



2021

ANNUAL REPORT

April 15, 2022

Oregon Health Insurance Marketplace
Health Policy and Analytics Division
Oregon Health Authority
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ABOUT THIS REPORT

This annual report is required under Oregon Revised Statute 741.222, and circulates to the Legislative Assembly, Gov. Kate Brown, and the Oregon Health Policy Board. This report explains how the Marketplace serves our audience and works to connect them with coverage. The report will not cover information about the Small Business Health Options Program (SHOP), which Oregon does not currently operate, or development of the information technology system for the exchange as the Marketplace does not currently have authority to develop. We welcome a continued discussion about those approaches. At the Oregon Health Insurance Marketplace (the Marketplace), we also consider this report part of an ongoing conversation to spotlight the people we serve, the work we do, the leaders we collaborate with, and the challenges still ahead.

TABLE OF CONTENTS

Introduction	3
The Marketplace in 2021	4
2021: A year in review	5
The Marketplace's activities and operations	6
Health Insurance Marketplace Advisory Committee	7
American Rescue Plan Act: Impact on the Marketplace	9
Plan management	11
Grant programs	12
Public education and outreach	15
Outreach to Oregon Tribes	16
Customer service center	16
Latinx community outreach	17
Constituent case work	17
Training and education	18
Marketing efforts	19
Window shopping tool	21
Who is enrolled?	22
COFA Premium Assistance Program	25
Conclusion	26
Appendix: financial statements	27
Fund stability	29

INTRODUCTION

What is the Oregon Health Insurance Marketplace?

The Oregon Health Insurance Marketplace (the Marketplace) is a state agency established in 2015 as part of Oregon Senate Bill 1 and under the Affordable Care Act (2011). The Marketplace is a state-based exchange which uses the federal platform (HealthCare.gov) for application and enrollment processing. The Marketplace helps Oregonians understand health coverage options in Oregon, connects people to free assistance from trained health coverage experts, and oversees the health plans sold to Oregonians through HealthCare.gov.

Changes within the Oregon Health Insurance Marketplace in 2021

In July 2021, the Oregon Senior Health Insurance Benefits Assistance (SHIBA) program moved from its home within the Marketplace under the Department of Consumer and Business Services (DCBS) to Oregon Department of Human Services (ODHS) within Aging and People with Disabilities (APD). In addition, under [Oregon Senate Bill 65 \(go.usa.gov/xtvag\)](https://www.legislature.oregon.gov/BillsAndResolutions/2021/Bills/000000001-000000000/2021%20SB%2065), the Marketplace began its move from the DCBS to the Oregon Health Authority (OHA) within the Health Policy and Analytics division in July 2021. The Marketplace move is a multi-phased project which was completed during the first few months of 2022. Additional changes impacting the Marketplace are discussed in this report, including the closure of the COFA Premium Assistance Program, American Rescue Plan Act provisions impacting Marketplace financial assistance eligibility, the COVID-19 special enrollment period, and the extension of the annual open enrollment period of an additional 30 days.

Who we serve

Most Oregonians have access to health coverage through a job, the Oregon Health Plan (OHP), Medicare, or Veterans Affairs. For those that 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. Largely these people are self-employed, entrepreneurs, or work part-time or for small employers. The work of the Marketplace is important in helping the state reach its goal of getting 100 percent of Oregonians enrolled in health coverage.

THE MARKETPLACE IN 2021

The mission of the Marketplace

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

Individual assistance

337 community-based organizations engaged as Marketplace assisters

277 insurance agents engaged to provide Marketplace plan advice and enrollment assistance

Plan choice

6 Oregon insurance companies are offering health plans through the Marketplace for 2022

26-68 health plans available on the Marketplace from which to choose

Outreach and education

313 outreach events and meetings attended during 2021 to educate the public and promote the Marketplace



146,602 Oregonians enrolled in Marketplace health coverage for 2022 during open enrollment



115,516 people got premium tax credits to help pay for coverage, an increase of 2,446 people from 2021

\$489 average amount of premium tax credits for people receiving them, an increase of \$38 per month over 2021 thanks to the American Rescue Plan Act



\$130 average monthly premium after premium tax credits for those receiving them, \$20 less per month over 2021 thanks to ARPA

2021: A YEAR IN REVIEW

December 2020: 141,089 Oregonians enrolled in coverage for the 2021 plan year during open enrollment, which ended Dec. 15, 2020. Medicaid eligibility was reinstated for people who live in the United States and are from Compact of Free Association (COFA) countries.

January: The national public health emergency (PHE) related to COVID-19 was extended 90 days, further extending the Medicaid continuous coverage requirement. In addition, the Biden-Harris Administration announced a [COVID-19 special enrollment period](https://www.go.usa.gov/xtfTr) (go.usa.gov/xtfTr) which started on Feb. 15, 2021. While initially planned to end May 15, the special enrollment period was [later extended](https://www.go.usa.gov/xtfTj) (go.usa.gov/xtfTj) through Aug. 15.

March: The [American Rescue Plan Act \(ARPA\) of 2021](https://www.go.usa.gov/xtfTq) (go.usa.gov/xtfTq) was signed into law, extending financial assistance to more Oregonians and increasing the amount of financial help Oregonians can receive through the Marketplace (see pages 9-10). Most provisions took effect April 1, 2021. In addition, the Oregon Eligibility (ONE) system operationalized COFA eligibility for Medicaid programs which initiated the work to transition COFA Premium Assistance Program enrollees to OHP.

April: Mid-year marketing campaign was launched to promote the COVID-19 special enrollment period and ARPA provisions. The national PHE related to COVID-19 was again extended 90 days which continued to maintain Medicaid coverage for thousands of Oregonians.

June: The United States Supreme Court announced its decision in [California v. Texas \(19-840\)](https://www.go.usa.gov/xtf2F) (go.usa.gov/xtf2F) to uphold the Affordable Care Act, which continued health coverage protections including regarding preexisting health conditions, essential health benefits, health plan actuarial values, and financial assistance.

July: Oregon SHIBA program moved from its home within the Marketplace to ODHS within APD. Under [Oregon Senate Bill 65](https://www.go.usa.gov/xtvag) (go.usa.gov/xtvag), the Marketplace also began its move from DCBS to OHA within the Health Policy and Analytics division. The national PHE related to COVID-19 continued to be extended an additional 90 days.

August: COVID-19 special enrollment period ended on Aug. 15. 22,743 Oregonians newly enrolled in health coverage during the special enrollment period.

September: The Biden-Harris Administration announced an [extended open enrollment period](https://www.go.usa.gov/xtfDH) (go.usa.gov/xtfDH) for 2022 health coverage. Open enrollment was extended an additional 31 days to end Jan. 15, 2022.

October: The national PHE related to the COVID-19 pandemic was extended once more in 2021. The national PHE has additionally been extended in 2022 and is currently scheduled to end April 19, 2022.

November: Open enrollment began for the 2022 plan year. Open enrollment ended Jan. 15, 2022 with 146,602 Oregonians selecting a private health plan for 2022.

THE MARKETPLACE'S ACTIVITIES AND OPERATIONS

The Oregon Health Insurance Marketplace works to connect people to coverage, financial assistance to make coverage more affordable, and free help from local experts around the state. Oregon is a state-based exchange that uses HealthCare.gov and relies on its federal partner to set eligibility criteria, process applications, manage enrollments, or provide an application website or call center platform for people to enroll. At the state level, the Marketplace:



Facilitates plan management

Oversees the plans sold to Oregonians at HealthCare.gov; that work is done in partnership with the Division of Financial Regulation (DFR) of 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 for the task of assisting Oregonians with their applications.



Conducts targeted and equity-focused public education, marketing, and outreach

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



Operated the COFA Premium Assistance Program

Through Dec. 2021, the Marketplace operated a state-level, wrap around subsidy program for eligible Oregonians who live in the U.S. under an international treaty with the Marshall Islands, Palau, and the Federated States of Micronesia. These are known as COFA countries, and the program is Oregon's COFA Premium Assistance Program.



Consults with the Health Insurance Marketplace Advisory Committee

Consults with up to 15 members, consisting of one ex-officio voting members (the director of the Oregon Health Authority or his/her/their designee) and 14 members of the community appointed by the governor and confirmed by the Senate.

HEALTH INSURANCE MARKETPLACE ADVISORY COMMITTEE

About the committee

The Health Insurance Exchange (Marketplace) Advisory Committee (HIMAC) advises the Oregon Health Authority (OHA) in the governance and operation of the Marketplace. The committee represents a wide range of health insurance stakeholders including insurance companies, insurance agents, enrollment assisters, health care providers, small businesses, advocates, consumers, and government agencies. The HIMAC is a sub-committee of the Oregon Health Policy Board (OHPB). Learn more at OregonHealthCare.gov/MAC.

Continuing members

Kraig Anderson
Moda Health
Portland

Andrew Stolfi
Ex-officio member
Insurance Commissioner and
Director
Department of Consumer and
Business Services

Members who joined the committee in 2021

Ron Gallinat
Member since Nov. 2021
Central Oregon Employee Benefits,
LLC
Bend

Maribeth Guarino
Member since Nov. 2021
Oregon State Public Interest
Research Group
Portland

Kathleen Jonathon
Confirmed in March 2021
Salem-Keizer School District/Keizer

Linzay Shirahama
Confirmed in March 2021
Project Access NOW
Clackamas

Members who left the committee in 2021

Sandy Sampson
Left committee May 2021
Confederated Tribes of the Umatilla
Indian Reservation
Pendleton

Jennifer Welander
Left committee June 2021
St. Charles Health System, Inc.
Bend

Members whose term ended Feb. 2022

Shonna Butler
Tomlin Benefit Planning, Inc.
Eugene

Dan Field
Committee Chair
Kaiser Permanente Northwest
Portland

Jim Houser
Small business owner
Portland

Sean McAnulty
Mosaic Medical
Bend

Ken Provencher
PacificSource Health Plans
Springfield

Shanon Saldivar
Committee vice-chair
Saldivar Agency
The Dalles

Members who joined the committee in March 2022

Gladys Boutwell
Insurance by Design
Wilsonville

Paul Harmon
Regence
Canby

Lindsey Hopper
PacificSource Health Plans
Bend

Ines Kemper
Small business owner
Portland

Holly Sorensen
Northeast Oregon Network
LaGrande

Om Sukheenai
Chehalem Insurance Associates
Newberg

Andrew Tarab
Providence Helath Plan
Portland

Nashoba Temperly
Cascade AIDS Project
Portland

Meetings

The Marketplace Advisory Committee met five times in 2021: Jan. 28, April 22, July 22, Oct. 14, and Dec. 9. All meetings were held virtually from 9 a.m. to noon.

Focus of the committee

The committee continued to focus on plan affordability and accessibility of coverage in the individual market, including access to coverage through HealthCare.gov. The committee mirrors the core mission of the Marketplace “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 from business, assistance, and consumers and drew on their understanding of these communities as they considered 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 by the committee

[Oregon Senate Bill 65](https://go.usa.gov/xtvag) (go.usa.gov/xtvag) passed during the 2021 legislative session and transferred the Marketplace from DCBS to OHA effective July 2021. The bill also transferred the HIMAC to the OHPB.

[Oregon House Bill 2992](https://go.usa.gov/xtvab) (go.usa.gov/xtvab) also passed during the 2021 legislative session. The bill offers committee members the option to receive a stipend for their work.

The committee discussed plans to replace six committee members who termed out of the committee in Feb. 2022.

Throughout 2021, the committee was advised on a variety of topics, including:

- Oregon public health option and implementation report
- Plans for the end of the public health emergency and unwinding of the Medicaid continuous coverage provision
- Impacts of the ARPA on health coverage
- Marketplace plans for open enrollment
- End of the COFA Premium Assistance Program and work conducted to migrate enrollees to OHP

AMERICAN RESCUE PLAN ACT: IMPACT ON THE MARKETPLACE

2021 saw the continuation of the COVID-19 pandemic, which had major impacts to the Marketplace eligibility thanks to the ARPA, signed March 2021.

Impact on monthly premiums and premium tax credit eligibility

- ARPA extended financial help eligibility to people above 400 percent of the federal poverty level for both 2021 and 2022. Typically, people who earn more than 400 percent of the federal poverty level do not qualify for financial assistance, creating a steep cliff for health coverage costs.
- Under ARPA, people who were approved to receive or received unemployment for at least one week in 2021 were considered to be at 133 percent of the federal poverty level for the purposes of calculating eligibility for financial assistance. Any income above 133 percent of the federal poverty level was set aside if the applicant does not otherwise qualify for OHP. These additional savings expired Dec. 31, 2021.
 - The second-lowest cost silver plan for someone at 133 percent of the federal poverty level cost around one dollar per month with maximum premium tax credits applied and out-of-pocket costs for health care would be set at the maximum cost-sharing reduction level.
- ARPA also set limits on how much people are expected to contribute towards their monthly premium. These limits are valid for both the 2021 and 2022 plan years.

Income range (percent of FPL)	Range of expected contributions for 2021 under prior law*	Range of expected contributions for 2021 and 2022 under ARPA*
100% - 132%	2.07%	0%
133% - 149%	3.10% - 4.14%	0%
150% - 199%	4.14% - 6.52%	0% - 2%
200% - 249%	6.53% - 8.33%	2% - 4%
250% - 299%	8.33% - 9.83%	4% - 6%
300% - 399%	9.83%	6% - 8.5%
400% and higher	N/A	8.5%

*The expected contribution (technically referred to as the “applicable percentage”) is the share of consumers’ income they must generally pay towards a benchmark (second-lowest cost silver) plan with premium tax credits.

Other ARPA provisions impacting health coverage

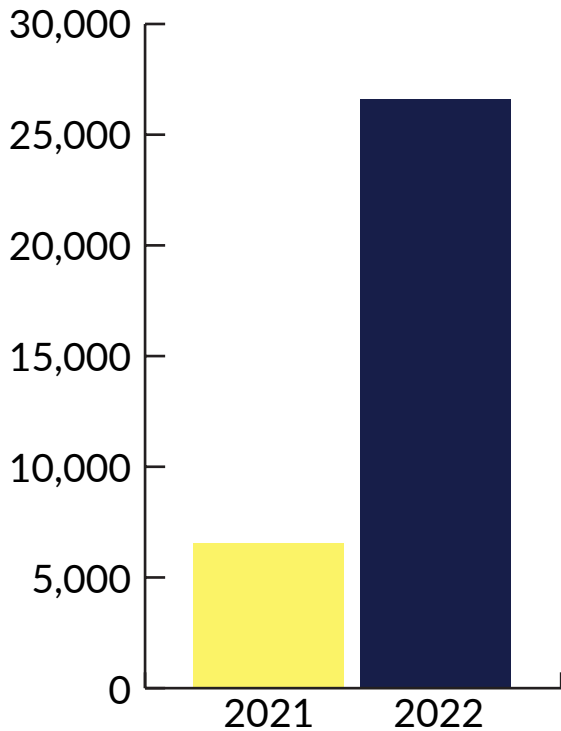
- ARPA provided relief from repayment of premium tax credits received during plan year 2020.
- ARPA included a provision allowing people eligible for COBRA coverage (a continuation of employer coverage) to enroll or re-enroll and pay \$0 premiums from April 1 through Sept. 30, 2021. This program was intended to be invisible to the enrollee. Employers paid the COBRA premium for the enrollee and will be able to claim a tax credit at the end of the year. This program also impacts the State Continuation Plan.

Impact of the ARPA on health coverage in Oregon

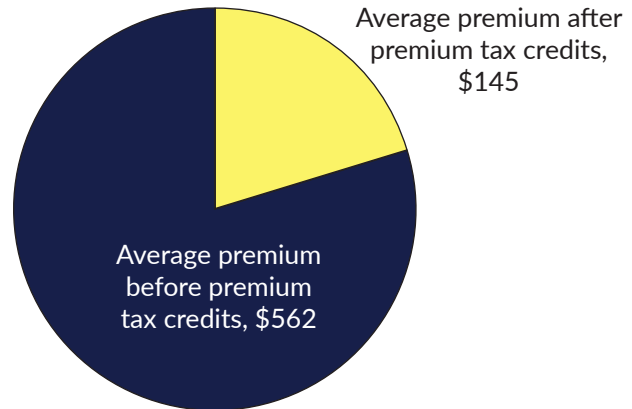
22,743

people in Oregon enrolled during the COVID-19 special enrollment period

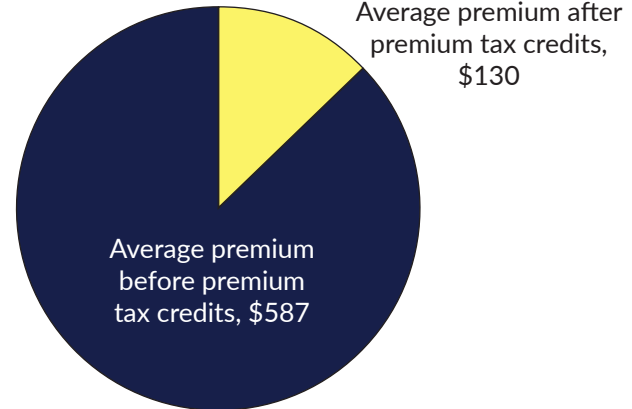
People over 400% of the federal poverty level who enrolled in health coverage during open enrollment



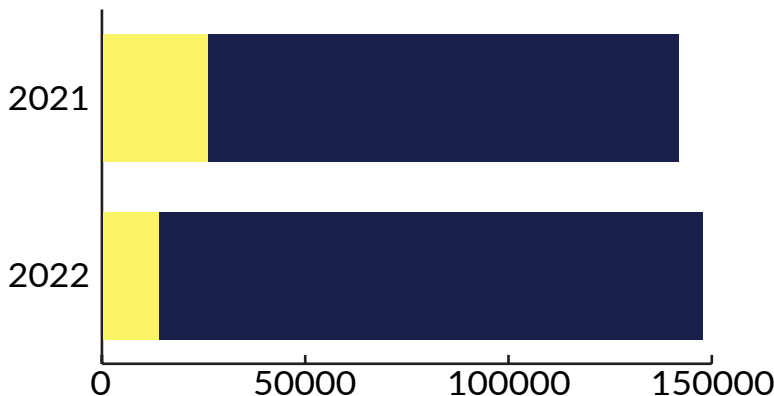
Premiums before ARPA implementation (OE 2021)



Premiums after ARPA implementation (OE 2022)



Legend:
 People enrolling in health coverage
 People not requesting financial assistance



4.6%
 the uninsurance rate in Oregon in 2021 according to the Oregon Health Insurance Survey (Jan. 2022)

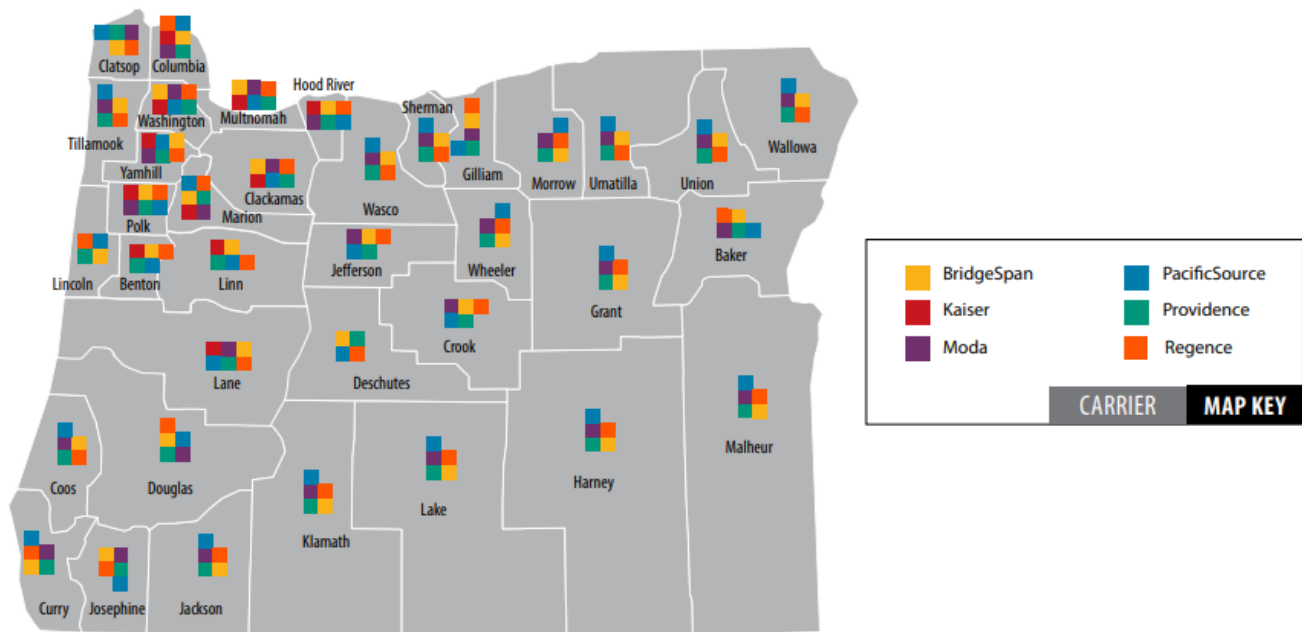
PLAN MANAGEMENT

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

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

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 2022, 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, with most having at least 36 plans available. Dental plans were also available through the Marketplace. There were 21 total plans offered from Pacific Source, Oregon Dental Services (ODS), Dentegra, Dominion, Dental Health Services, and Kaiser Permanente. Every Oregonian had at least 15 dental plans to choose from.



GRANT PROGRAMS

Community Partner Program

The Community Partner Program directly funds community groups who are trained experts in the Marketplace and can help people choose the plan best for them and their budgets. Grantees also conduct outreach activities to publicize health insurance options, specializing in connecting with hard-to-reach populations and limited-English-proficiency Oregonians.

The nonprofit groups, called community partners, received a cumulative total of \$340,000 in grants.

Community partner grantees	Location
Asian Health and Service Center	Portland
Cascade AIDS Project	Portland
Interface Network	Salem
Immigrant and Refugee Community Organization (IRCO)	Portland
Northeast Oregon Network (NEON)	LaGrande
Project Access NOW	Portland

Partner Agent Program

The Partner Agent Program funds licensed insurance agents who specialize in Marketplace health coverage and can help Oregonians understand plan options and give plan advice. Similar to community partners, partner agents also conduct outreach activities to spread awareness about the Marketplace open enrollment period and health coverage options.

Partner agents were granted a cumulative total of \$303,000.

Partner agency	Location(s)
Aaron Burns Insurance	Eugene
Abel Insurance	Newport, Florence, Coos Bay, Gold Beach
Bancorp Insurance	La Pine
Boone Insurance Associates	Eugene
Chehalem Insurance	Newberg
Country Insurance	Sisters
FG Insurance	Forest Grove, Portland
Gordon Wood Insurance	Roseburg
Grace Insurance	Portland
HE Cross Company	Portland
Health Insurance Place	Grants Pass
Health Plans in Oregon	Beaverton, Portland
HealthMarkets Insurance	Canby
Healthwise Insurance	Portland

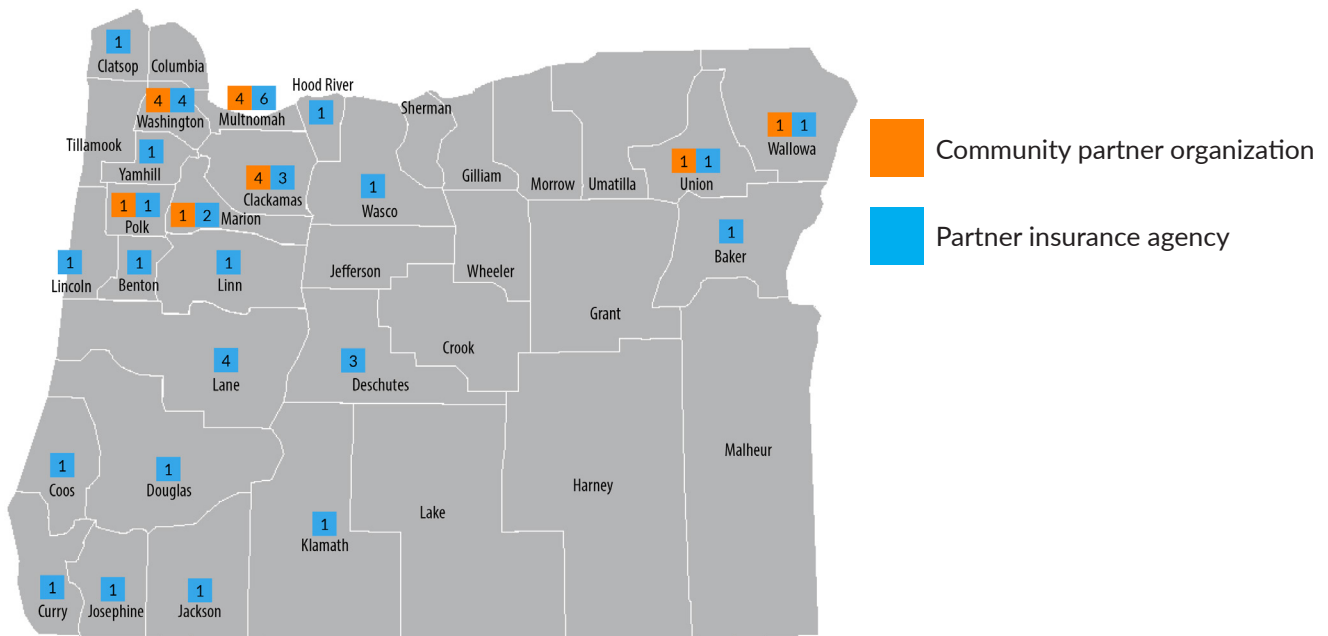
Partner agency	Location(s)
Healthy, Wealthy & Wise	Tualatin
High Desert Insurance	Bend
Hillock Insurance Agency	Enterprise
iCover Oregon	Albany
Insurance By Design	Wilsonville
Insurance Marketplace	Medford
K Insurance Group	Independence
Klamath Financial Group	Klamath Falls
Linda Dugan Insurance	Astoria
Matthew Woodbridge Insurance	Salem, Woodburn
Premier NW Insurance	Oregon City, Salem, Sandy
RJS & Associates	Philomath
Saldivar Insurance	Hood River, The Dalles
Tomlin Benefit Planning	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.

Community partners and insurance agents	Primary counties served
North Coast	
Abel Insurance	Coos, Curry, Lane, Lincoln
Linda Dugan Insurance	Clatsop
Willamette Valley	
Aaron Burns Insurance	Lane
Boone Insurance Associates	Lane
Chehalem Insurance	Yamhill
iCover Oregon	Linn
Interface Network	Marion, Polk
K Insurance Group	Polk
Matthew Woodbridge Insurance	Marion
Premier NW Insurance	Clackamas, Marion
RJS & Associates	Benton
Tomlin Benefit Planning	Lane
Portland Metro	
Asian Health & Service Center	Clackamas, Multnomah, Washington
Cascade AIDS Project	Clackamas, Multnomah, Washington
FG Insurance	Multnomah, Washington

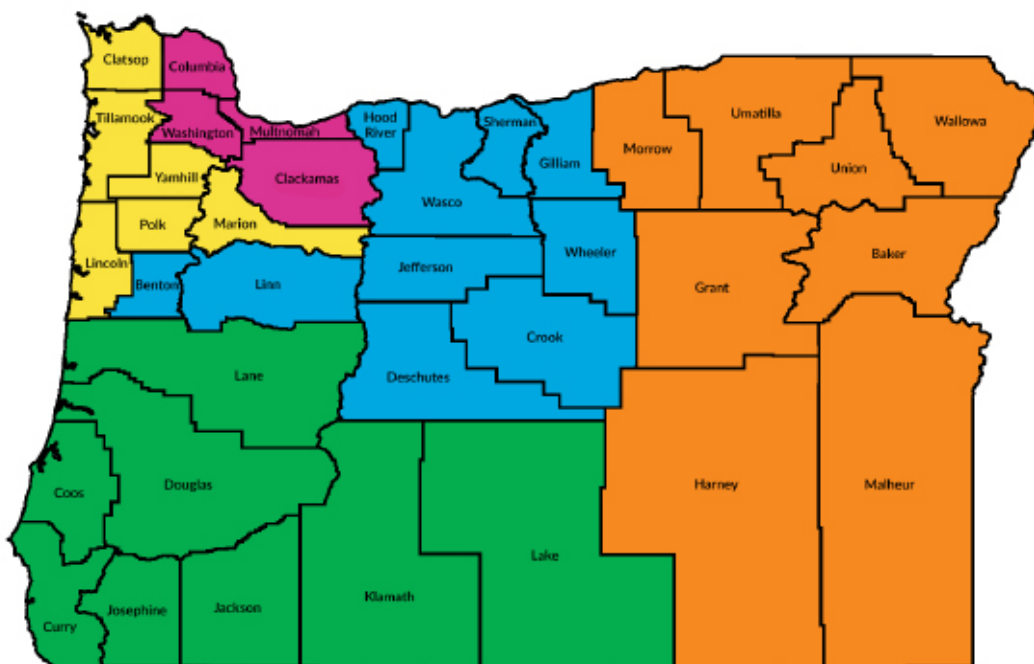
Community partners and insurance agents	Primary counties served
Grace Insurance	Multnomah
HE Cross Company	Multnomah
Health Plans in Oregon	Multnomah, Washington
HealthMarkets Insurance	Clackamas
Healthwise Insurance	Multnomah
Healthy, Wealthy & Wise	Washington
Immigrant and Refugee Community Organization (IRCO)	Clackamas, Multnomah, Washington
Insurance by Design	Clackamas
Project Access NOW	Clackamas, Multnomah, Washington
Central Oregon	
Bancorp Insurance	Deschutes
Country Insurance	Deschutes
High Desert Insurance	Deschutes
Saldivar Insurance	Hood River, Wasco
Eastern Oregon	
Hillock Insurance Agency	Wallowa
Northeast Oregon Network (NEON)	Baker, Union, Wallowa
Valley Insurance	Union
Southwest Oregon	
Gordon Wood Insurance	Douglas
Health Insurance Place	Josephine, Multnomah, Washington
Insurance Marketplace	Jackson
Klamath Financial Group	Klamath



PUBLIC EDUCATION AND OUTREACH

The Marketplace's outreach team facilitates outreach efforts to 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 to find local help.

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



Due to the ongoing COVID-19 pandemic, the majority of outreach conducted in 2021 was virtual. The team supported Tribal events, LGBTQ+ events, faith-based events, Latinx events, rapid response sessions, and presentations about the Marketplace to communities, businesses, and community-based organizations, including new community partner organizations. In addition to virtual events, meetings, and presentations, the outreach team was able to do in-person outreach during a few months in 2021.

OUTREACH TO OREGON TRIBES

The outreach team also is 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, 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 Native Americans and Alaska Natives in the course of their statewide outreach.

CUSTOMER SERVICE CENTER

The outreach team supports a customer service center, which helps Oregonians understand their coverage options and find local help. Since the beginning of the pandemic in 2020, the service center has shifted to an all-remote work environment, but has maintained exceptional service levels.

By the numbers

- Customer service levels averaged 97 percent in 2021, with an average wait time less than 20 seconds.
- The Marketplace received 7,477 calls with at least 10 percent requiring tier one customer support.

Calls to the Oregon Senior Health Insurance Benefits Assistance (SHIBA) program are not included in the above call center data. The Oregon SHIBA program moved from within the Marketplace to ODHS within the APD unit in July 2021.

LATINX COMMUNITY OUTREACH

The Marketplace outreach team is home to at least one statewide Hispanic/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 Latinx team members. Combined, they have brought 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, as well as, the Marketplace outreach team. While the majority of case issues are able to be resolved with direct contact 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 93 percent of cases received in 2021.

Examples of constituent cases

- Premium billing and refund issue
- Sudden termination of dental benefits with no explanation
- Incorrect determination by HealthCare.gov resulting in erroneous OHP referral
- American Indian/Alaska Native cost sharing issues
- HealthCare.gov misrepresenting providers and facilities as in-network causing enrollment into wrong plan for consumers health care needs
- Widowed consumer unable to have late spouse removed from health plan
- Account ID verification issues not resolved at HealthCare.gov level
- Consumer enrolled in COBRA coverage through 11/25/20, wrong plan start date set on HealthCare.gov plan
- Insurance company did not receive enrollment data

TRAINING AND EDUCATION

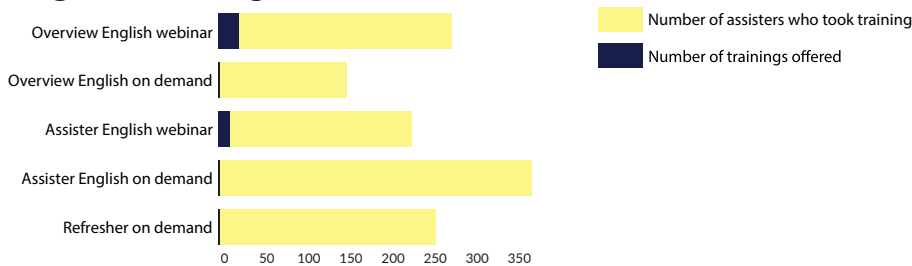
Outreach team staff members deliver a comprehensive Marketplace training to the community partner grantees and to OHP application assisters. In 2021, Marketplace staff members held 36 live online trainings and on-demand trainings in English and Spanish.

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 the skills to help people apply for coverage and financial help through HealthCare.gov.

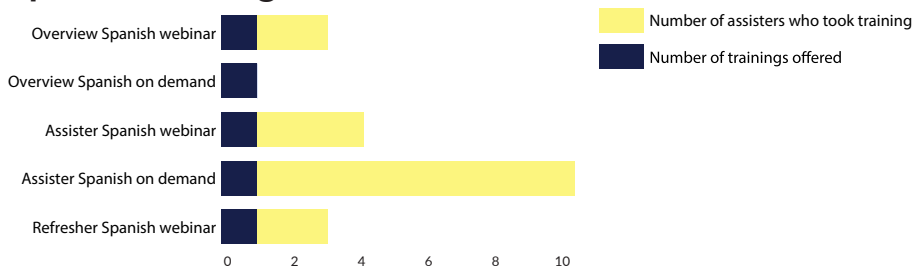
Topics covered in the training include:

- 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 health 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, LGBTQ+, Tribal members and their family, and service members/veterans
- Transitioning between the Marketplace and OHP in both directions

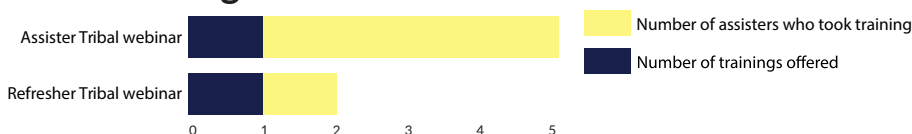
English Training Data



Spanish Training Data



Tribal Training Data



MARKETING EFFORTS

The federal government's efforts to advertise open enrollment, subsidies, and coverage options increased somewhat in 2021 and did so in the nationwide market. Unlike most states that use HealthCare.gov for enrollment and subsidies, Oregon operates its own targeted regional advertising campaign.

In 2021, messaging opportunities increased to cover the COVID-19 special enrollment period, which broadly opened an enrollment opportunity for all Oregonians from Feb. 15 through Sept. 15, 2021. Additionally, enhanced eligibility criteria extended savings made available to a broad group of Oregonians through the ARPA made health coverage through the Marketplace more affordable than ever before.

In light of the COVID-19 special enrollment period and ARPA provisions, the Marketplace ran a campaign which included:

- Social media ads on Facebook and Instagram
- Digital ads on websites and search engines
- Video ads on YouTube
- A collaborative outreach effort with the federal outreach team which shared Oregon-specific materials

For the open enrollment season, the Marketplace created new, refreshing media for ads that ran on TV, radio, and online for 2021. New creative focused on approachable and simple infographic-style messaging, which directed Oregonians to the window shopping tool on OregonHealthCare.gov and CuidadoDeSalud.Oregon.gov. Messaging used emphasized the new savings available and urged all Oregonians, even those who previously did not qualify for financial assistance, to preview available plans and savings through the tool.

The open enrollment campaign for the 2022 plan year included

- Video ads on streaming services such as Hulu, YouTube, and Xfinity
- Audio ads on Spanish-, Russian-, and English-language stations and streaming services
- Print ads in community newspapers and other publications in Spanish, Russian, and English
- Print ads in Tribal community publications
- Social media ads on Facebook, Instagram, LinkedIn, and Twitter
- Video ads on Spanish- and English-language 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

Enhancing Spanish-language information

In an effort to provide equitable access to information to the Spanish-speaking community, in 2021 the Marketplace expanded its efforts in providing culturally sensitive translated materials. A major part of this effort was the launch of CuidadoDeSalud.Oregon.gov, the Marketplace's Spanish-language website. The site largely mirrors the English version of the website, but is home to information that is easily accessible natively in Spanish, without relying on translation tools, including the Get Help Tool and Window Shopping Tool. In addition, throughout 2021, the Marketplace ensured all press releases, publications, and talking points were translated to Spanish in a timely manner.

Examples of advertisements and video stills



WINDOW SHOPPING TOOL

Since October 2019, the Marketplace maintains its state-specific window shopping tool. The tool offers Oregonians a quick and easy way to preview plans available to them, as well as eligibility for financial help and the OHP.

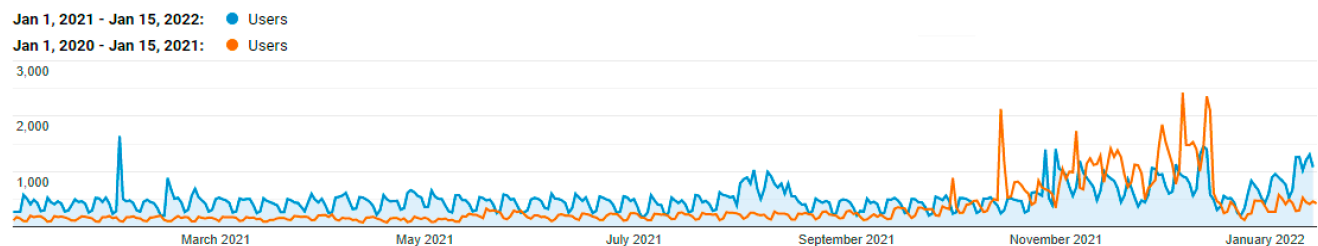
Pivoting eligibility calculations in the window shopping tool

For the 2022 open enrollment period, eligibility calculations shifted twice to accommodate the implementation of provisions within ARPA, once in April and once in July*. Managing the state window shopping tool afforded the Marketplace team the ability to quickly pivot the tool's coding to accommodate the changes. This meant that Oregonians would get an accurate picture of their eligibility based on their individual and family circumstances.

Enhancements to the window shopping tool

- For the 2022 open enrollment, the tool was translated into Spanish and is now available at CuidadoDeSalud.Oregon.gov.
- All users have access to a formulary search that allows users to enter their prescriptions, see which plans cover them, and see the cost sharing on each. Currently, HealthCare.gov users can enter prescription information and see which plans cover the prescription, but they can only see cost-sharing information by visiting the insurer's website and viewing the plan formulary, which can be a cumbersome process.
- The tool now also includes a provider search that allows consumers to see if their providers and facilities are covered. The data behind this functionality has been cleaned and is more reliable than the provider search on HealthCare.gov, which has caused consumer confusion in the past.

Window shopping tool analytics



Data shows that more people used the tool throughout the year, likely due to the COVID-19 special enrollment period. Use was steady through open enrollment, with a heavier spike closer to the Jan. 15, 2022 deadline to enroll.

*See page 5 for an explanation of eligibility changes due to ARPA.

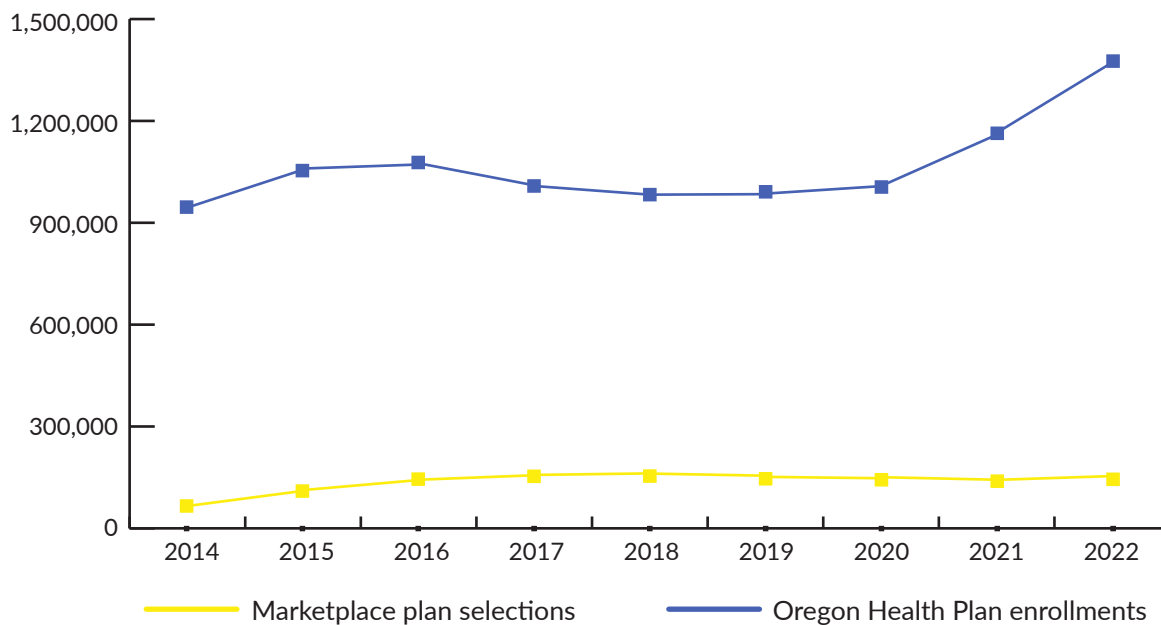
WHO IS ENROLLED?

Efforts from all areas of the Marketplace helped 146,602 Oregonians sign up for 2022 coverage by the end of open enrollment on Jan. 15, 2022. This is a 3.9 percent increase in enrollment than the previous year.

The continuing COVID-19 pandemic played a significant role in enrollments in both the Oregon's Medicaid program (Oregon Health Plan) and the Marketplace. The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided a continuation of OHP benefits for enrollees who may have otherwise lost coverage mid-year due to changes in circumstances. This meant a continued reduction in the churn of people from OHP to the Marketplace. As of Jan. 15, 2021, the Oregon Health Plan saw an increase in 36.8 percent of enrollees (369,560 individuals) over March 9, 2020.

The Biden-Harris Administration implemented a COVID-19 special enrollment period from April 1 to Aug. 15, 2021. Unlike other special enrollment periods which are triggered by a significant life change, this window was open to all people eligible to shop through the Marketplace. It allowed people to enroll in coverage, even if they are not currently enrolled. In Oregon, 22,743 people took advantage and enrolled during this special enrollment period, an increase of 84 percent more people than enrolled during the same timeframe in 2020 when there was not a special enrollment period for COVID-19.

Number of individuals who were enrolled in Oregon Health Plan benefits or selected a Marketplace plan

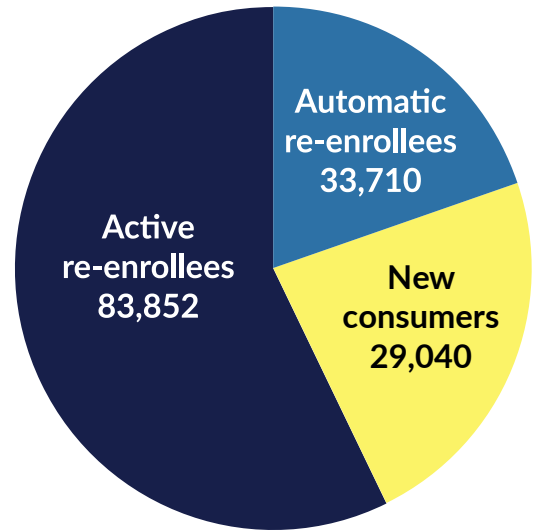
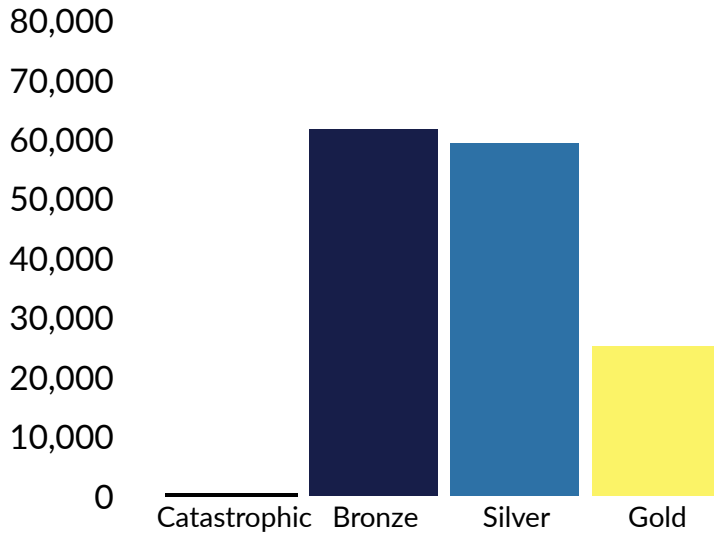


Source for OHP enrollment data: [OHP Weekly Enrollment as of January 17, 2022](#)

Summary of enrollments

146,602

Oregonians enrolled during the open enrollment period for 2022 health coverage, the most since open enrollment for 2019.



Data on financial assistance

79%

of Oregonians who applied for financial assistance received premium tax credits.

49,903

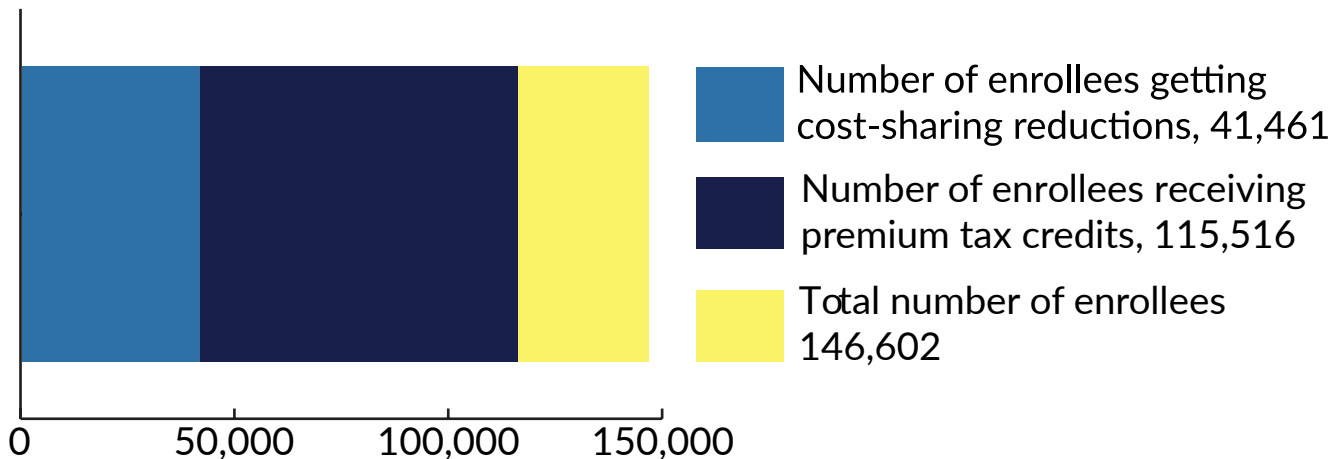
number of people enrolled in a plan with income less than 250% of the 2021 federal poverty level and are likely eligible for cost-sharing reductions on Silver plans.

\$489

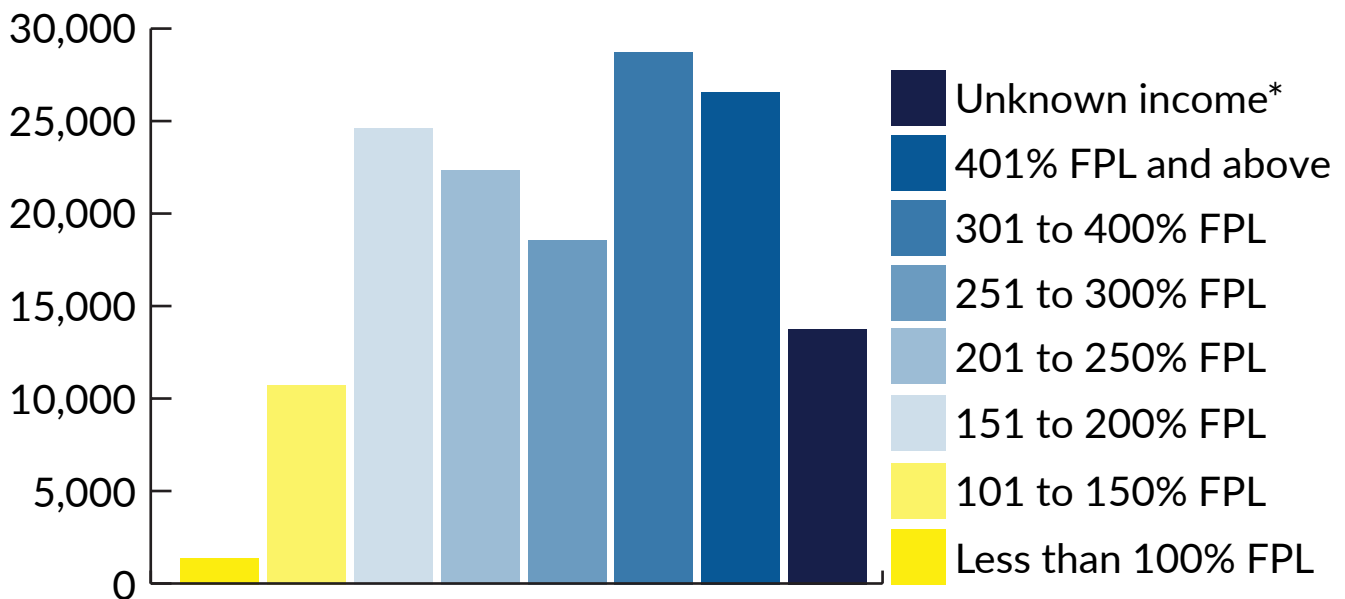
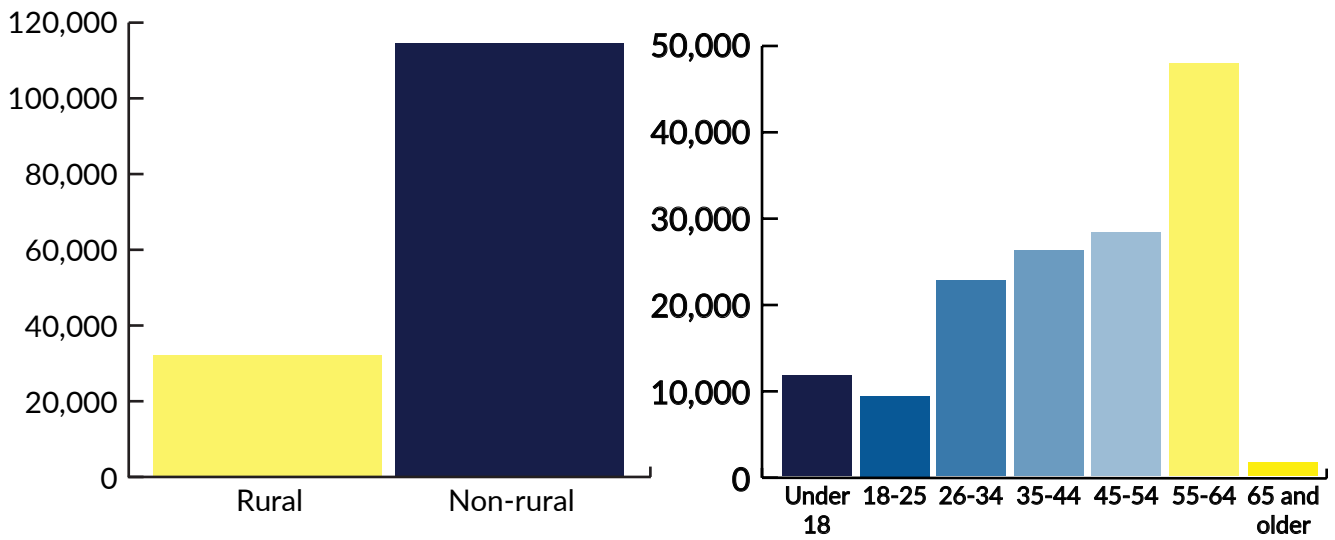
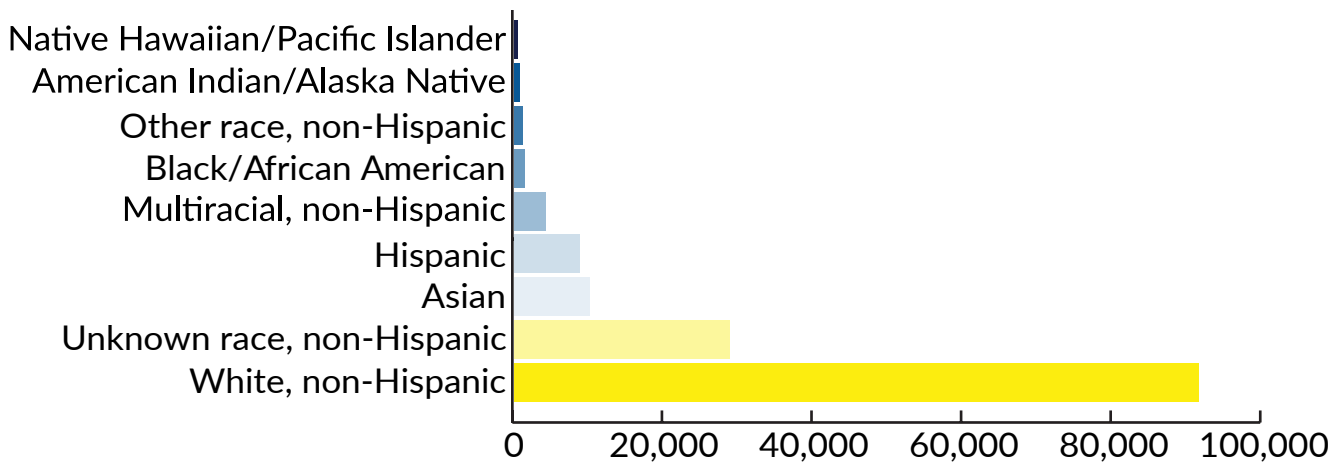
average amount of premium tax credits for people receiving them.

\$130

average bottom-line premium after premium tax credits for those receiving them.



Demographics of enrollees



COFA PREMIUM ASSISTANCE PROGRAM



Compact of Free Association (COFA) Premium Assistance Program

Through Dec. 31, 2021, the Marketplace operated the COFA Premium Assistance Program. The program served low-income citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau who live in Oregon. Under the Compact of Free Association (COFA), these citizens have been permitted to reside in the United States, but COFA adults have not been eligible for full Medicaid (the Oregon Health Plan) since 1996 under federal law. Oregon's COFA Premium Assistance Program has paid the enrollees' share

of premiums for medical insurance purchased through HealthCare.gov. The program also reimbursed enrollees' spending on in-network services that count toward maximum out-of-pocket costs under the plan. Since the inception of the COFA Program, the Marketplace has overseen outreach and education to the COFA community and processed program applications and reimbursement claims.

During the 2021 plan year and calendar year:

- 802 people were enrolled in the program for 2021 coverage.
- Program participants drew \$3,373,012.55 in federal premium tax credits to help pay for their 2021 coverage.
- The program paid \$290,677.58 towards enrollee premiums.
- Program participants who needed care in 2021 and submitted their out-of-pocket costs to the COFA program got \$3,371.51 in reimbursement from the program. Participants have until April 30, 2022, to seek reimbursement for 2021 care.

COFA Premium Assistance Program grantees

Grantee	Grant type
Micronesian Islander Community	Outreach and education grantee
Pacific View Financial	Partner agent

Program partners agents were granted a cumulative total of \$45,034.59.

Winding down the COFA Premium Assistance Program

On Dec. 21, 2020, Congress passed the [Consolidated Appropriations Act 2021](https://www.govinfo.gov/records/consolidated-appropriations-act-2021) ([go.usa.gov/xtfb6](https://www.govinfo.gov/records/consolidated-appropriations-act-2021)), which extended Medicaid benefits to COFA citizens residing in the United States. With the OHP Community Partner Outreach Program at the lead, 455 program enrollees have transitioned to the OHP as of Dec. 26, 2021.

CONCLUSION

The task of connecting Oregonians to affordable coverage is challenging, but it is work the Marketplace is doing with both seriousness and eagerness.

We invite ongoing discussion and collaboration with lawmakers, other partners in government, and the public about Marketplace operations. Contact Chiqui Flowers, Marketplace administrator, at chiqui.l.flowers@dhsosha.state.or.us, to get or stay more involved.

You can also join us for periodic Health Insurance Marketplace Advisory Committee meetings. Find them listed at OregonHealthCare.gov/MAC.

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



Facebook
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www.Instagram.com/ORmarketplace



LinkedIn:
www.Linkedin.com/company/ORmarketplace



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www.Twitter.com/ORmarketplace

APPENDIX: FINANCIAL STATEMENTS

A statement of financial condition, as of December 31, 2021 for the Health Insurance Exchange Fund.

This section discusses the financial condition of the Health Insurance Exchange Fund as of December 31, 2021. Budget or fiscal activities after that date are not reported here. All amounts discussed below exclude the Compact of Free Association Premium Support Program and the Senior Health Insurance Benefit Assistance Program because those programs are not funded by the Health Insurance Exchange Fund.

The Marketplace is financially stable and self-sufficient for the remaining 18 months of the 2021-23 biennium. As of December 31, 2021, the Marketplace can fund approximately 10.3 months of activities with an available fund balance of \$6.8 million.

Marketplace limitation use

The 2021-23 biennium budget for the Oregon Health Insurance Marketplace is shown here

2021-23 Legislatively Approved Marketplace Budget

Section	2021-23 LAB	Positions	FTE
Marketplace	\$ 14,870,281	18	18.00
Shared Services	958,583	-	-
Total	15,828,864	18	18.00

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 December 2021, the Marketplace has recorded \$91,054 of its shared services limitation. The Marketplace assumes that it will use its entire shared service budget over the remaining 18 months of the biennium.

Oregon Health Insurance Exchange 2021-23 LAB and Actuals

Section	2021-23 LAB	Actual Expenditures as of 12/31/2021	Projection 1/2021-6/2023	Actual and Projection	Variance Over/(Under)	% Variance ((Actuals + Projection) / LAB)
Marketplace	14,870,281	1,524,258	11,805,328	13,329,586	(1,540,695)	90%
Shared Services/ SAEC	958,583	91,054	867,529	958,583	-	100%

The following table shows revenues for the Health Insurance Marketplace during CY 2021.

Oregon Health Insurance Exchange CY 2021 Balances and Revenue

Account description	2021 Q1	2021 Q2	2021 Q3	2021 Q4	Year total
Beginning balance	8,588,012	8,493,530	5,740,197	6,058,461	
PMPM assessment - Medical	1,863,131	1,998,918	725,444	2,045,049	6,632,541
PMPM assessment - Dental	29,110	30,446	10,166	28,255	97,977
Interest and investments	14,804	12,074	8,464	7,434	42,777
Other revenue	(4,566)	91,425	-	7,314	94,172
Transfer to General Fund	-	(3,800,000)	-	-	(3,800,000)
Total	1,902,479	(1,667,138)	744,074	2,088,052	3,067,467

The following table shows CY 2021 Health Insurance Marketplace expenditures. These expenditures occurred in the 2019-21 biennium and in the 2021-23 biennium.

Oregon Health Insurance Exchange CY 2021 Expenditures and Transfers

Account description	2021 Q1	2021 Q2	2021 Q3	2021 Q4	Year total
Personal Services	572,036	595,879	22,325	942,379	2,132,619
Services and supplies					
Travel	3,720	1,169	2,727	1,905	9,520
Employee training	503	5,684	1,594	41	7,822
Office expenses	2,746	1,190	10,064	(1,526)	12,474
Telecommunications	21,784	29,157	20,842	1,468	73,251
State government service charges	2,677	3,132	5,608	87	11,504
Data processing	9,979	3,290	11,516	-	24,785
Publicity and publications	836,779	90,544	143,577	65,031	1,135,931
Professional services	31,788	2,645	7,384	2,505	44,322
IT professional services	378	148	-	-	526
Attorney General legal fees	391	-	2,885	605	3,881
Facility rent and taxes	14,695	11,442	-	-	26,137
Other services and supplies	20,415	16,397	869	2,995	40,676
Services and supplies total	945,855	164,797	207,067	73,110	1,390,829
Capital Outlay	-	940	(940)	-	-
Distributions to Grantees	300,725	171,536	96,395	224,756	793,412
Total expenditures	1,818,616	933,152	324,846	1,240,246	4,316,860
Shared Services/SAEC	178,345	153,043	100,964	95,265	527,617
Total expenditures with Shared Services	1,996,961	1,086,195	425,811	1,335,511	4,844,477
Ending fund balance	8,493,530	5,740,197	6,058,461	6,811,002	

The 2021 Q1 growth in publicity and publications over 2021 Q2 is a typical expenditure pattern for the Marketplace. It reflects Marketplace outreach 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. These fees apply only to plans purchased through the federal exchange. In 2021, the fee for medical plans was \$5.50 per member per month and \$0.36 per member per month for dental plans. Assessments for the 2022 plan year are the same: \$5.50 for medical plans and \$0.36 for stand-alone dental plans.

Federal technology fee

The federal technology charge to insurers was 2.5 percent of the average premium for plan year 2021. Oregon Revised Statute 741.105(2)(a) limits the Marketplace's assessment to no more than 5 percent of premium. The Marketplace's position is that the Marketplace's per member per month fee, plus the federal platform charge, should be below 5 percent of premium. The total PMPM plus federal technology fee was 3.46 percent of premium in 2021. The Marketplace expects it to be 3.46 percent for plan year 2022.

Enrollments

Medical enrollment for the 2021 plan year was 12.84 percent higher than forecast. The Marketplace expected, on average, about 113,637 medical policies each month. There were actually about 128,229 medical policies each month. Dental enrollment for the 2021 plan year was 16.19 percent higher than forecast. The Marketplace expected 22,583 monthly dental policies on average. There were actually 26,239 dental policies on average each month during the plan year. The forecast numbers are from February 2021 and represent the data the Marketplace based their 2022 assessment rate decision on. Please note that actual enrollment counts may be updated by insurers until June 2022.

Oregon Health Insurance Exchange CY 2021 Enrollment

Month	Forecast 2021 enrollment		Actual 2021 enrollment		Absolute forecast error	
	Medical	Dental	Medical	Dental	Medical	Dental
Jan. 2021	122,985	24,861	130,446	27,667	7,461	2,806
Feb. 2021	121,363	24,422	127,197	25,494	5,834	1,072
Mar. 2021	119,396	23,990	126,378	26,737	6,982	2,747
Apr. 2021	117,328	23,567	125,962	25,941	8,634	2,374
May 2021	115,148	23,151	127,136	26,400	11,988	3,249
June 2021	113,536	22,742	127,846	26,422	14,310	3,680
July 2021	112,088	22,340	127,174	26,055	15,086	3,715
Aug. 2021	110,755	21,946	128,264	26,206	17,509	4,260
Sept. 2021	109,689	21,558	130,249	26,652	20,560	5,094
Oct. 2021	108,424	21,177	129,779	26,391	21,355	5,214
Nov. 2021	107,292	20,803	129,619	26,021	22,327	5,218
Dec. 2021	105,645	20,436	128,694	24,884	23,049	4,448
Average	113,637	22,583	128,229	26,239	14,591	3,656

The 2021 forecast was based on federal law at the time of the forecast. There continues to be significant policy and legal uncertainty about the Affordable Care Act at the federal level.

Rebate

In compliance with ORS 741.105(b), the Oregon Health Insurance Marketplace is rebating \$1,482,448 over the 2022 plan year. The following table shows the rebate calculation:

Allowed Balance and Rebate

2021-23 Budget		15,827,539
	Limit	3,956,885
6/30/2021 fund balance	5,740,198	
2019-21 expenditures after 6/30/2021	300,865	
Total rebate amount		1,482,448.37

Based on the above discussion, OHA expects the Health Insurance Exchange Fund to remain stable and self-sustaining for the remainder of the 2021-23 biennium. At the end of the biennium, the Marketplace expects to have about 8 months of expenditures in the Marketplace Fund. In the event we don't see a decline in revenue, this will trigger a rebate.