Meeting Minutes
Thursday, June 11, 2020 - 11 a.m. to 1 p.m.
Virtual meeting via Adobe Connect

Committee members: Kraig Anderson, Shonna Butler, Stephanie Castano, Dan Field (Chair), Numi Griffith, Jim Houser, Sean McAnulty, Ken Provencher, Shanon Saldivar (Vice-chair), Andrew Stolfi (ex-officio), Jeremy Vandehey (ex-officio), and Jenn Welander

Members not present: Sandy Sampson

Other presenters: Stephanie Kennan, Stephanie Jarem

Marketplace staff: Chiqui Flowers, Administrator; Katie Button, Plan Management Analyst; Victor Garcia, Operations Development Specialist; Cable Hogue, Implementation Analyst and Federal Liaison; and Dawn Shaw, Division Support Coordinator

Agenda item and time stamp*	Discussion
Welcome and introductions, committee housekeeping 0:0:00*	Minutes from January 23, 2020 meeting approved. *See pages 3 – 9 of handout package for a copy of the minutes.*

Federal health policy movement 0:06:48	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).
	
	 • Congressional schedule
	   ○ House and Steering Committees are out until June 23. They have left things where they can pass bills by unanimous consent in virtual hearings.
	   ○ The Senate is in until the 4th of July recess and will be back the last few weeks of July. They hope to be gone early August to campaign and back in September. The plan to leave again for campaigning in October coming back after the elections.
	 • It is unsure what is going on with the healthcare bills because of the shift in priorities due to the pandemic. A bill went out with the money for Medicaid and the Hospital Safety Nets. There is some confusion due to FAQs going out with conflicting information on how to spend the COVID-19 funds. There is concern that the money that will be going out is not going to be enough.
	 • At the end of last year, the IRS said that they would permit employers to give employees money to purchase health insurance on exchanges. There has been an uptick in employers providing this option to employees instead of COBRA.
	 • The HEROES (Health and Economic Recovery Omnibus Emergency Solutions) Act (HR 680) died in the Senate. There is a lot of discussion on how to help state and local governments. The House was giving the newly insured 100% of the premium for COBRA benefits, a special enrollment period (SEP) for Medicare Advantage, and increased Medicaid federal expenditures.
	 • There are several court cases that we are watching, they are also meeting virtually.

Oregon state option report 0:20:12	Jeremy Vandehey and Stephanie Jarem, from the Health Policy and Analytics Division of OHA, presented an update to Senate Bill 770 about developing a plan for a public option or Medicaid Buy-in. *See pages 11 – 16 of the handout package for slides.* • COVID-19 has prompted a switch in priorities and we are waiting to see what the resulting impact will be. All the assumptions were pre-COVID and a lot has been put on hold. • The Washington Cascade Care is a version of the public option plan. On slide 13, option 2 is what they chose. They also set a target reimbursement rate. • On slide 7, "Uninsured" should be 6% and "Medicare" should be 15%. • Indications on which way they will likely go will be clearer after the fall report. • Question on if there is going to be an opportunity for the public and stakeholders to virtually comment before the fall report. They are planning on doing so, but working on logistics.
Third party payment programs and hospital financial assistance 0:47:40	Sean McAnulty, Enrollment Program Coordinator for Mosaic Medical, presented information on Hospital Financial Assistance and Third Party Payment Programs (TPP). *See pages 17 – 20 of the handout package for slides.* • May be easier to implement in rural areas. It may be harder to implement in areas with multiple healthcare systems. • There has been a ban for dialysis systems to provide a TPP. • COVID will likely require more of a need for publically supported health insurance. • Question on if it is possible for this to be implemented in this open enrollment period, more likely next. Project Access NOW could easily set a program up.
2020 open enrollment data and 2021 target counties 1:12:47	Cable Hogue presented an update of open enrollment data received from CMS. *See pages 21 – 23 of the handout package for slides.* • We were missing a slide deck for the PUMA (public use microdata area) target area county information. This portion will be pushed to the October meeting. • We get limited data from CMS, we are trying to track how COVID had an impact on enrollment through SEPs. There has been a 28% increase from the previous year. In the month of April, 2020 vs. 2019 had a 59% increase. Mostly due to a loss of MEC (minimum essential coverage).
2021 Marketplace carrier landscape and preliminary rates 1:25:17	Katie Button presented updates for the 2021 landscapes and rates. *See pages 25 – 33 of the handout package for slides.* • Refer to pages 27-33 of the packet for a handout about the initial plan offerings for 2021.

Other state-based marketplace transitions 1:30:37	Victor Garcia provided an update on other state-based marketplace transitions. *See pages 34 – 35 of the handout package for slides.* • The implementation timelines appear to be considerably shorter than other large-scale IT projects because the vendors in this market already have detailed knowledge of state exchange business needs and details. • This familiarity carries over into ongoing operations. Example: Nevada's exchange was able to open an exceptional circumstance SEP just five days after the governor declared a public health emergency. That kind of turnaround time would not be operationally possible if the vendor did not already have mechanisms and workflows in place for such a circumstance.
Draft Marketplace move to OHA legislative concept 1:39:41	Chiqui Flowers reviewed the legislative concept to move the Marketplace over to the Oregon Health Authority. *See pages 37 – 38 of the handout package for the overview.* • SB 1 (2015) was the bill that abolished Cover Oregon and established the Oregon Health Insurance Marketplace within the Department of Consumer and Business Services (DCBS). • SEPs such as a broad-based one due to COVID-19 may be easier to establish, as long as it doesn't conflict with CMS. • We could then stagger the terms of the MAC members. • Trying to keep the process streamlined as possible • Will be working on transition plans, all contingent on the bill passing, which will be a year out. • The bill does not address the technology, wanted to keep it as simple as possible so there isn't a delay to having it passing. This was at the direction of the Governor's office, DCBS, and OHA. • Concern that there would be a reduction of outreach staff if they integrate our outreach staff with the regional officers at OHA. Another concern is the interaction with the Community Partners.
Prescription discount card 1:53:29	Off-agenda topic from Shannon Salidivar. Discussion about prescription drug discount cards not counting towards out-of-pocket-maximums (MOOP). Federal legislation changed whether or not the discount cards or manufacturer coupons can count towards MOOP. Prior to this, high-need consumers could use the coupons to count towards the MOOP so the insurers then pick up 100% of the cost. They can't count any longer and is impacting consumers.
Closing	Next meeting is scheduled to be on Thursday, October 8, 2020. Will be reaching out to possibly rescheduling, plan on it being virtual.

*These minutes include timestamps from the meeting audio in an hours: minutes: seconds format. Meeting materials and audio are found on the Oregon Health Insurance Marketplace Advisory Committee website: healthcare.oregon.gov/marketplace/gov/Pages/him-committee.aspx under 2020 Meetings, June 11, 2020

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