

Health Insurance Marketplace Advisory Committee Meeting Minutes

When: Thursday, December 8, 2022 - 9 a.m. to noon

Where: Virtual via Microsoft Teams

Committee members: Kraig Anderson (chair), Gladys Boutwell, Ron Gallinat, Paul Harmon, Lindsey Hopper (vice chair), Ines Kemper, Joanie Moore, Linzay Shirahama, Holly Sorensen, Andrew Stolfi (ex-officio), Om Sukheenai, Drew Tarab, and Nashoba Temperly

Members not present: Maribeth Guarino and Kathleen Jonathan

Other presenters: Colleen Benson, Matthew Green, Jesse O'Brien, Gina Sherick, and Tim Sweeney

Marketplace staff: Miranda Amstutz, community partner liaison; Katie Button, plan management and policy analyst; Amy Coven, stakeholder and communications analyst; Chiqui Flowers, director; Cable Hogue, implementation analyst and federal liaison; and Dawn Shaw, office support coordinator

Agenda item and time stamp*	Discussion
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Welcome, meeting guidelines, and approval of previous meeting minutes	Introduction of Health Insurance Marketplace Advisory Committee (HIMAC) members and staff <i>See the handout packet pages 1-2 for a copy of the agenda, pages 3-7 for the October minutes, and pages 8-9 for the meeting guidelines.</i> <ul style="list-style-type: none">Approved October 13, 2022, minutes.
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Federal health policy updates 12:56	Gina Sherick, filling in for Stephanie Kennan from McGuire Woods Consulting, called in from Washington, D.C., to present information about current legislation and cases that involve the Affordable Care Act (ACA). <ul style="list-style-type: none">Control of the House flipped to the Republicans with the elections and the speaker of the House position is up for grabs. The senate remains mostly Democratic.2023 will have the bulk of congressional work in preparation of the presidential elections.Continuing resolution, the government is funded until December 16 so far. It likely will run into the next year. Senate Democrats may issue their own omnibus if negotiations fall apart.Public health emergency will go into the beginning of next year, possibly going until June.On November 30, CMS (Centers for Medicare and Medicaid Services) released an RFI (request for information) that is statutorily required to review the essential health benefits framework. They will talk about high out-of-pocket (OOP) drug costs and if the classifications need to be updated. Comments are due within sixty days. There is a push to have CMS address high OOP costs and to align with the ACA (affordable care act).
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- Kraig asked about the mood in Washington D.C. Gina indicated that there is a lot of end-of-the-year stress.
- Kraig also wondered about the alignment of the metal tiers and if it should be done by the 2024 rate setting. Gina believed it should but will check, it is in the beginning stages.

OHA's 2023 legislative concepts
22:02

Matthew Green and Colleen Benson reviewed the Oregon Health Authority (OHA) legislative concepts for 2023.

See pages 10-15 of the handout packet for a copy of the slides.

- LC (legislative concept) 471 – we [HIMAC] have been recommending an SBM (state-based marketplace) since 2019 and now we finally have an LC to put forward with that recommendation. Having our own SBM will allow for better, real-time access to data and improved customer service.
- Drew wondered if the fees would be higher or lower than the current exchange. Matthew stated that the initial projection is that the fees are expected to be lower, \$10 million vs. the current \$20 million. The technology is better, and we can get an off-the-shelf solution.
- Kraig wondered about the process for legislative days. OHA has presented to Governor Brown and she is supportive. Will be presenting to the next governor who will be appointed January 9. Usually, the governor puts forward the LC and it becomes a bill. The bills go to committee, then the House, followed by the Senate. The governor would then have the option to veto it.
- POPs (policy option packages) are for things not currently in the budget.
- Drew wanted to know about funding for the BHP (basic health plan), could it come out of reinsurance. Matthew thought it would be a better question during the bridge program presentation. Matthew will also offer up Phil Schmidt to come to a future meeting to discuss.
- Paul was curious about the likelihood of it going through. Matthew was unsure as with new legislation, 10 percent of bills pass.
- Kraig noticed a placeholder for the SBM but no dollar amount, what is the plan? Chiqui indicated that the current plan is to have two phases. The first will be to move forward with the LC and second to launch the RFP (request for proposals) to get a better idea of the costs.

Medicaid Migration to the marketplace project updates
55:41

Amy Coven presented about the outreach and communication plans for the Medicaid Migration to the Marketplace project and Miranda Amstutz went over the proposed community partner and partner agent grant proposal solicitation process.

See pages 16-19 of the handout packet for a copy of the slides.

- Drew was curious about the provider outreach. Amy responded that we will be piggybacking with OHP (Oregon Health Plan) and letting them take the lead. We will be working collaboratively to make sure the transition has better messaging.
- Om wondered if there was a database to view the progress of OHP applications. Amy suggested reaching out to the CPOP (Community Partner and Outreach Program) coordinator for your area to help get access. Linzay in the past she has reached out to someone with MMIS access.
- Chiqui reminded about the end of the PHE (Public Health Emergency) and that the Community and Partner Work Group has been meeting. Nashoba and Gladys have been attending, and they are going over what will be needed. Reach out to Chiqui if you have any questions or concerns.
- Holly asked in the chat if they could use the CP (community partner) consent form to request the status. Amy will look into this, with the help of Cable to get an answer.

- Kraig wondered how the pre-PHE ending communication is going. Amy informed that there were some partner webinars that are averaging 200 participants. OHP had a “pink letter campaign”, and they were looking for holes and gaps in the returned mail. It appears that the outreach is going well so far.
- Kraig also questioned about the federal Marketplace plans. Amy stated that they are not prequalifying anyone. The feds will send out a letter to let consumers know they no longer qualify for OHP. We will be finetuning a letter that we will send out. Amy will send out the letter for committee review. Consumers will also be getting text messages and calls. Chiqui added that CMS will be sending out 30day and 60-day notices.

Public comment
01:20:55

None given.

Break
01:21:39

Bridge Program Task Force and Marketplace mitigation updates
01:35:41

Timothy Sweeney, Katie Button, and Lindsey Hopper presented updates on the Bridge Program Task Force and the Marketplace mitigation.
See pages 20-27 of the handout packet for a copy of the slide deck.

- Kraig wondered why there aren’t any years on slide 44. Tim explained because if they put years on there, the slide would be out of date when the PHE is extended.
- Drew wondered about the differences between subsidized and unsubsidized members. Tim will need to check with the actuarial folks. Drew followed up by asking about the out-of-pocket costs for subsidized members. Tim replied that the cost depends on the metal tier and the tax credit. Katie agreed and said that it is mitigated by having plans that offer pre deductible coverage. Actuarial slides olis.oregonlegislature.gov/liz/202111/Downloads/CommitteeMeetingDocument/257287.
- Drew also asked if the funds from the reinsurance program could be used to make the insureds whole. Tim did state that it is his understanding that the goal is to maintain the same reinsurance targets that are in place now and we would have to make sure that we have enough pass through in the existing reinsurance waiver.
- Holly asked about the impact on people with a \$0 tax credit and Tim responded that depending on the scenarios, some people may have \$3 tax credit instead.

DFR’s 2023 legislative concept
02:16:42

Jesse O’Brien reviewed the Division of financial Regulation’s (DFR) 2023 legislative concepts.
See pages 30-32 of the handout package for a copy of the slide deck

- Kraig was curious if the DCBS (Department of Consumer and Business Services) process for legislative concepts is similar to OHA’s. Jesse explained that at DCBS, everyone can submit a suggestion for an LC. Each division reviews all the requests and the final LCs go to Andrew Stolfi for final approval before they go to the governor.

Marketplace Open Enrollment 2023 updates
02:30:08

Cable Hogue went over the updates for the 2023 open enrollment.
See pages 27-29 of the handout package for a copy of the slide deck

- Chiqui wanted to include the partner agents in the update but had to remove from the agenda due to time.
- Kraig wanted to know if there has been any feedback from the agents and community partners about this open enrollment. Chiqui has heard from community members that they like the ads that were created by Coates Kokes and Amy Coven. Holly responded as a community partner that open enrollment is going well. There is a trend of people

with gold plans switching to silver. Pre-deductible coverage helped with the selection of silver plans.

- Kraig asked Cable how this year's open enrollment compares to last year's. Cable reviewed the spreadsheet from last year's enrollment from CMS and last year we had about 146,000 enrollments, 117,000 was re-enrollees and of the re-enrollees, 83,000 to 84,000 passively enrolled. Passive enrollment is when they do not take any action and are automatically re-enrolled in their plans. The highest enrollment numbers are January through March.

**Public
comment,
wrap up &
closing**
02:45:27

No public comment given.

Happy Holidays to you and your families. If you need anything from the committee, please feel free to reach out to Kraig, Lindsey, and/or Chiqui.

Next meeting will be Thursday, January 19, 2023, 9 a.m. to noon. Unless notified otherwise the meeting will be a hybrid of virtual and in-person.

*These minutes include timestamps from the meeting audio in an hour: minutes: seconds format. Meeting materials and audio are found on the Oregon Health Insurance Marketplace Advisory Committee [website](#) under 2022 Meetings, December 8.