

Public Comments: 2027 Health Insurance Marketplace Qualified Health Plan and Stand Alone Dental Plan Annual Assessment Rates

This document was last updated on September 29, 2026.

The Oregon Health Insurance Marketplace administers the Affordable Care Act (ACA) in Oregon through outreach, education, and managing the technology Oregon residents use to enroll in ACA Qualified Health Plans. The mission of the Marketplace, as an office within OHA, is to empower Oregonians to improve lives through local support, education, and access to affordable, high-quality health coverage.

This rule amendment sets the rate for an assessment on insurance carriers selling plans through the Marketplace. The assessment funds all the Marketplace's operations and support for qualified health plan enrollment, and the fiscal impact to the Marketplace within the Oregon Health Authority (OHA) is accounted for in budget forecasts and enrollment projections. After agency fiscal analysis, the proposed rates have been determined to be the most efficient amounts for continued Marketplace operations entering the 2027 calendar year, striking a balance for the lowest probability of either a funding deficit or unnecessary surplus. The rates are assessed annually, and adjustments can be made each year.

This document includes written public comments related to the 2027 Marketplace Assessment rule amendment. OHA conducted rulemaking on OAR 945-030-0030 and received public comments from August 7, 2026 to September 21, 2026 as part of the

rulemaking process by email to victor.garcia@oha.oregon.gov. This document presents the comments in the manner and order they were received and may include typos or misspellings.

Personal contact information for those who made the comments have been removed, as well as personal health information.

More information regarding the rule, including the annual financial assessment, can be found in <https://healthcare.oregon.gov/marketplace/gov/Pages/rules.aspx>.

OHA expresses no views on the substance of these comments. They are published for transparency and not as an endorsement by OHA of the views expressed.

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Public Comment

1. Concerns Regarding 2027 Proposed Oregon State Based Marketplace Assessment Fee Increase

Received 08/07/26

Submitted by: Zac A. on behalf of Cambia Health Solutions

Dear OHA Marketplace Team:

Thank you for the opportunity to provide feedback on the proposed increase in Marketplace assessment fees. We apologize for the delay in providing feedback, we were navigating this alongside the current rate cycle, and wanted to get some initial clarity before we responded.

Regence and Bridgespan appreciates the partnership we have had with the Oregon Marketplace over the years, and we recognize the important role the Marketplace plays in connecting Oregonians to coverage. However, we have significant concerns about both the magnitude of the proposed fee increase and the timing of the proposal.

Simply put, the size of the increase is difficult to justify given the current affordability challenges facing Oregon consumers. Health plans are already managing substantial medical cost trends, increasing provider reimbursement demands, new state regulatory requirements, and ongoing affordability pressures across the market. Adding a significant assessment fee on top of these existing pressures will ultimately increase the cost of coverage and make it even more difficult to keep premiums affordable for Oregon families and small businesses.

We are particularly concerned that publication of the proposed exchange fee three days before DFR's rate filing deadline has exposed plans to material costs they had no way of definitively determining or including in their 2027 rates. As a result, the DFR's proposed approved 2027 rates released on July 31, 2026, do not account for the increased Marketplace assessment. Carriers have not had an opportunity to appropriately account for this additional cost within the rate development process. Creating a material substantial fee increase after rate filings have already been submitted creates significant operational and financial challenges. We will be requesting the state to cover any portion that is not allowed in our rates.

We also believe additional transparency is needed regarding the Marketplace's funding needs, the specific drivers behind the proposed increase, alternatives that were considered, and the projected impact on consumers and premiums. An increase of this magnitude warrants clear justification and evidence that less disruptive options have been fully considered, both of which carriers and stakeholders deserve, before any decision moves forward.

This is particularly true given that the proposed assessment is significantly out of line with comparable state-based exchanges in the region. Washington's state-based exchange assessment is \$5.11 per member per month, while Idaho's assessment is \$13 per member per month for its own exchange. Idaho's assessment was \$11.75 per member per month in 2026 when it was still operating on the GetInsured platform. Against that backdrop, Oregon's proposed increase is difficult to reconcile, particularly given that Oregon has a larger individual market than Idaho and should therefore be

better positioned to spread Marketplace operating costs across a broader enrollment base.

As Oregon continues to focus on healthcare affordability, we encourage OHA to carefully consider the cumulative impact of new or significant increase in fees and assessments on the individual market. Every additional cost ultimately affects consumers, either directly or indirectly, and we believe affordability should remain a central consideration in any Marketplace funding decision. These proposed assessment increases would also come on top of the separate technology buildout and operational costs carriers will incur to support Oregon's transition to a new state-based exchange platform. Those implementation costs are not insignificant and should be considered alongside the proposed assessment increase when evaluating the total financial impact on carriers and, ultimately, consumers.

We respectfully request that the OHA reconsider the proposed increase and engage carriers in additional discussions regarding Marketplace financing and potential alternatives. We remain committed to working collaboratively with OHA and other stakeholders to ensure the Marketplace remains strong and sustainable without creating unnecessary premium pressure for Oregon consumers.

Thank you for your consideration.

2. Concerns Regarding 2027 Proposed Oregon State Based Marketplace Assessment Fee Increase

Received 08/10/26

Submitted by: Stacy C. on behalf of Moda Health

Placing this burden on the market during such a volatile period is concerning. Participation in the state based exchange is becoming increasingly costly at a time when affordability is already a critical concern for Oregonians.

The question we have is whether the entire amount should be passed on to consumers given the volatility of the market right now? The Oregon individual market

is smaller in 2026 with people leaving due to the expiration of enhanced premium tax credits and the impact of the BHP. 2027 doesn't get easier with Providence and Pacificsource leaving, so any mitigation would be helpful. The Marketplace may need to reconsider what they plan to spend on grants, in-person assisters, etc. considering this impact. Simply said, the fee is too high.

In our actuarial review, an important note we noted is that historically there has been a difference between the Federal Platform (FFE) and State-Based Marketplace on Federal Platform (SBM-FP) to allow for the state's separate component.

For 2026, these numbers were 2.5% and 2.0% respectively. Based on initial 2026 statewide average premiums, Oregon's \$6.85 PMPM is equivalent to 0.9% of premium bringing the total to 2.9% for exchange members (2.0% + 0.9%).

For comparison purposes, the proposed \$35.60 PMPM for 2027 would be 4.9% based on initial 2026 statewide average premiums. That's expected to drop a bit when you factor in 2027 rate increases but still represents a significant increase.

3. Proposed Amendment to OAR 945-030-0030, 2027 Marketplace Assessment Rates

Received 09/21/26

Submitted by: Anthony S. on behalf of NFIB (National Federation of Independent Business)

Dear Mr. Garcia:

On behalf of Oregon's small business members of the National Federation of Independent Business, please consider these comments regarding the Oregon Health Authority's proposed amendment to OAR 945-030-0030, which would increase the Oregon Health Insurance Marketplace assessment from \$6.85 (not including current federal technology charges) to \$35.60 per member per month for qualified health plans and from \$0.45 (also excluding fed. tech. charges) to \$1.70 per member per month for stand-alone dental plans beginning January 1, 2027.

NFIB is the Voice of Small Business. We are a nonprofit, nonpartisan, member-driven organization that advocates on behalf of America's small and independent business owners – both in Washington, D.C. and in all 50 state capitals. NFIB represents thousands of small businesses across the state in every industry sector, many being the smallest of small businesses, with about 90% of our members in Oregon having fewer than 25 employees and 70% having fewer than 10 employees. Together, our members provide jobs for tens of thousands of Oregonians.

NFIB is concerned about the impact this proposal will have on individuals and families purchasing health insurance in the individual market, especially small business owners (and their employees) who have been priced out of the small group market and are now purchasing health care plans for themselves.

This increase is being proposed at a particularly challenging time for consumers, including Oregon's small businesses. The state's individual market is already facing substantial premium increases driven by higher claims costs, carrier losses, declining enrollment, and insurer withdrawals. The Department of Consumer and Business Services reports an average approved individual market rate increase of 21.6% for 2027. Adding a significant new administrative cost on top of these existing pressures risks worsening affordability and driving additional consumers out of the market.

Average Marketplace enrollment is projected to fall from approximately 101,689 members in 2026 to 90,386 members in 2027. Increasing premiums through a substantial assessment increase may accelerate this trend and create a cycle in which higher assessments contribute to lower enrollment, requiring even higher assessments on a smaller population in future years.

The transition to a state-based marketplace may ultimately provide long-term benefits for Oregon consumers and policymakers. However, funding that transition primarily through a dramatic one-year increase in assessments places a disproportionate burden on individuals and small businesses who already face rapidly rising health insurance costs.

NFIB respectfully urges the Oregon Health Authority to consider alternatives that could mitigate premium impacts on all Oregonians looking to purchase health care through the state-based marketplace, including NFIB's small business members.

Thank you for your time and consideration,

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Health Policy and Analytics

Oregon Health Insurance Marketplace

500 Summer St

500 Summer Street NE E-56

Salem, OR 97301

Phone: 855-268-3767

Email: info.marketplace@odhsoha.oregon.gov

<https://healthcare.oregon.gov/>