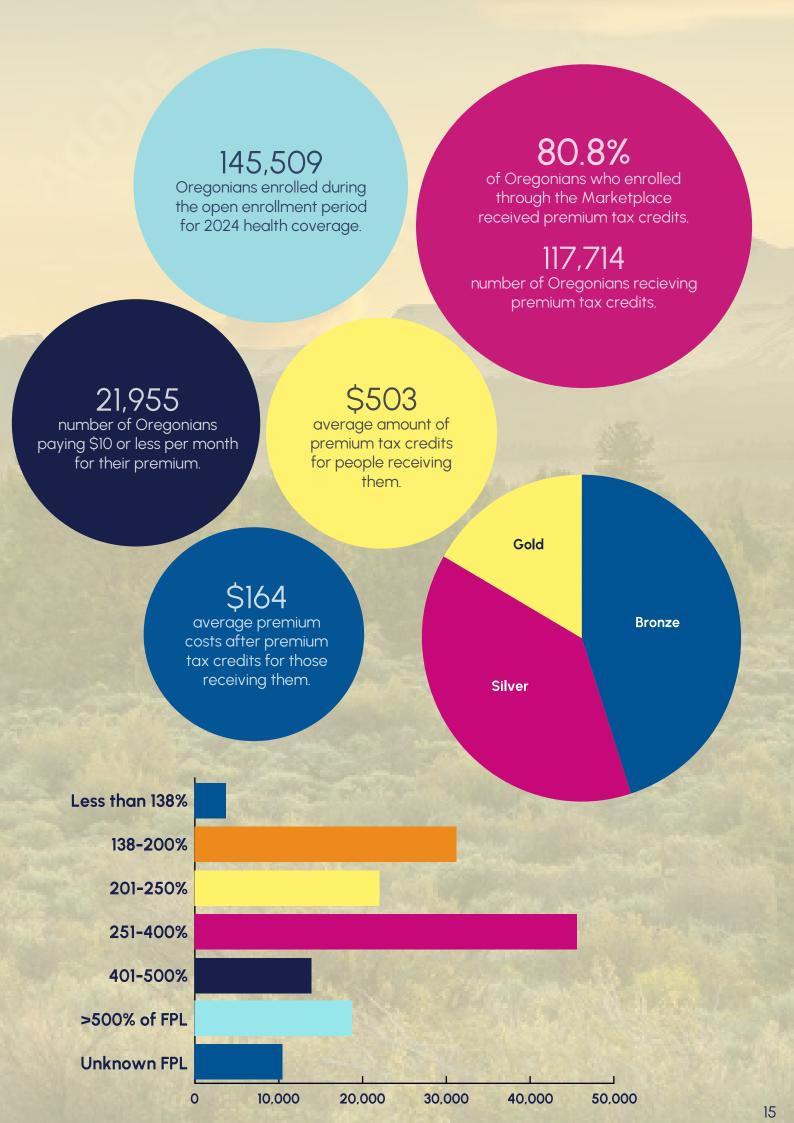
As of April 5, 2024, 108,887 individuals who experienced OHP benefit closure were referred to the Marketplace. 79,534 transition notices have been sent in 14 languages, based on written communication preferences. In addition, 66,352 text messages and 207,735 emails have been sent, and 269,505 outbound calls have been made to individuals who have not responded.

To learn more about this project and to see current data, please visit orhim.info/transition.

Who is Enrolled?

141,963 Oregonians enrolled in health coverage for the 2023 plan year. Efforts from all areas of the Marketplace helped 145,509 Oregonians sign up for 2024 coverage by the end of open enrollment on Jan. 16, 2024.





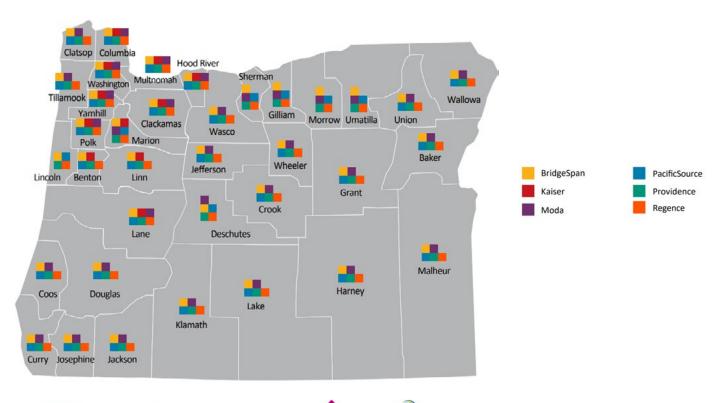
Plan management

Overseeing the plans sold to Oregonians via HealthCare.gov is known as plan management. Unlike most states that use HealthCare.gov as the application and enrollment site, Oregon retains plan management entirely at the state level. Through close communication with insurance companies and collaboration with DFR, the Marketplace meets four main plan management goals:

- Ensuring comprehensive plans (also known as qualified health plans) are available via HealthCare.gov in every area of Oregon. This is important because federal subsidies can be used only on qualified health plans.
- 2. Persuading two or more insurance companies to offer plans in every area of the state.
- 3. Requiring that insurance companies participating in or through the Marketplace offer at least three plans for people to choose among.
- 4. Establishing plans' co-pays, deductibles, and other "cost-sharing" elements to be as consumer friendly as possible given federal constraints, and in collaboration with DFR.

Oregon's authority to choose and define plans is limited under federal law, but the state uses its plan management role to the fullest extent possible.

For 2024, Oregonians were able to shop for plans that were offered from BridgeSpan, Kaiser Permanente, Moda, PacificSource, Providence, and Regence, depending on where they live. Every Oregonian had at least 26 plans to choose from. Dental plans were also available through the Marketplace. There were 20 total plans offered from Pacific Source, Delta Dental of Oregon, Dentegra, Dominion, Dental Health Services, and Kaiser Permanente. Every Oregonian had at least 14 dental plans to choose from.























Grant programs

House Bill 4035

In 2022, the Oregon legislature passed <u>House Bill 4035 (orhim.info/HB4035)</u>, which alotted funding to the Marketplace to implement and expand outreach and grant programs specifically related to the Medicaid renewals process resulting from the PHE unwinding. These funds allowed the Marketplace the capability to:

- Expand the community partner program to include new grantees that serve priority audiences not yet reached by existing grantees. New grantees are trusted resources for communities, which the Marketplace has traditionally faced challenges reaching.
- Award additional funding to existing grantees, which increases the level of funding they have received the past few years. This has helped existing grantees reach additional expanded audiences.

Community Partner Program

The Community Partner Program supports community groups that are trained experts on the Marketplace that can help people choose the plan best for them and their budgets. Grantees also conduct outreach activities to publicize health insurance options and specialize in connecting with communities traditionally harmed by social and health inequities.

These nonprofit groups, called community partners, received a cumulative total of \$2,333,199 in grants, \$934,500 of which came from HB 4035 funding, to support outreach and enrollment related to the Medicaid unwinding work. Grantees funded solely by HB 4035 funding are identified with an asterisk (*) following their names.

Community partner grantees	Location(s)
Asian Health and Service Center	Portland
Casa Latinos Unidos*	Corvallis, Lebanon
Cascade AIDS Project	Portland
Centro Latino Americano	Eugene
Chinese Friendship Association of Portland*	Tigard
Ethiopian and Eritrean Cultural and Resource Center*	Portland
Immigrant and Refugee Community Organization (IRCO)	Ontario, Portland
Interface Network	Salem
Mercy Connections*	Beaverton
Mosaic Medical	Bend, Madras, Redmond
Northeast Oregon Network (NEON)	Enterprise, LaGrande
NOWIA Unete	Medford
Portland Open Bible Community Pantry*	Portland
Project Access NOW	Portland
Project Quest*	Portland
Slavic Community Center of NW*	Portland
Urban League of Portland*	Portland
Waterfall Community Health Center	North Bend

Tribal Grant Program

The Tribal Grant Program supports Tribal Health Services, trained experts on the Marketplace that can help Tribal members navigate the process of enrolling and using health coverage. Grantees also conduct outreach to ensure Tribal members are aware of the benefits of private health coverage in addition to Tribal health services. These grantees serve their communities in multiple regions.

Tribal grantees were granted a cumulative total of \$150,000. All grantees are solely funded with HB 4035 funds.

Tribal grantees

Confederated Tribes of Siletz Indians

Cow Creek Band of Umpqua Tribe of Indians

Klamath Tribes

Partner Agent Program

The Partner Agent Program provides grants to licensed insurance agents who specialize in Marketplace health coverage. They can help Oregonians understand plan options and give them plan advice. Similar to community partners, partner agents also conduct outreach activities to spread awareness about the Marketplace and health coverage options. 58 percent of partner agencies are minority or women owned.

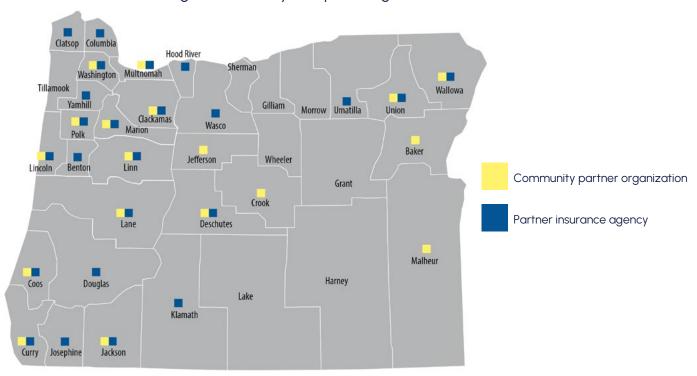
Partner agents were granted a cumulative total of \$806,250, \$483,750 of which came from HB 4035 funding to support outreach and enrollment related to the Medicaid unwinding work.

Partner agency	Location(s)		
Aaron Burns Insurance Services	Eugene		
Abel Insurance	Coos Bay, Florence, Gold Beach, Newport		
Bancorp Insurance	La Pine		
Boone Insurance Associates	Eugene		
Chehalem Insurance	Newberg		
Country Financial	Sisters		
Gordon Wood Insurance	Roseburg		
Grace Insurance Services	Portland		
HE Cross Company	Portland		
Health Insurance Place	Grants Pass		
Health Plans in Oregon	Portland		
HealthMarkets Insurance	Canby		
Healthwise Insurance Planning	Portland		
Healthy, Wealthy & Wise	Tigard		
High Desert Insurance	Bend		
Hillock Insurance Agency	Enterprise		
Cover Oregon	Albany		
Insurance By Design	Wilsonville		
K Insurance Group	Independence		
Linda Dugan Insurance	Astoria		
Matthew Woodbridge Insurance	Salem, Woodburn		
NW 365 Insurance	Tigard		
Premier NW Insurance	Oregon City, Salem, Sandy		

Partner agency	Location(s)
RJS & Associates	Philomath
Shanon Saldivar Insurance	Hood River, The Dalles
Simmons Insurance	Beaverton, Hermiston, Klamath Falls, Medford
Tomlin Health Insurance	Eugene
Valley Insurance	La Grande

Assistance by region

Combined, grantees assist Oregonians with one-on-one health insurance assistance in more than half of the counties of Oregon, with many also providing virtual assistance.



Helping communities of focus

Additional funding brought by HB 4035 has enabled the Marketplace to issue grants to additional community based organizations and Tribal Health Services, and expand on grants issued to partner insurance agents. The primary purpose of the additional funding was to expand on culturally-appropriate outreach and enrollment assistance for communities of focus. These communities have been identified as having cultural, linguistic, and systemic challenges to enrolling in health coverage and accessing care. Through additional funding, the Marketplace has been able to:

- Ensure nearly 40 percent of partner agents have in-person language assistance available in languages other than English.
- Provide culturally sensitive support to Oregon's harder-to-reach communities, including:
 - Afghani communities
 - Asian diaspora communities
 - Ethiopian, Eritrean and Black/African diaspora communities
 - Hispanic and Latina/o/x communities
 - Indigenous communities of Latin America and the United States
 - LGBTQIA2S+ community
 - Rural communities
 - Slavic communities
 - Somali communities

Public outreach & education

The Marketplace conducts outreach in every area of the state. The team publicizes Marketplace services at community events, holds in-person or virtual information sessions about coverage, and answers phone calls from consumers to provide information about coverage options, eligibility, and how to find local help.

The outreach team is comprised of seven staff members who each serve a specific region of the state: Central Oregon, Eastern Oregon, North Coast, Portland Metro, Southwestern Oregon, Tualatin Valley, and Willamette Valley. Three bi-cultural outreach team members who are fluent in Spanish provide bilingual, culturally-appropriate outreach to Oregon's Hispanic, Latina, Latino, or Latinx communities throughout the state.

The Marketplace has supported a variety of events throughout the state, with 43 percent of outreach events in 2023 happening in person and 57 percent still held virtually. The outreach team bolstered awareness of the Marketplace with 962,603 people through event sponsorships and talked to approximately 36,345 people at outreach events and meetings throughout the year. The team supported Tribal events; LGBTQIA2S+ events; faith-based events; Hispanic, Latina, Latina, or Latinx events; Rapid Response sessions; and gave presentations about the Marketplace to communities, businesses, and community-based organizations, including new community partner organizations.



Outreach to Oregon Tribes

The team is also supported by a Marketplace tribal liaison, who collaborates directly with Oregon's federally recognized tribes:

- · Burns Paiute of Harney County
- · Confederated Tribes of Coos, Lower Umpqua, and Siuslaw Indians
- · Confederated Tribes of Grand Ronde
- · Confederated Tribes of Siletz
- · Confederated Tribes of Umatilla Reservation
- Confederated Tribes of Warm Springs
- · Coquille Indian Tribe
- · Cow Creek Band of Umpqua Indians
- · Klamath Tribes

The Marketplace tribal liaison provides technical assistance, tribal assister training, and complex case resolution; participates in government-to-government consultation; and advocates for Tribes on Marketplace concepts affecting tribal governments and their communities. The liaison also advises outreach team members on assisting American Indians and Alaska Natives in the course of their statewide outreach.

Hispanic community outreach

The Marketplace is home to a statewide Hispanic, Latina, Latino, or Latinx community outreach and education coordinator. This coordinator focuses efforts on population-specific events, meetings, and other outreach opportunities. This team member is bilingual and bicultural and is supported by two additional Hispanic, Latina, Latino, or Latinx team members. Combined, they bring a unique perspective to communications and outreach planning with a focus on equity.



Constituent case work

The Marketplace team supports escalated consumer issues, called "constituent cases," which are submitted directly to the constituent liaison. These cases are received from DCBS, ODHS, the OHA Ombuds Office, the Governor's Office, elected officials, insurance agents, community partners, and directly from the consumers themselves. While the majority of case issues are resolved through direct outreach to our federal partners at HealthCare.gov, state staff members are prepared to help resolve escalated issues with one-on-one support. The Marketplace was able to help resolve all cases received in 2023.

Examples of constituent cases

- Retroactive termination of Marketplace plans due to overlap with Medicaid benefits
- Claims issues for American Indians/Alaska Native cost protections
- Fraud or identity theft
- Premium payments incorrectly applied by issuer
- Provider network issues

Customer service center

The Marketplace operates a customer service center, which helps Oregonians understand their coverage options and find local help.

By the numbers

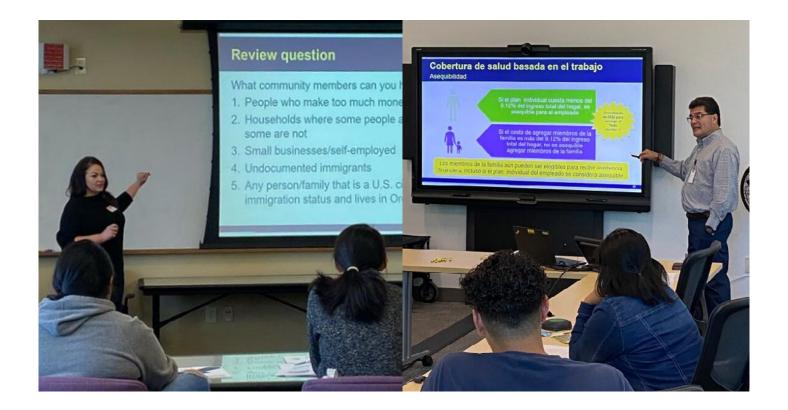
- Customer service levels averaged 95 percent in 2023, with an average wait time of less than 45 seconds.
- The Marketplace received 7,375 calls in 2023, an 11 percent increase over the previous year. 2,138 calls were received during open enrollment between Nov. 1, 2023 and Jan. 15, 2024.
- The Marketplace responded to 1,301 emails sent directly from consumers.

Training and education

Staff members deliver a comprehensive Marketplace training to the community partner grantees and to OHP application assisters. In 2023, the Marketplace held 19 live online trainings, 51 in-person trainings, and on-demand trainings in English and Spanish. 86 percent of the 1,621 application assisters in Oregon completed Marketplace training.

The training equips hundreds of frontline workers at community-based organizations and local governments with the ability to navigate a complex health coverage system for Oregonians and provides them with the skills to help people apply for coverage and financial help through HealthCare.gov. Topics covered in the training include:

- · Consumer protections under the Affordable Care Act
- Health plan and financial assistance options available in Oregon such as Marketplace,
 Medicare, and OHP, including eligibility for each program
- · Coverage details of medical and dental plans
- · Enrollment periods including special enrollment periods
- The HealthCare.gov application process
- · Deeper definition of eligibility criteria for immigrant populations
- Assisting people in special situations including survivors of domestic violence; LGBTQIA2S+;
 American Indians, Alaksa Natives, and their families; and service members/veterans
- · Transitioning between the Marketplace and OHP in both directions
- · Assisting with an equity-focused approach



Consumer tools

Employer coverage affordability tool

The employer coverage affordability tool (orhim.info/ESIcoverage), launched in 2022, continues to be a useful tool that allows Oregonians to easily determine whether or not employer-sponsored coverage offered to them is considered affordable. The Marketplace was heavily involved in the creation of the tool, which was made available to, and is currently in use by, several other states.

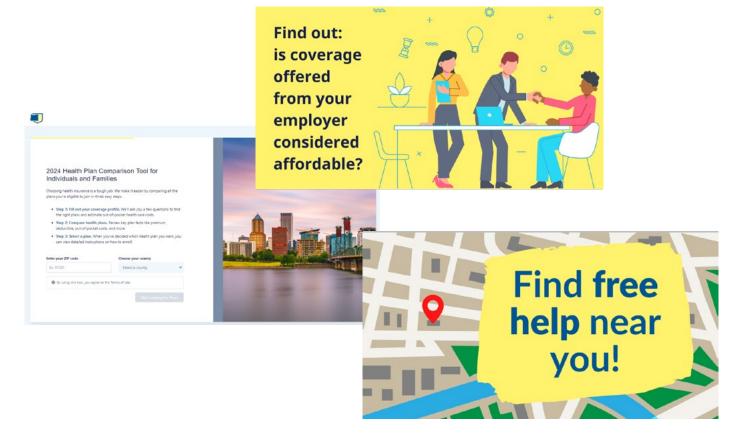
Window shopping tool

The Marketplace maintains a state-specific <u>window shopping tool (orhim.info/WindowShop)</u> that offers Oregonians a quick and easy way to preview plans available to them, as well as determine eligibility for financial help and OHP benefits. The window shopping tool is also provided as a resource to individuals who are losing Medicaid benefits during the renewal process at the end of the PHE.

In 2023, the window shopping tool was updated to include information about a new benefit included in all Oregon Standard Plans. Starting in 2024, all Oregon Standard Plan include three \$5 office visits that can be used on any combination of primary care and behavioral health care. Users can now filter by plans that offer these three \$5 visits. There is also a flag on the plans that makes it easy to see if the visits are included.

Find local help tool

Oregon's find local help tool (orhim.info/help) gives individuals the ability to locate a health coverage expert for application and enrollment assistance. The tool is maintained as a collaborative effort between the Community Partner Outreach Program (CPOP), the Marketplace, and the Senior Health Insurance Benefits Assistance (SHIBA) program. Together, these entities certify community-based organizations and insurance agents/brokers who provide application and enrollment assistance in OHP and other Medicaid programs, Medicare programs, and private health coverage through the Marketplace.



Marketing

The federal government's efforts to advertise open enrollment, subsidies, and coverage options slightly increased nationwide throughout 2023, with an emphasis on helping consumers find other coverage options if losing Medicaid benefits during the COVID-19 PHE unwinding.

Research

In 2023, the Marketplace conducted two research projects: one focused on plan design and utilization, while the second focused on health coverage attitudes and marketing design.

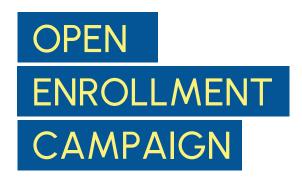
The first research project aimed to gather impressions of the Marketplace and to study how consumers make decisions when purchasing and using health coverage. This research was done by a phone and online survey of Oregonians who purchased bronze or silver insurance plans for 2023. Key takeaways include:

- Cost is a dominant concern. While only about 10 to 20 percent are concerned about providers and coverage, over half of customers want to know how their health plan will affect their pocketbook.
- · Almost 2 in 3 customers have received preventive care recently, with young and low-income people less likely to receive preventive care.
- About half of customers delay or do not seek care for cost reasons. These customers tend to be less positive about their experience with the Marketplace and the health care system overall.

The second research project hoped to assess the attitudes and perceptions surrounding purchasing health coverage, to gauge reactions to Marketplace advertisements, and understanding how messaging themes resonate with Oregonains. The research was done primarily as an online survey, with one focus group comprised of Hispanic and Latino/a/x Oregonians whose primary language is Spanish.

- 61 percent of respondents say that the cost they pay is the most important consideration when purchasing health coverage. People between the ages of 55 and 65 are the only demographic group where the majority values benefits over costs.
- Among Spanish speaking consumers, though there is strong consensus that health coverage is important, only 3 in 10 participants currently had it. Many hold off unless they have a looming procedure, or if the fear of an emergency outweighs the monthly cost of coverage.
- Almost all Spanish speaking consumers were not aware that they could qualify for nongovernment coverage. The more explicit information about cost, benefits, qualifications, language of materials and spoken by providers, and situations unique to their community are communicated, the more informed and comfortable Hispanic and Latino/a/x Oregonians will feel purchasing coverage.





For the 2024 open enrollment season, the Marketplace created new media for ads that ran on television and online. Messaging for the campaign focused on simple, approachable language that reinforced the accessibility and affordability of coverage through the Marketplace, while directing people to tools available on OregonHealthCare.gov and CuidadoDeSalud. Oregon.gov.

The open enrollment campaign for the 2024 plan year included

- Grantee support including a robust communications toolkit in both English and Spanish
- Out-of-home advertising in the form of gas pump toppers, standees at grocery stores, point of sale (POS) display ads, and one-sheet posters at convience stores and laundromats
- Audio ads on Spanish- and English-language stations and streaming services
- Print ads in community newspapers with an extension into publications that reach priority audiences such as Tribal communities, African diaspora populations, Hispanic or Latina/o/x communities, Asian diaspora populations, and Slavic communities
- Social media ads on Facebook, Instagram, LinkedIn, Nextdoor, and TikTok
- Video ads on Spanish- and English-language streaming services and TV stations
- Digital ads on websites and search engines
- Weekly text message alerts and reminders in both English and Spanish, depending on written language preferences

Examples of advertisements and video stills

Click on images to view advertisements.



miss out on health coverage

for 2024! OPEN ENROLLMENT ENDS

21

28

March I

Don't

Open enrollment for Oregon insurance is fast approaching



Cobertura de calidad dentro de tu

presupuesto.

Appendix: Financial statements

This section discusses the financial condition of the Health Insurance Exchange Fund as of Dec. 31, 2023. Budget or fiscal activities after that date are not reported here. The Marketplace is financially stable and self-sustaining for the remainder of the 2023-25 biennium.

Marketplace limitation use

The 2023-25 biennium budget for the Oregon Health Insurance Marketplace is shown here

2023-25 Legislatively Adopted Marketplace Budget

Section	2023-25 LAB	Positions	FTE
Marketplace	\$16,743,523	21	20.25
Shared Services	3,013,834	-	-
Total	\$19,757,357	21	20.25

Through the end of the biennium, the Marketplace is expected to use about 90 percent of its budget limitation. This includes total expenses for Marketplace and Shared Services.

Through Dec. 2023, the Marketplace has recorded \$598,000 of its shared services limitation. The Marketplace assumes that it will use about 90% of its shared service budget over the remaining 18 months of the biennium.

Oregon Health Insurance Exchange 2023-25 LAB and Actuals

Section	2023-25 LAB	Actual expenditures as of 12/31/2023	Projection 1/2024- 6/2025	Actual and Projection	Variance Over/(Under)	% Variance ((Actuals + Projection) / LAB)
Marketplace	16,743,523	3,106,144	12,026,386	15,132,530	(1,610,993)	90%
Shared Services/SAFC	3,013,834	598,000	2,125,855	2,723,855	(289,979)	90%



Calendar year 2023 revenues

Oregon Health Insurance Exchange CY 2023 Balances and Revenue

Account description	2023 Q1	2023 Q2	2023 Q3	2023 Q4	Year total
Beginning balance	8,240,013	8,995,917	10,166,951	10,395,256	
PMPM assessment - Medical	2,561,276	2,044,951	2,080,596	2,169,296	8,856,119
PMPM assessment - Dental	37,384	30,332	30,086	28,302	126,105
Interest and investments	71,207	90,186	116,930	134,806	413,128
Total	2,669,867	2,165,470	2,227,611	2,332,404	9,365,352

Calendar year 2023 expenditures (2021-23 and 2023-25 biennia)

Oregon Health Insurance Exchange CY 2023 Expenditures and Transfers

Account description	2023 Q1	2023 Q2	2023 Q3	2023 Q4	Year total
Personal Services	686,723	692,613	738,125	779,160	2,896,621
Services and supplies					
Travel	7,564	14,548	21,545	14,134	57,782
Employee training	285	2,859	6,201	925	10,271
Office expenses	-	345	5,171	3,173	8,689
Telecommunications	3,008	6,349	3,372	4,646	17,375
State government service charges	33	172	33	33	271
Data processing	-	1,908	33,194	1,329	36,431
Publicity and publications	(101,841)	51,474	317,764	39,668	307,065
Professonal services	921,417	(76,021)	447,864	1,304,899	2,598,158
Attorney General legal fees	532	3,194	1,476	606	5,809
IT Expendable Property	261	452	3,752	-	4,465
Other services and supplies	21,151	1,825	8,439	6,208	37,623
Services and supplies total	852,410	7,096	848,812	1,375,620	3,083,939
Distributions to Grantees	251,016	131,126	82,769	86,852	551,764
Special payments to DCBS	-	19,350	-	12,074	31,424
Total expenditures	1,790,150	850,185	1,669,706	2,253,706	6,563,747
Shared Services/SAEC	123,813	144,250	329,600	338,810	936,474
Total expenditures with Shared Services	1,913,963	994,435	1,999,306	2,592,516	7,500,221
Ending fund balance	8,995,917	10,166,951	10,395,256	10,135,144	10,135,144

The 2023 Q2 increase in publicity and publications expenditures and 2023 Q4 growth in professional services expenditures is a typical expenditure pattern for the Marketplace. It reflects Marketplace outreach and advertising efforts at the beginning of open enrollment.

Fund stability

Marketplace Per Member Per Month (PMPM) assessment

Oregon's Marketplace is primarily funded through a per member per month fee on participating insurance companies. In 2023, the fee for medical plans was \$5.50 per member per month and \$0.36 per member per month for dental plans.

Federal technology fee

The federal technology charges are separate from the assessment and are paid directly by participating insurance carriers to the federal government. Therefore, they affect neither revenue nor expenditures. The federal government charged participating insurers 2.25 percent of premium in 2023.

Enrollments

The assessments needed to fund the Marketplace's operations depend on the actual individual medical and dental plan effectuations. For 2023, the equilibrium rate -- the assessment rate needed to cover one year of expenditures -- was forecasted at \$5.53 PMPM with an average monthly medical plan enrollment of 128,250.

Oregon Health Insurance Marketplace Plan Year 2023 Enrollment

AA o wallo	Actual 2023 enrollment		
Month	Medical	Dental	
Jan. 2023	131,586	29,861	
Feb. 2023	134,542	30,291	
Mar. 2023	129,196	28,571	
Apr. 2023	128,252	28,443	
May 2023	127,663	28,046	
June 2023	127,006	27,663	
July 2023	126,629	27,557	
Aug. 2023	126,142	27,261	
Sept. 2023	126,331	27,160	
Oct. 2023	126,206	26,796	
Nov. 2023	126,202	26,464	
Dec. 2023	126,119	26,236	
Average	127,990	27,862	

Enrollment in 2023 exceeded the monthly average despite uncertainty at the federal level. Accordingly, the Marketplace was able to generate sufficient revenue to support its operations without raising the assessment.

Oregon Health Insurance Marketplace

- OregonHealthCare.gov CuidadoDeSalud.Oregon.gov
- Facebook
 Facebook.com/ORmarketplace
- 855-267-3768 (toll-free) All relay calls accepted
- Instagram
 Instagram.com/ORmarketplace
- 500 Summer Street E-56 Salem, OR 97301
- LinkedIn
 LinkedIn.com/company/ORmarketplace