### Marketplace Advisory Committee Meeting Minutes

**Thursday, July 22, 2021 - 9 a.m. to noon**  
**Virtual meeting via Microsoft Teams**

**Committee members:** Kraig Anderson, Shonna Butler, Dan Field (chairperson), Jim Houser, Sean McAnulty, Ken Provencher, Shanon Saldivar (vice-chairperson), Sandy Sampson, Linzay Shirahama, and Andrew Stolfi (ex-officio)

**Members not present:** Kathleen Jonathan

**Other presenters:** Stephanie Kennan, Dr. David Bangsberg, Tashia Sizemore, Jesse O’Brien, Jeremy Vandehey, and Matt Betts

**Marketplace staff:** Chiqui Flowers, administrator; Victor Garcia, operations development specialist; and Dawn Shaw, division support coordinator

### Agenda item and time stamp*

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<th>Agenda item and time stamp*</th>
<th>Discussion</th>
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| **Welcome and committee housekeeping 0:00** | Minutes from Apr. 22, 2021, meeting approved. *See Pages 3-6 of handout package for a copy of the minutes.*  

Introduced all MAC members and members of the Oregon Health Policy Board (OHPB) in attendance.

Maribeth Guarino from OSPRIG, has submitted her application to be appointed as a member. Matt Swafford from St. Charles is a potential member to represent the Provider community. |

| **Federal health policy movement 0:08:20** | 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).  

- Infrastructure bill (broadband, bridges, roads, mass transit, etc.) had a test vote and it failed. Waiting on CBO (Congressional Budget Office) scoring and should have permission to move forward next week. The only part connected to health care is a possible repeal of a Trump era Part D rebate, which would help with the financing.  

- Budget resolution could include:  
  - Extending Medicare to include dental, hearing, and vision.  
  - Extending home health base issues.  
  - Address the Medicaid gap for the 12 states who have not expanded their Medicaid.  
  - Making the ACA (Affordable Care Act) ARP (America Rescue Plan) credits permanent.  
  - Drug pricing reform and possible drug negotiations will have an authorizing committee to review what to do.  

- There has been a social determinants of health caucus formed.  

- Biden issued an executive order against anti-competitive practices and will apply to healthcare figuring out who will do what. Last January, Congress passed legislation removing the federal antitrust exemption for healthcare plans and |

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have asked Department of Justice and the Federal Trade Commission what they have done so far.

- Budget reconciliation will take awhile and not likely to pass before December. There are fights over how to add dental benefits and lowering the eligibility age. Everybody agrees about extending tax credits.
- There isn’t a solid solution to the family glitch yet. There are some public option packages floating around. No consensus on how to get this done and it is in the background.

**Oregon Health Policy Board overview**

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<td>0:23:12</td>
<td>Dr. David Bangsberg, the OHPB (Oregon Health Policy Board) Chair, and Jeremy Vandehey presented an overview of OHPB. See Pages 7-12 of handout package for a copy of the presentation</td>
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<td>• SB 65 has passed and put the MAC under OHPB.</td>
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<td>• Kraig Anderson asked about establishing committees and if any have sunset. The response was it is rare for a committee to sunset, mostly they have been changed due to realignments.</td>
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**General/public comments**

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<td>00:50:11</td>
<td>• Sandy Sampson asked about the unemployment APTC (advance premium tax credit) and if it is working. Many agreed that it is working very well and saving consumers a lot of money.</td>
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<td>• People do not need to go off OHP (Oregon Health Plan) due to being over income. They will be able to keep on until at least July of 2022 when the COVID provision expires. OHP is working on strategies when the 250,000 people who are over income are terminated. There are currently around 1.3 million people on OHP.</td>
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<td>• Sandy wondered when the tribal HHS consultation and OHA meetings will be happening. Jeremy will keep the conversation going and let Sandy know.</td>
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**Updates from the Division of Financial Regulation (DFR)**

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<td>1:00:41</td>
<td>Tashia Sizemore presented about the 2022 proposed rates and Silver Loading. Jesse O'Brien presented information on the American Rescue Plan (ARP) and the DFR legislative recap. See Page 13 of the handout package for the legislative recap. ARP FAQ can be found on their website.</td>
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<td>• Rate review is at the end of the timeline. Public hearings were held in early July. There has been a new process to have insurers create a consumer friendly presentation about their rates and the presentations have been posted on the DFR website.</td>
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<td>• “Silver switcheroo”</td>
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<td>o Currently the cost share loading has been spread across all the plans in the market, it is changing to only the on-exchange standard silver plans.</td>
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<td>o This may make some plans cheaper off exchange, but unlikely to effect consumers who get subsidies. Consumers not getting subsidies should look at their options on and off exchange.</td>
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<td>o All insurers have implemented this for the 2022 plans.</td>
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<td>o There is concern about a wave of consumers going to off exchange plans and affecting the per member/per month funding.</td>
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<td>o It was getting to the point where silver plans off exchange were getting too expensive and there would have been a flip in the market. Silver plans would have been more expensive than gold plans, causing a relatively large disruption in the market. The federal government was not giving any guidance.</td>
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This was the last year we could have made the change to stabilize the marketplace metal level plans.

Katie Button, the Marketplace Plan Analyst discussed adding options into the Window Shopping Tool to direct consumers to the insurer’s websites if an off exchange plan would be the cheaper option.

- Rates
  - Almost done with the rate review, public hearings held and public comment has closed.
  - Made sure the rates were going up along with the medical trends.
  - Another year of relatively low rate increases, the main factor is prescription costs.
  - A new partnership with Cigna has created a new insurer, Oscar. Making sure they are aligned with the market. Initially they had relatively low rates and there was concern that consumers would flood the plan and cause some bounce back in the next enrollment period.

- DFR legislative recap
  - HB 3046 – addresses mental health parity and network adequacy
  - SB 844 – the Prescription Drug Affordability Board will live at DCBS and will be a new unit in DFR. Will be looking at high cost prescriptions and will include at least one insulin product. The board will advise legislature on the best way to make drugs more affordable.

### Upcoming Health Policy and Analytics work

Jeremy Vandehey presented the upcoming Health Policy and Analytics work and engagement opportunities.

- Working on improving health equity, quality care, and consistent outcomes.
- Large uptick in OHP enrollments
- Growing health equity focus on how data is gathered.
- There is a $80 million incentive program to improve behavioral health, including getting more providers especially for underserved communities.
- We have gone from a 15 to 18 percent an uninsured rate a decade ago, down to six percent.
- First cost growth target trend is available this fall. A public option plan is due in January with the global budget plan due next June.
- Want to get to a 98 percent insured rate, we are currently at 94 percent. Looking at outreach and other strategies to realize this goal.
- There was some discussion on how a SBM (state based marketplace) would work with having one application for insurance and any potential assistance programs (OHP, SNAP, etc.)

### OHIM to OHA transition updates

Victor Garcia and Matt Betts presented an update on the OHIM move to OHA.

- With SB 65 passing, we are awaiting the governor’s signature (update: she signed it on 7/19/21), making the Marketplace a part of OHA as of July 1.
- Due to logistics, an IAA was created to move OHIM from DCBS to OHA to after the open enrollment period. This will help with business continuity.
- This will help with DCBS being able to walk OHA communications through OEP and OHA financial services through the annual rate assessments.
- Budget and positions have been moved.
- A transition team has been created.

### Marketplace Advisory

Dan Field, Shanon Saldivar, and Chiqui Flowers discussed MAC business.

*See Pages 15-20 of the handout package for the proposed edits to the bylaws.*
Committee business 02:23:19

- Dan and Shanon attended a meeting with the OPHB leadership. More meetings are coming up. There will be a September 7 meeting to formalize the subcommittee.
- Made changes to the bylaws, main changes included changing “DCBS” to “OHA” and going to 14 senate confirmed members and one OHA designee (which will be Andrew Stolfi) as the ex-officio. Bylaws changes were reviewed and approved by the committee members.

Public comment, wrap up, and closing 02:37:15

Next meeting is scheduled to be virtual on Thursday, October 14, 2021, from 9 a.m. to noon. Some discussion on making the meeting a in-person/virtual hybrid.

No public comments made.

*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 2021 Meetings, July 22, 2021.