

Oregon State-Based Marketplace Executive Steering Committee

Decision Making Committee: Committee is sponsored by OHA executive leadership and has delegated authority to commit the agency to a decision.

Background

Give a brief narrative of the committee purpose. If appropriate, give a brief history of the cause of the need and the current situation of the issues.

The Oregon Health Authority (OHA), on behalf of the Oregon Health Insurance Marketplace (Marketplace) office within the Health Policy and Analytics (HPA) division, is seeking to transition Oregon from a State-Based Marketplace using the Federal Platform (SBM-FP) to a state-based marketplace (SBM). This requires planning and procurement to implement a state-based eligibility and enrollment technology for the program. Senate Bill 972 (SB 972), passed in the 2023 legislative session, requires OHA to have an eligibility and enrollment technology in place by November 1, 2026, for Oregonians to enroll in plans during the open for the 2027 plan year.

Oregonians currently use HealthCare.gov, also known as the federal platform, to enroll in individual health insurance plans sold through the Marketplace. Created by the Affordable Care Act (ACA), these plans are known as qualified health plans and purchasing through a state’s marketplace is the only way to qualify for subsidies to increase affordability in the form of advance premium tax credits and cost-sharing reductions.

Because it serves many states, the federal platform has proven to be inflexible to the specific needs of Oregon and Oregonians. Oregon does not have access to the data of Oregon enrollees, with only periodic (monthly or quarterly) reporting of pre-determined enrollment metrics that cannot be modified. All relevant change requests to accommodate Oregon-specific issues have been denied since 2015 (with the exception of a process change that allowed Oregon staff to submit trouble tickets on behalf of consumers for complex case resolution), and there is no ability to establish service level agreements related to technology or performance of the attached consumer assistance center (CAC).

A state may choose to stop using the federal platform and become an SBM to realize more direct control over program service delivery and receive the resulting benefits, and this is the path Oregon is now taking. Becoming an SBM requires that a state acquire and implement its own eligibility and enrollment technology and accompanying CAC to provide over-the-phone, email, and mail support for enrollees.

Some key reasons (among many others) that Oregon is making this change:

- Savings of millions of dollars per year in federal technology fees.
- Full access to and control over the enrollment data of Oregonians which will better inform ongoing efforts to provide improved services to underserved populations in Oregon.
- More accurate and real-time demographic data will improve targeted enrollment, outreach, and messaging. This also provides more accurate and comprehensive data to inform Oregon’s efforts to contain costs and improve outcomes for all Oregonians, as envisioned by SB 770 (2019).
- Control over the eligibility and enrollment technology and experience for Oregonians.
- Oregonians would see an immediate improvement in customer service and outcomes on implementation. This would also give Oregon the ability to work with a vendor to add desired functions in the future based on the Governor and Legislature’s policy priorities.
- The existence of a competitive market specifically for SBM technology, with vendors that have SBM solutions with a proven track record in other states. The competition serves to contain the cost of the technology.
- Ongoing examples of states that are making, or have already made, this transition.

Project is estimated to continue through March 2027. Costs are expected to be \$14.58 million for implementation, and \$64.5 million (\$12.9 million per year) for five years of maintenance and operations.

Purpose & Scope

List the specific purpose(s) the committee is to create and/or maintain and specify what is within and out of the scope of the committee.

The purpose of the State Based Marketplace project is to procure and implement a state-based enrollment technology solution and consumer assistance center to replace the existing HealthCare.gov system that enrolls individual health insurance plans sold through the Oregon Health Insurance Marketplace. The Oregon State-Based Marketplace Executive Steering Committee (ESC) will work with the Project Sponsor and the Project Manager to support the planning, designing, testing, and implementing a technology solution and consumer assistance center. Committee members will ensure that program resources are available and committed to timely completion to keep the project on schedule and within budget.

The Executive Steering Committee includes representation by management staff representing all areas of major stakeholders to ensure the following objectives are being met:

- The ability to track churn (stopping and starting OHP/Marketplace coverage) issues.
- Retain the overall coverage percentage of marketplace-eligible Oregonians.
- Improve the overall Marketplace experience for Oregonians, whether using the website while submitting an application and shopping or contacting customer service when experiencing any enrollment issues.
- Increase visibility for the Agency to oversee the enrollment data of Oregonians which will better inform ongoing efforts to provide improved services to underserved populations in Oregon. Increase the agency’s ability to measure and report on behavioral health outcomes.
- Improve targeted enrollment, outreach, and messaging by including demographic data. This provides more accurate and comprehensive data to inform Oregon’s efforts to contain costs and improve outcomes for all Oregonians, as envisioned by SB 770 (2019).
- Increase SBM flexibility to support special enrollments to accommodate Oregon-specific circumstances.
- By the end of the project, establish control over operations, customer service, and service levels.

Authority

List the authorizing authority for this committee.

This project is sponsored by the OHA Health Policy and Analytics Interim Director.

Principles

List the guiding principles, which the committee is to use for this committee.

The State-Based Marketplace Steering Committee follows these guiding principles:

- Broad program inclusion
- System integration
- Informed decision-making
- Agency and state-wide enterprise perspective

Membership, Roles & Responsibilities

List the chair or co-chairs, number of committee members, who appoints them and duration of term on the committee. The members of the committee should reflect the diverse programs and employees of both agencies.

Below is a list of the executive steering committee members that will be meeting on monthly basis:

Role	Filled by	Person in Position	Responsibility
Project Sponsor	Oregon Health Insurance Marketplace Director	Chiqui Flowers	

<p>Voting Members</p>	<p>Operations Development Specialist, Product Owner</p> <p>Marketplace Outreach Center Manager</p> <p>HPA, Biz OPS Director</p> <p>Interim Deputy Medicaid Director</p> <p>OIS IT Director</p>	<p>Victor Garcia</p> <p>Misty Rayas</p> <p>Matt Betts</p> <p>Vivian Levy</p> <p>Jake Murray</p>	<ul style="list-style-type: none"> • Providing authority for resource commitment by validating the importance and priority of the project. • Providing strategic leadership and guidance, including direction on known long-term enterprise changes that may affect the project. • Recommending, approving and supporting business process changes required to implement the project.
<p>Non-Voting Members</p>	<p>SDD Technical Manager</p> <p>Project Solutions IT Project Services Manager</p> <p>EIS Project and Portfolio Performance (P3)</p> <p>Principal Legislative IT Analyst</p> <p>IT Contract Analyst</p> <p>iQMS Vendor</p>	<p>Rebecca Richey</p> <p>Talon Wood</p> <p>Jennifer Hannan</p> <p>Ed Arabas</p> <p>Anthony Cortes</p> <p>Bluecrane, LLC</p>	<ul style="list-style-type: none"> • Representing stakeholders who do not sit on the committee. • Providing outreach and communication about project vision and strategy to stakeholders. • Remove barriers to project progress or success.
	<p>Project Manager</p>	<p>Dorocida Martushev</p>	<ul style="list-style-type: none"> • Prepare and distribute agenda • Provide project status updates • Capture future discussion topics/action items •
<p>Non-Voting Member</p>	<p>Project Admin (Scribe)</p>	<p>Dawn Shaw</p>	<ul style="list-style-type: none"> • Capture decisions and action items. • Distribute agendas and meeting materials at least one (1) day in advance of the executive steering committee. • Produce and distribute meeting minutes. • Schedule monthly meetings.

If these voting members delegate committee responsibility, delegates are expected to have broad based program and data knowledge and the authority to make decisions and commit staff time and resources to the project. The delegate attending the meeting must notify the ESC if they are substituting for a voting member. Membership may be expanded, or other agency experts invited as regular attendees as the modernization project progresses. The modernization project will continue within agency budget constraints, whether or not the POP is funded.

Decision-Making Process
<p>ESC decisions will be made by voting, and greater than 50% of the votes to pass. A quorum of greater than 50% of voting members must be present for a vote to be held. In the event of a tie, the Project Sponsor will have the deciding vote.</p> <p>If a quorum of voting members is not present, the Executive Sponsor may decide to move to an email vote, or table the decision until the next ESC meeting. The Project Manager, Project Sponsor, and Product Owner will collaborate with the relevant team members to compile and present decision-making proposals containing all essential information. These proposals will be shared in the monthly ESC meetings.</p>
Deliverables/Outputs – Reports/Metrics
<p><i>List specific documents, products, reports, training, etc. that will be developed and delivered, and the specific reports and metrics used to measure the outcomes of these deliverables. Also, indicate the method of distribution and frequency of the deliverables and the reports.</i></p> <p>Monthly meetings will be scheduled; the committee will also meet on an as-needed basis. The committee will maintain minutes and documentation on decision-making and including a decision log. The ultimate deliverable is to successfully implement an IT system that meets the vision and needs of the stakeholders: agency programs, provider partners, and state and federal partners.</p>
Relationship to Other Governance Groups
<p><i>List the relationship to, method, and frequency of communication with other governance groups.</i></p> <p>This group is responsible for the work of the SBM Project Core Team including the selection of staff and commitment of their time and resources to that team. The Project Sponsor and/or Project Manager is tasked with conveying progress updates to the HPA ISMC. Additionally, the Project Manager is responsible for securing approval from OHA Governance Council for any schedule and budget re-baselines</p>
Meeting Schedule and Meeting Support
<p><i>List the established meeting schedule and who may schedule ad hoc meetings when necessary. Also, specify when and how materials shall be provided to the committee and who will provide the meeting support.</i></p> <p>A roster of members will be maintained. A meeting agenda and minutes will be distributed. The chair will ensure that meetings are adequately scheduled and staffed. The chair will ensure the records are maintained in accordance with all records retention laws.</p>
Charter Review & Modification
<p><i>List the frequency and method of reviewing and the approving body for this charter.</i></p> <p>The Committee shall review and update this charter annually or as needed. The Committee shall seek approval of any proposed changes through their executive sponsor.</p>
Signatures
<p><i>List the individuals who are authorizing the committee.</i></p> <p>Ali H Hassoun, OHA Health Policy and Analytics Interim Director</p>