

Health Insurance Marketplace Advisory Committee Meeting Minutes

When: December 4, 2025 – 9 a.m. to 12:00 p.m.

Where: Virtual via Microsoft Teams

Committee members: Marin Arreola, Gladys Boutwell, Ron Gallinat, Paul Harmon, Lindsey Hopper (chair), TK Keen, Kathleen Orrick, Clare Pierce-Wrobel, Om Sukheenai, Nashoba Temperly (vice chair)

Members not present: Stacy Carmichael, Charlie Fisher

Other presenters: Dr. Sejal Hathi, Clare Pierce-Wrobel

Marketplace staff: Amy Coven, Chiqui Flowers (director), Victor Garcia, Cable Hogue, Misty Rayas (deputy director), Dawn Shaw

Agenda item and time stamp*

Discussion

Welcome, roll call, guidelines, approval of minutes

Roll call of Health Insurance Marketplace Advisory Committee (HIMAC) members, review of meeting guidelines, and approval of the October 16 meeting minutes. (See the handout packet pages 1-2 for a copy of the agenda, pages 3-5 for October minutes, and page 6 for meeting protocols.)

- Approved October 16, minutes.
 - First motion to approve – Ron Gallinat
 - Second motion to approve – Om Sukheenai
 - Ayes – Marin Arreola, Gladys Boutwell, Ron Gallinat, Paul Harmon, Lindsey Hopper, TK Keen, Kathleen Orrick, Clare Pierce-Wrobel, Om Sukheenai, Nashoba Temperly
 - Nays – none
 - Absent – Stacy Carmichael, Charlie Fisher

Dialogue with OHA Director 4:40

Presenter: Dr. Sejal Hathi, Oregon Health Authority (OHA) Director

- As we transition to a State-based Marketplace (SBM), Dr. Hathi wanted to hear from the committee on:
 - How to align the Marketplace to reduce downstream spending and incentivize high value care.
 - What features and supports must we get right in year one?
 - How to ensure we are adequately supporting underserved communities. Where do we risk missing the mark?
 - Where the most fragile hand-off points between Medicaid, Bridge, and the Marketplace for consumers, carriers, and assisters are?
- Kathleen identified a risk where healthy people need insurance due to emergent situations. She recommends getting the word out to the public using community-focused outreach like farmers markets and using radio or social media. A great

concern in her community is the closure of a local LTAC (long term acute care) facility which is going to highly impact the hospital system in the area.

- Paul expressed concern about making sure that navigators, producers, brokers, and agents are empowered with quality information so that they can help consumers successfully transition to the SBM.
- Nashoba is a part of a community partner agency and believes that partnership is integral to help Oregonians and helps build trust in the community and reaching marginalized communities. Community partners also assist in getting information out to the community. What could help with the back-and-forth transition from Medicaid and private plan enrollments due to income fluctuation could be a more one-stop shopping platform.
- Marin agreed with Nashoba that community partners will be important in educating the community in advance and not wait till the last minute.
- Om has been hearing from brokers that they do not think that the SBM will be happening and suggest having a town hall in February or March. She thinks that consumers get confused with the different programs and thinks that one system would reduce confusion.
- Kathleen added that we should make sure that we make sure that everything is easy to read and understand.

2026 Open Enrollment progress report
24:17

Presenter: Cable Hogue, Marketplace Business Policy and Data Advisor
(See page 7 of the handout packet for a copy of the slide.)

- From the chat:
 - Individual market: “In the individual market, six companies submitted rate change requests ranging from an average increase of 3.9 percent (PacificSource) to 12.9 percent (Kaiser), for a weighted average increase of 9.7 percent. That average increase is slightly higher than last year’s requested weighted average increase of 9.3 percent.”
 - “More information about impacts of expiration of EPTC (Enhanced Premium Tax Credits): orhim.info/eptcexpiration”
- Gladys confirmed that her experience is being reflected in the numbers. People are not renewing due to higher premiums due to the loss of tax credits. She has been recommending other types of coverages like concierge care.
 - *Note: The Marketplace does not recommend relying on coverage that is not ACA-compliant; see more information here ([link to the document](#)) on the risks of these coverage types. Please see the [Comparing Types of Health Plans](#) document located along with other December meeting minute materials.*

2026 Open Enrollment notes from the field
36:42

Presenters: Misty Rayas, Marketplace Deputy Director and Amy Coven, Marketplace Communications and Public Engagement Analyst (See pages 7-8 of the handout packet for a copy of the slides.)

- Kathleen wondered if we were going to locations where people are located like food banks and churches. Misty confirmed that we do get out into the community, but food banks are more Medicaid-focused. Our community partners do make sure that our materials are found in those locations. Nashoba added that outreach can be in forms other than physical. COVID has helped develop remote and digital outreach platforms.

Public comment
51:55

No public comment given.

SBM project updates
52:50

Presenters: Victor Garcia, Marketplace Operations Advisor and Program Liaison and Chiqui Flowers, Marketplace Director

(See pages 8-10 of the handout packet for a copy of the slides.)

- Om wanted to know if people would still have to go to ONE.oregon.gov to sign up for Oregon Health Plan (OHP). Victor indicated that they would. The SBM would pass on information and try to make the handoff as seamless as possible but the application for OHP would have to be finished in the ONE system.
- Marin was curious about the main differences between a SBM and the federal system. Victor explained that with the SBM, we would be able to respond with Oregon feedback and have greater control. We would have an Oregon-specific call center and ensure that they have the best customer service experience possible. We can reduce bounce-back between Marketplace and OHP. Our applications, as long as they have the required CMS (Centers for Medicare and Medicaid) data, can have additional REALD (race, ethnicity, language, disability) and SOGI (sexual orientation or gender identity) data so we can have better demographic data.
- Om wondered if there is anything in the foreseeable future that could be a negative impact to the SBM project. Victor speculated that federal changes and market forces would be the biggest impacts.

Preparing for H.R. 1 & Marketplace Program Integrity Rule Implementation
1:35:20

Presenter: Victor Garcia, Marketplace Operations Advisor and Program Liaison
(See page 10 of the handout packet for a copy of the slide.)

- No additional questions or comments.

From the HPA Director
1:50:11

Presenter: Clare Pierce-Wrobel, Health Policy and Analytics (HPA) Director

- H.R. 1 is impacting the Medicaid systems, especially with requirements to provide proof of work and other administrative burdens. There will be a requirement to check eligibility more often.
- Working with the Oregon Health Policy Board committees.
 - Industry Advisory Committee is tasked with coming up with short- and long-term recommendations of the affordability crisis. Short-term costs can possibly prevent people from enrolling in the Marketplace. The long-term would work on fixing the problem.
 - Cost Growth Target Program looks at the underlying costs of health care spending.
 - Health Care Workforce Committee is looking to address the primary care crisis. Ensuring people have access to primary care providers and preventative care.
- Applied for a federal grant that was made available nationwide. The baseline would be \$100 million per year with up to \$200 million. This would be to ensure sustainable access to care in rural settings. It cannot be used to replace loss of Medicaid funding as a result of H.R. 1. For further information: oregon.gov/oha/hpa/hp/pages/rural-health-transformation.aspx
- Kathleen is concerned about the lack of primary care physicians and was curious if there was any thought about a loan forgiveness program. Claire responded that the issue has been looked into by the Department of Education by possibly changing loan caps for certain types of clinicians. There is the Health

Care Provider Incentive Program oregon.gov/oha/hpa/hp-pco/pages/hc-provider-incentive.aspx.

- Om suggested another way that could incentivize Oregon consumers to purchase insurance is to have a state tax credit. Claire and Chiqui agreed to take this suggestion to TK Keen and DFR. TK Keen had to leave the call early and was unable to respond.

**Public
comment, wrap
up & closing**
2:10:03

- No public comment given.
- Before the break, TK Keen was congratulated for being appointed as the state's Insurance Commissioner.
- Kathleen had a final comment that Vibra Specialty Care Hospital announced that they were going to be closing. That would lead to 310 employees that are out of work and acute patients requiring longer hospital stays.
- Next meeting is January 15, 2026.

*These minutes include timestamps from the meeting recording in an hour: minutes: seconds format. Meeting materials and recording are found on the Oregon Health Insurance Marketplace Advisory Committee [website](#) under 2025 Meetings, December 4.