

Health Insurance Marketplace Advisory Committee Meeting Minutes

When: Thursday, June 26, 2025 – 10 to 11 a.m.

Where: Virtual via Zoom

Committee members present:

Charlie Fisher, Ron Gallinat, Paul Harmon, Lindsey Hopper (chair), Shannon Lee, Kathleen Orrick, Om Sukheena, Nashoba Temperly (vice chair), Joann ZumBrunnen

Members not present: Gladys Boutwell, Stacy Carmichael, Clare Pierce-Wrobel

Other presenters: Caleb Lavan

Marketplace staff: Katie Button, plan management and policy analyst; Chiqui Flowers, director; Victor Garcia, operations advisor and program liaison; Dawn Shaw, office support coordinator

Agenda item and time stamp*	Discussion
Welcome, roll call and guidelines	Roll call of Health Insurance Marketplace Advisory Committee (HIMAC) members and review of meeting guidelines. (See the handout packet page 1 for a copy of the agenda, and page 22 for meeting protocols.)
Marketplace Assessment Overview 5:49	Victor Garcia reviewed the purpose of the setting of the Marketplace Assessment rate. (See page 23 of the handout packet for a copy of the slide deck)
Proposed 2026 Marketplace Assessment Analysis 10:09	Presenter: Caleb Lavan, Senior Manager, CBIZ Optumas (See pages 8-21 of the handout packet for the 2026 Assessment Memo and pages 23-26 for a copy of the slide deck) <ul style="list-style-type: none">Om asked if the \$10.1 million of total expenditures would be smaller if the EPTC (enhanced premium tax credit) were to be renewed. Caleb responded that the expenditures were not tied to the tax credits and would not be affected but would change the forecast of enrollment.Kathleen wondered with profit margins if the possibility of the insurance companies bearing the increase of the assessment rate has been explored. Caleb explained that usually the insurance companies pay the assessment rates to the state and then they choose their rates. Chiqui further explained that the assessment rate is included in the administrative costs when the carriers file their rates with DFR and the Marketplace does not have regulatory authority. Katie further explained that the assessment is spread across the whole individual market and carriers can decide if they can absorb the increase or increase their

rates. Carriers are required to pay out a minimum of 80% to claims and our carriers are paying out 90% to claims with 10% going to administrative costs.

- Om was curious, at the beginning of the slides there was an expectation of a reduction of about 4,000 in enrollment and where the number came from. The two factors were OHP Bridge and the end of the EPTC.

**Public
comment**
45:02

No public comment given.

**Next steps
and voting**
45:46

Victor Garcia reviewed the next steps of the Assessment Rate Rule process.
(See page 27 of the handout packet for a copy of the slide deck)

- Because we are asking for an increase we will have a few additional steps, but the rulemaking part is the same. The hearing will be held in July and the notice will go out by Monday. At the public hearing people can present testimony. Any notice about the rule hearing will be forwarded to the committee.
- Vote – passed by unanimous vote
 - First motion and second motions carried over from June 20 meeting
 - Ayes – Charlie Fisher, Ron Gallinat, Paul Harmon, Lindsey Hopper, Shannon Lee, Kathleen Orrick, Om Sukheena, Nashoba Temperly, Joann ZumBrunnen
 - Ayes carried over from June 20 meeting – Gladys Boutwell, Stacy Carmichael, Clare Pierce-Wrobel
 - Nays – none

**Wrap up and
closing**
49:50

- Next full meeting will be on July 17, 2025, and will be hybrid format.

*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, June 20 & 26 - Assessment Rate Rulemaking meetings.