

State-based Marketplace Project Equity-Focused Health Impact Assessment

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Background

Marketplaces were established under the <u>Patient Protection and Affordable Care Act (ACA, 2010)</u>. <u>Oregon Senate Bill 972 (2023)</u> requires the Oregon Health Authority (OHA) to transition the Marketplace from a state-based marketplace using the federal platform (SBM-FP) to a state-based marketplace (SBM) using its own technology in time for open enrollment for plan year 2027. Specifically, OHA is required to procure and administer both an information technology platform and call center, to replace the federal platform and call center, and provide electronic access to the health insurance exchange in this state by November 1, 2026. The transition project will include numerous aspects, with mindfulness to equity in procurement, emphasis on programs and services designed to reach communities that traditionally have higher rates being uninsured, help immigrant and refugee communities access health coverage and care, and branding and communications strategies that reinforce the primary goals of the agency.

Overview

It is the Marketplace's desire for this transition to positively impact equity and reduce systemic barriers that Oregonians experience in enrolling in health coverage or moving between public benefits programs and private insurance through the Marketplace. The Marketplace will work to ensure that less people lose coverage due to systemic issues, health insurance literacy is increased, and a higher utilization of benefits is ensured.

The Marketplace's primary focus remains on Oregonians who are not offered affordable coverage through a job or public program, including Oregon Health Plan, Medicare, or Veteran's Affairs (VA) benefits. Oregonians who purchase their insurance through the Marketplace will benefit from an SBM by having more Oregon-specific plan information available to them when they choose plans, better customer service when they call the Consumer Assistance Center, and access to state-level programs such as state-subsidies and/or cost-sharing assistance, should the state choose to implement these types of programs.

In addition to consumers, multiple external entities and partners benefit from the Oregon Health Insurance Marketplace, including insurance agents/brokers, community partners who provide application assistance, community groups who serve various communities throughout the state, and insurance carriers wishing to reach Oregonians more broadly.

The Marketplace believes the transition to an SBM will provide robust concrete data which may highlight disparities and could be used in the future to inform interventions to increase racial equity. By engaging partners who work with communities of focus, the Marketplace hopes to reduce or eliminate racial equity consequences.

Project goals

• Clearly defining and communicating expectations with both internal staff and partners to avoid confusion.

 Ensuring expectations align Alignment with organizational goals and objectives.

Accountability Accountability est est

 Holding staff and vendors responsible for meeting established expectations. • Receiving feedback from internal and external sources. Providing regular response and commentary to adjust and align expectations as needed.

⁻eedback

Project team

Staff name	Position and role
Chiqui Flowers	Marketplace Director, Project sponsor
Victor Garcia	Marketplace Operations Development
	Specialist, Project business lead
Dorocida Martushev	Senior Project Manager
Misty Rayas	Marketplace Outreach and Education
	Manager, Project organizational change
	management
Amy Coven	Marketplace Communications and Public
	engagement analyst, Project communications
	lead

When working through this assessment, the Marketplace sought advice, experience, and evaluation from the various internal and external partners listed below.

- Oregon Department of Consumer and Business Services (DCBS)
- Oregon Division of Financial Regulation, DCBS
- Oregon Department of Human Services (ODHS)
- Government Relations, Oregon Health Authority (OHA)
- Health Policy and Analytics Division office of Diversity, Equity and Inclusion, OHA
- Medicaid Policy, OHA
- Tribal Affairs, OHA
- Community Partner Outreach Program, OHA
- Equity and Inclusion Division, OHA

- Various application assisters from Marketplace/Oregon Health Plan certified community partner organizations
- Various Marketplace-certified insurance agents/brokers
- Various Marketplace insurance carriers

Impacted groups

The Marketplace seeks to collaborate with the public and key partners (identified below) throughout the project process through implementation to minimize negative impacts.

Partner groups	Clarifying notes or description
Consumers	Consumers use the Marketplace to enroll in ACA-compliant plans, often with financial assistance. They manage their enrollment through the Marketplace and pay premiums directly to the insurance carrier.
Insurance agents/brokers	Insurance agents/brokers have direct access to assist clients in enrolling through the Marketplace with financial assistance. They often use Enhanced Direct Enrollment (EDE) platforms as a third- party application and client management software. Insurance agents/brokers assist clients with managing their policy and solving problems as they arise.
Assisters at community partner organizations	Assisters at certified community partner organizations guide consumers through the Marketplace application using the consumer's account. They assist with outreach efforts to drive enrollment through the Marketplace and assist with solving issues as they arise.
Insurance carriers	Insurance carriers submit plan data through a Marketplace portal, which also allows testing the system to ensure data is shown properly. The Marketplace directly interfaces with insurance carriers through a portal in which they share files back and forth to keep policies/enrollments up to date.
Insurance regulator	Oversees and regulates the state's insurance industry to protect consumers and ensure a fair, stable marketplace. It enforces laws related to insurance, reviews insurance rates and policies, investigates consumer complaints, and provides guidance on financial and insurance-related matters. DFR works in close-step with the Marketplace to certify qualified health plans sold through the Marketplace and to ensure constituent issues are handled in an equitable and efficient manner.

Tribal communities	Enrolls (or assists with enrollment) through the Marketplace with
	financial assistance. Unique financial help is available to Tribal
	communities. Tribal communities often have a distrust of
	government programs and seek health care from Tribal Health
	Providers.
ODHS and OHA eligibility staff	Assists Oregonians with applying and problem solving with state
	benefits, such as Oregon Health Plan and OHP Bridge. Guides
	people to other health coverage if they are losing OHP benefits.

Populations and communities of focus

African American and Black communities

Asian communities

Eastern European and Slavic communities

Hispanic and Latina/o/x communities

People who are lawfully present but have been within the U.S. less than 5 years

People without health insurance

Tribal communities

Resources and constraints

Resources	Impacts
	The Marketplace Outreach Team has built strong
Outreach team	partnerships with community-based organizations
	(CBOs), assister organizations, and insurance agents in
	their region. Their outreach foundation lends itself to
	providing information to the public and partner
	agencies/organization.
	Insurance agents/brokers and application assisters
Insurance agents/brokers and	work one-on-one with diverse members of communities
application assisters as conduits	that the Marketplace serves and can offer unique
of information	viewpoints from their communities. They can also
	facilitate sharing of information to communities.
Constraints	Impacts
	Initiation of Oregon's Basic Health Program (OHP
Budget uncertainty	Bridge) will impact enrollment through the Marketplace,
	resulting in a loss of assessment fees from the

	enrollees who migrate to the new program. This, along
	with uncertainty of federal regulation about expanded
financial assistance, causes budget uncer	
	executing desired goals.
	Senate Bill 972 (2023) mandates implementation by
	Nov. 1, 2026 for plan year 2027. This aligns with the
	intention to seek technology solutions that are already
	developed by vendors and used in other states to
	reduce overall project risks. The timeline also limits the
	time available to make configuration changes unique to
Draight and configuration shange	Oregon before implementation. Changes aligning the
Project and configuration change timelines	SBM with OHA's strategic equity goals are among the
umennes	state-specific changes that can be made. While the
	Marketplace can commit to many configuration changes
	needed to align with those goals, the time needed to
	complete the changes may extend beyond initial
	implementation. Reducing the time required generally
	correlates to increasing the available funds and
	resources but is also governed by the scope of any
	required changes.
	Current federal regulations do not pose any known
	obstacles to the planned equity-focused measures for
	the SBM transition. HealthCare.gov has started
	enhancing equity-related data collection, beginning in
	the 2024 plan year. However, this situation could
	potentially differ under each U.S. presidential
Federal ACA Regulations	administration, as new leadership may influence
	regulations of federal executive agencies like the
	Centers for Medicare and Medicaid Services (CMS).
	The Marketplace may encounter challenges with
	administrations opposed to the ACA, which could lead
	to regulatory changes affecting SBM implementation
	outcomes or necessitate adjustments not in line with
	Oregon's health equity objectives.

Risks and opportunities

The Marketplace recognizes that a switch to SBM technology may pose a challenge for all relevant partners and enrollees; however, the Marketplace will work to mitigate this risk by conducting robust outreach, diligently communicating, educating impacted parties, and leveraging robust partnerships

built with entities providing application assistance and guidance. Insurance carriers are most likely to experience significant workload increases as they connect their systems to the new technology.

In addition, insurance agents/brokers will be affected by the switch as many are established with enhanced direct enrollment (EDE) platforms. These platforms make the enrollment and client assistance process much faster and more efficient, but an SBM technology will also have many of the same features and efficiencies. Changing to new technology may mean that these insurance agents/brokers are unable to use currently used platforms, and the Marketplace must weigh the costs and benefits to Oregonians of ensuring the new platform may integrate with existing EDE platforms and implementing the operations, infrastructure, and personnel required to manage an EDE-style program for Oregon.

Community engagement considerations

Traditionally, the agency has asked communities and partners what is needed for system change projects but has failed to be responsive to expressed needs and to use the feedback to implement change. This has contributed to a lack of community trust in agency partnership, which may pose barriers to project acceptance given partners of past projects. Taking these considerations into mind, the Marketplace intends to engage with the community in equitable and meaningful interactions, soliciting feedback where it can be impactful, and following through on expectations as they are set for acknowledgement and response to feedback.

In the past, it has been a challenge to get Eastern European/Slavic communities and faith-based organizations to the table. The Marketplace has made some progress in the last year in partnerships and relationship building. Persons living with disabilities and other groups that are disproportionately enrolled in OHP or Medicare benefits have also been difficult to get feedback from. This may be from a lack of interest due to ineligibility for Marketplace coverage for much of the population. The Marketplace will continue to engage with these communities, as well as groups who work frequently with these communities, asking them to review materials before they are finalized, continue to invite them to attend decision making meetings and meetings for the public. The outreach team, the Community Partner Liaison, the Agent Liaison, and the Tribal Liaison work hard to continue to build relationships with all communities and all people and encourage them to share their thoughts and voice.

The Marketplace is aware that some communities do not trust government agencies, and therefore are not interested in participating in engagement activities. Communities may also not participate due to lack of resources or unfamiliarity with processes. Health insurance is by nature a complex system, with complex jargon and terminology. Medical care encompasses a wide variety of services, and to provide enough information for consumers to shop for coverage effectively, the Marketplace must display a large amount of information. The Marketplace will provide multiple opportunities for consumers and partners to review information in a meaningful way and to provide feedback, including focus groups, public comment opportunities, forums, and anecdotal reporting. However, due to the complexity of the

coverage the Marketplace offers, it is difficult to engage with consumers directly in a manner that provides concrete policy input.

Project phases	Opportunities for questions for community/partner input
Planning	Gathering insight into experience using the current federal platform
	and desired requirements.
Execution	Gathering insight into training experience and what is desired.
	Feedback on communications toolkits, what may be helpful in the
	transition and beyond.
	Feedback and insight into branding.
	Feedback on application structure, flow, and verbiage.
	Dedicated demonstration and listening session.
	Partner testing and feedback.
Monitoring and	Feedback on communications mechanisms, timeline, and messaging.
controlling	Feedback on communications drafts.
Close out	Feedback on implementation, first OE on new platform.

Outreach

The Marketplace is committed to fostering strong community engagement from the start of the project and maintaining a steady flow of opportunities for input and collaboration. The Marketplace understands that communities throughout Oregon have diverse ways of receiving information. This can be due to various technological, resource, or linguistic barriers that make it challenging for everyone to stay connected and informed in the same way. By prioritizing early and ongoing engagement, the Marketplace aims to build a more inclusive and connected community. This approach not only helps us better serve the needs of all Oregonians but also strengthens the bonds within our communities, making sure that every individual has a stake in the decisions that affect their lives.

The Marketplace will put a strong emphasis on:

- Ensuring communication and education routinely defines what the Marketplace is, uses plain language, and establishes mechanisms that may be used to address concerns and issues.
- Providing equitable access to coverage by striving to provide materials in a variety of languages and formats (i.e., audio, visual and written).
- Ensuring materials are accessible to people with disabilities.
- Providing in person engagement opportunities when possible.
- Ensuring translations are culturally and linguistically appropriate.
- Coordination of engagement opportunities with associated partners.

The Marketplace outreach team has a strong history of providing information to the public and partners where they already seek information, which has been a pillar of strength for outreach efforts thus far.

The team will build on these partnerships to spread awareness of the implementation, action needed, and to seek input throughout the project process.

Regarding outreach, each outreach team member has a strategic plan that supports not only their region geographically they work directly with all races, ethnicity, cultures, tribes, genders, individuals with disabilities, ages, religions, socio-economic status, veteran status, and immigration status. Outreach team members have built a deep familiarity of the communities throughout their regions and work to identify which priority audiences exist, where they are located, and tactics to reach those audiences. These audiences are typically harder-to-reach or less engaged directly with the Marketplace or state government, whether due to distrust or general lack of interest. Outreach strategic plans consist of in-person outreach, attending service integration meetings and other resource sharing type meetings in their regions, training to all groups, attending local events, sponsoring local events, to name a few. The outreach team puts a heavy focus on outreach to these communities, which means looking for and prioritizing events catered specifically to priority audiences, building relationships with trusted messengers and organizations with an emphasis on serving priority audiences, and ensuring language and culturally specific materials and publications are available throughout communities where priority audiences live, work, and seek information. The team continuously reports back to leadership and colleagues about the challenges they face in reaching priority audiences for brainstorming ways to overcome obstacles in outreach.

The outreach team also has three team members who are bilingual (English/Spanish), including one team member who is dedicated to statewide Latina/o/x outreach and support as Spanish is the second most common language in Oregon. The Marketplace has a dedicated Tribal Liaison who meets monthly with Oregon Tribes to hear their voices and input on how the Marketplace can best support the Tribes. The Marketplace also has both a dedicated Agent Liaison and a dedicated Community Partner Liaison who each focus on finding partners who can support us with languages and cultural needs within communities, with a heavy emphasis on partners serving priority audiences.

The Marketplace outreach team attends monthly meetings with community partners who are equity leaders and ambassadors for their communities. The team supports and attends the Community Engagement Development Group which consists of cross-agencies and other divisions within OHA to share community feedback and voice. The Marketplace hosts meetings that provide data and decision points and feedback loops for agency and community leaders to provide a voice. Before engaging with agency and community equity leaders the team consults with the OHA Diversity, Equity, and Inclusion team for feedback on presentations and materials created.

Accessibility

The Marketplace home office is within the Barbara Roberts Health and Human Services Building (HSB) in Salem, which is accessible and open to the public, and meets ADA accessibility guidelines. Although the Marketplace does not frequently host in-person events, the team ensures meetings and events are fully accessible per ADA guidance. In addition, the team ensures all grantees are working in spaces that offer accessible access and can provide a safe, secure space to any individual who may desire in-person assistance.

Training

Each year, the Marketplace trains each of its assisters as part of the Community Partner Program. This training series begins in July and is due in October each year, though training is available yearround for new assisters. The training is available on-demand, live online and in-person, and in both English and Spanish. The State-Based Marketplace Transition Project will require the existing training to be adapted and expanded to include insurance agents who write policies on the exchange. In addition, insurance carriers will need training on how to use the new system and navigate support systems.

Consumers will need supports to help them prepare for their information to move to the state-based marketplace, how to update information, and how to enroll/manage their enrollment. This is all in addition to the technical support and assistance that will need to be established for any issues that arise unexpectedly. It is anticipated that information for current Marketplace enrollees will transition to the state-based marketplace without action on the consumer's part. However, a new system may pose new challenges, especially to audiences that experience limited English proficiency, limited technology literacy, limited access to technology. Consumer training will need to be created in a variety of formats and languages to ensure consumers are able to understand the new system, how their information is being transferred, and what action (if any) they must take to continue or update their coverage. Initial planning has identified written materials and video as the two primary training formats. However, notices will be sent via postal mail and perhaps via electronic communication including email and/or text messaging.

Inclusive data driven process

Fundamentally, the Marketplace was created to reduce barriers people experience when accessing health coverage and care. It does this by implementing financial assistance programs to reduce costs and utilizes technology which allows Oregonians to compare all available health plans and enroll directly through a web portal. The Marketplace is designed to serve all Oregonians who do not qualify for public medical programs or have coverage through an employer. Current data does not adequately inform the demographics impacted by the Marketplace; however, the new SBM system will allow the state to collect data following REALD and SOGI guidelines and to have direct access to demographic data to inform decisions and change.

Current data available to inform decisions includes census data and some enrollee-level data, provided by federal partners. The Marketplace continuously evaluates data it receives to pinpoint pain points in the system, marketing, and outreach, and will continue to do so. Due to data limitations, the Marketplace plans to employ listening sessions and other feedback mechanisms to engage partners with expertise in the various communities within Oregon, with an emphasis on Asian, Black African Diaspora, Latino/a/e/x, Native Hawaiian/Pacific Islander, Slavic, and rural communities. Once implemented, the SBM technology will allow the state to collect more robust data sets to inform program and agency decisions more accurately.

The Marketplace plans to employ multiple strategies to inform about data collection and its use, including email newsletters, project and program websites, and social media. Once the SBM technology has been implemented, disclosures will be included to inform about the collection and use of data, as well as the security of data provided.

The Marketplace holds a fundamental value of transparency, including sharing data when available via media outlets, its website via dashboards and reports, and through its annual report. This value will continue to hold steady as the program is able to collect more robust data to inform program decisions. The Marketplace plans to share demographic data on an agency level as appropriate to better inform agency decisions.

- 1. Inform participants how data collected will be used to tell a story and construct policies.
- 2. Transparency will remain a core value of the Marketplace, including being transparent over the relationship between data vendors, data sharing, what data will be gathered, and how data will be used.
- 3. Prioritizing investments, entrusting and centering perspectives of diverse and indigenous community members, leaders, and partners.
- 4. Frequently publishing data publicly using dashboards or other mechanisms, to be determined prior to launch.

Opportunities will be presented throughout the project process from planning through closeout for partners and community members to provide feedback on their experience, process improvements, and identified strategies for implementation and communication.

Inclusive communications

The Marketplace places high emphasis on ensuring messages are reaching all Oregonians, with an emphasis on communities traditionally impacted by health and social inequities. The Marketplace prides itself on the robust engagement and feedback received from community-based organizations and partner organizations. The Marketplace prioritizes community feedback to ensure it guides communication plans and messaging. The primary purpose of engagement is to ensure the messages developed resonate with the intended audiences. The Marketplace plans to engage with community-based organizations, partner organizations, insurance agents/brokers, and the community to solicit feedback on branding, values, and messaging to ensure trans-creations are appropriate for the intended communities and will encourage all Oregonians to seek coverage through the Marketplace, if not eligible for Oregon's Medicaid programs, Medicare, VA benefits, or other affordable coverage.

The Marketplace follows the OHA standard on translation, further translating materials into languages identified as desiring more information. The Marketplace has identified the top fourteen written languages requested by individuals losing Oregon Health Plan benefits and potentially moving to the Marketplace: Arabic, Chuukese, English, Hmong, Korean, Marshallese, Russian, Simplified Chinese, Somali, Spanish, Tagalog, Traditional Chinese, Ukrainian, and Vietnamese. These languages have been the cornerstone of translation work for Marketplace activities, including translation of publications and direct messaging including notices and e-mail notifications. All materials are available in braille, large print, or audio recording upon request. The primary languages requested are English and Spanish, which has directed the Marketplace in translation efforts for social media and text message (SMS) notifications. Translation services are available when a bicultural/bilingual team member is not available or does not exist for the language support needed. The team also ensures all meeting invitees are given the opportunity to ask for language support to fully participate and offers all webinars and training in both English and Spanish.

The Marketplace ensures website content is available in both English and Spanish natively, and offers a Google Translate option for additional language support. The Marketplace routinely surveys its website to ensure accessibility and equitable access to information. The Marketplace also employs accessibility measures to ensure people with a vision, hearing or speech disability can communicate with, receive information from or convey information to the Marketplace and its partners who provide application assistance. These measures include auxiliary aids and services including ensuring websites and materials are screen-reader friendly, providing materials in large print, Braille or electronically when requested, and ensuring American Sign Language (ASL) or other language translators and/or closed captioning is available at all public meetings or when requested. All public phone lines will be relay service compatible. All partners are required to offer similar services to ensure equitable direct services are available for people with disabilities.

In addition, the Marketplace works diligently to ensure public-facing materials are at an 6th grade or lower reading level, and partner-facing materials are at an 8th grade or lower reading level whenever possible. Printed materials are provided routinely when tabling at events at are provided to any community organization who requests them. The Marketplace outreach team frequently provides printed materials at networking events and while conducting outreach in the field.

The Marketplace will hold focus groups and other opportunities for partners and the community to provide direct feedback regarding messages and materials prior to campaign development. This will ensure Marketplace communications strategies are equitable and will resonate with priority audiences from the start.

Co-creation and power sharing

The Marketplace has built a relationship with trusted community-based organizations statewide who provide Oregon Health Plan and/or Marketplace application assistance, as well as other CBOs who do not provide application assistance but are trusted resources for their community.

Currently the Marketplace partners with several insurance agents/brokers and community partner organizations who provide OHP and Marketplace application assistance. Many agencies are women-owned or owned by people of color.

The Marketplace holds the opinions and viewpoints of these trusted partners in high regards, especially as these organizations and individuals often have direct lived experience living as or working with individuals who are members of priority audiences. In addition, Marketplace partners have a keen sense of understanding about the complexities of the systems of health coverage and care. The Marketplace has scheduled quarterly listening sessions to provide project updates and solicit feedback from partners. The topics of each listening session has yet to be determined as it will heavily depend on the focus of the project at that time. In addition, the Marketplace will seek feedback and input from partners via electronic survey and in-person when necessary and possible. A primary focus of the Marketplace team through the duration of this project remains on co-creating the state-based marketplace branding, communications materials, and platform with feedback from partners.

Resource distribution or redistribution

The Marketplace uses data sources mentioned above to understand what community needs may be. The team receives community feedback when attending community meetings and when conducting public outreach. The outreach team plans strategically to support events, outreach, and meetings within the communities of need and allocate additional budget and staffing resources to those areas. The Marketplace works diligently to build trusting relationships with community partners, agent partners and community leaders in those areas of need to provide additional trusted support.

The Marketplace consults with the Tribes often. Three out of the nine Tribes in Oregon partner with the Marketplace to educate and support their Tribal communities. The Marketplace attends monthly meetings with Tribes, as well as quarterly in-person check-ins. The team also offers training specific to the Tribes and seeks consultation on Tribal-specific materials.

Two Marketplace outreach team members live in different parts of rural Oregon and another one of our outreach team members travels to Southern Rural Oregon several times a month to support outreach, education and meetings and has been doing so for the last eight years. The Marketplace also has volunteers and partners who live in rural Oregon and support rural Oregonians. The team hosts several meetings and trainings virtually as well to allow for all Oregonians to attend.

Four of the six insurance carriers offer plans statewide. This ensures that all Oregonians have meaningful plan choice, regardless of their geographic location.

The Marketplace routinely gathers feedback from trusted community partner organizations who have specialty in cultures the Marketplace has identified as being a priority. The purpose of this feedback is to refine messaging, visual elements, and tactics to ensure the Marketplace is being culturally specific and responsive to communities of focus.

The Marketplace empowers Marketplace-certified partners – community-based organizations, Tribes, and insurance agents/brokers who provide application assistance – to help clients understand their health coverage options and guide them through the application and enrollment process. The Marketplace has historically issued grants to select partners who apply and meet eligibility to participate. These grants provide funding to support Marketplace outreach, education, and enrollment efforts. The Marketplace plans to continue offering these grants during and after the transition to a state-based Marketplace. Funding amounts will be determined prior to implementation, with a heavy focus on partners with focus on priority audiences.

Evaluation

Each month the Marketplace shares project updates via the Marketplace Monthly Updates and email newsletters. The Marketplace also updates the SBM Transition Project site as needed.

Feedback is largely gathered, assessed by the project team, and evaluated for action. Feedback is received:

- During Health Insurance Marketplace Advisory Committee meetings
- During monthly CPOP/Marketplace regional collaborative meetings
- During quarterly listening sessions
- Via email to marketplace.sbmproject@oha.oregon.gov

The Marketplace team is open to all feedback from interested parties at any time. When feedback is received, it is disbursed to the most appropriate team member, discussed as a team (if needed), and evaluated for possible change implementation. Currently, the Marketplace is limited to what feedback can be implemented due to the constraints on using the federal platform. However, during and after implementation of the state-based Marketplace, the team will be able to take more actionable steps based on the feedback received. The Marketplace takes all feedback seriously to determine and reduce issues if processes, procedures, and policies are inequitable.

The Marketplace uses existing partnerships with community organizations and insurance agents/brokers to learn about identified communities of focus, and uses information gathered to enhance efforts to engage with these communities. The Marketplace believes our partners are invaluable experts at working with the communities they serve and see their input as a beacon to learn about strategies that will best serve their communities. Though not all feedback is able to be implemented, the team holds the feedback close in mind when establishing new policies, processes, and strategies.

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Oregon Health Insurance Marketplace at <u>info.marketplace@oha.oregon.gov</u> or 855-268-3767. We accept all relay calls.

Health Policy and Analytics

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