State-Based Marketplace Listening Sessions Results

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Listening sessions
Purpose

To solicit feedback from key partners (insurance carriers, community partners who provide application assistance, and insurance agents/brokers) about their experience using HealthCare.gov and desired improvements within the new state-based marketplace (SBM) enrollment and eligibility platform and consumer assistance center.
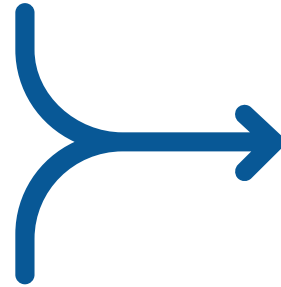
Project overview
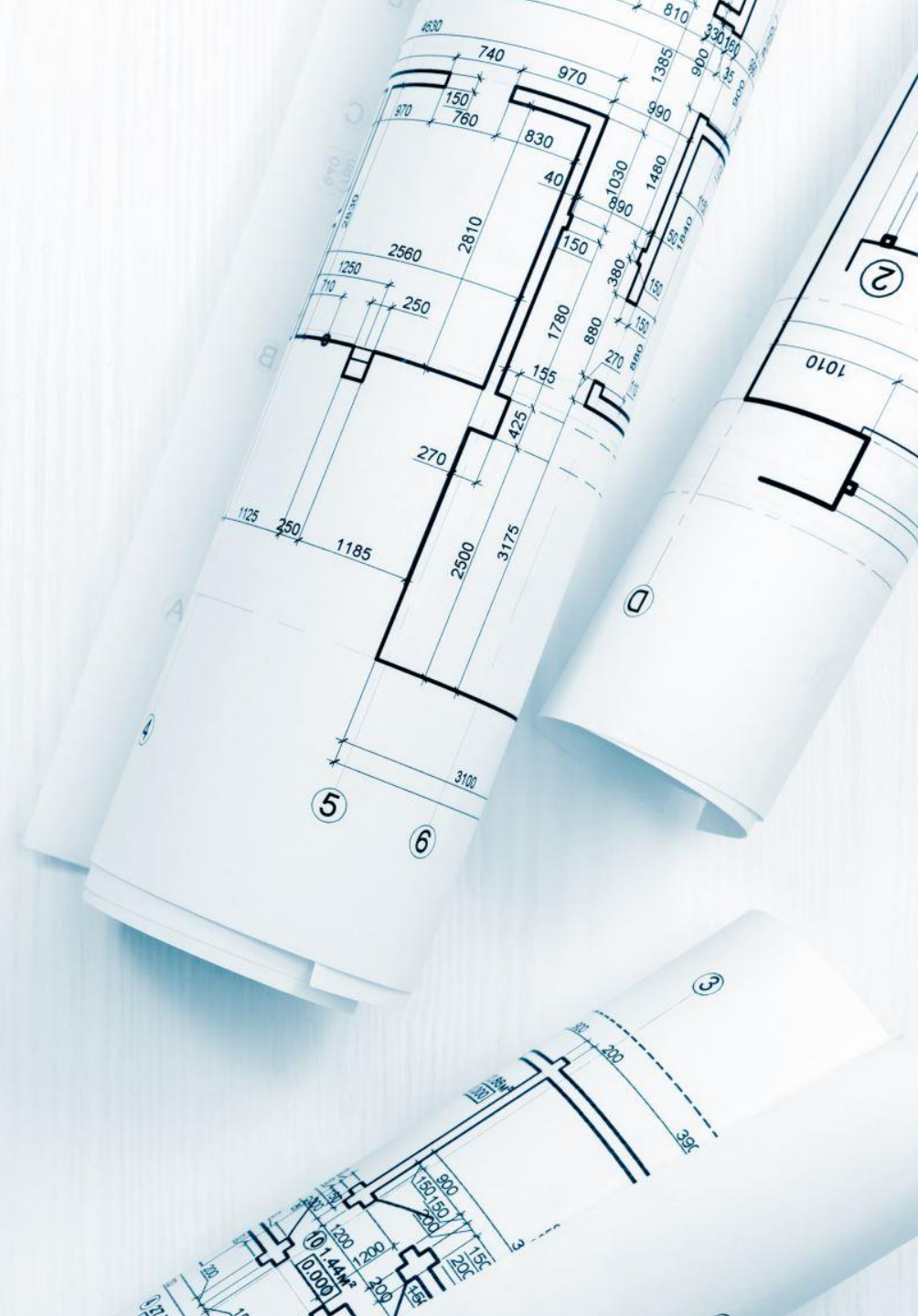
Project goals

Clarity

Clearly defining and communicating expectations to avoid misunderstandings.

Alignment

Ensuring expectations align with organizational goals and objectives.

Accountability

Holding individuals responsible for meeting established expectations.

Feedback

Providing regular feedback to adjust and align expectations as needed.

Community engagement

DEGREE OF DIFFICULTY AND PUBLIC IMPACT

INFORM
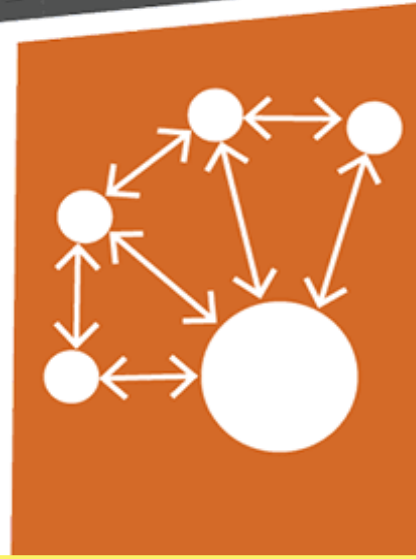provide balanced, objective info that the public should know and act on

CONSULT
obtain and consider feedback or input on issues, ideas, and decisions

INVOLVE
work with the public to understand the issues and problems and include in identifying options for moving forward

COLLABORATE
partner with the public, seeking advice and innovations that become embedded as much as possible in decisions made

EMPOWER
final decisions are made by the public and are one of the players implementing them

Who is impacted?

Consumers	• Apply and enroll in ACA-compliant health plan, often with financial assistance • Manage enrollment
Insurance agents/ brokers	• Direct access to assist clients in enrolling through the Marketplace with financial assistance • Assist clients with managing their policy and solving problems as they arise
Assisters at community partner organizations	• Guide consumers through the Marketplace application using the consumer's account • Assist with outreach efforts to drive enrollment through the Marketplace • Assist with solving issues as they arise
Insurance carriers	• Submit plan data through a Marketplace portal, which also allows testing the system to ensure data is shown properly • Share files back and forth with the Marketplace to keep policies/enrollments up to date

Identified opportunities for questions for community and partner input

Planning	• Insight into experience using the current federal platform and desired requirements.
Execution	• 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 Controlling	• Feedback on communications mechanisms, timeline, and messaging. • Feedback on communications drafts.
Close out	• Feedback on implementation, first OE on new platform.

Community engagement

Feedback

Communications

- Ensure outgoing communications are in multiple languages
- Language about split coverage households (OHP/Marketplace or Medicare/Marketplace)
- Language about resolving and understanding billing situations
- Marketplace education is paramount
- More information in materials

Access

- Assistance for people who have mobility or transportation issues
- Ensure materials are available in video and audio formats for people whose primary language format is oral
- Consider indigenous languages
- Rural community members do not have internet or access to technology
- Events and communications to help people transition to the SBM
- Plain language throughout system

Integrations

- Built-in referral system to assisters when someone is losing Medicaid
- Short messages are helpful
- Ensure interpreters are available to minimize wait times
- Include agent or assister on record in notices sent to clients
- Integrating with Medicaid to ensure smooth transitions

Key messages

- Partner and consumer training on how to use the new system

- Reminders to seek help from an expert

- Expert help is free

- Start SBM transition messaging soon after OE for plan year 2026 ends and communicate often about the change

Inclusive data

Feedback

| Collecting Data	Interface	Reporting and Use of Data
• Eliminate deadnaming enrollees • Ensure questions are gender-friendly • Collect robust demographic information • Ensure there is a phone number for people to complete surveys/application • Ask about coverage other household members have who are not enrolling in coverage to help us understand why some household members are not enrolling	• Ensure the tool is available natively in multiple languages (Russian and Vietnamese mentioned specifically) • Explain why data is being collected and how it will be used • Ensure mobile-friendly interface • Agent dashboard: once consumer picks an agent, the insurance agent has to approve and then they can see all notices	• Work together to analyze data that is gathered to further health equity and access to coverage • Share the data that is collected so it's more widely accessible

Co-creation and power sharing
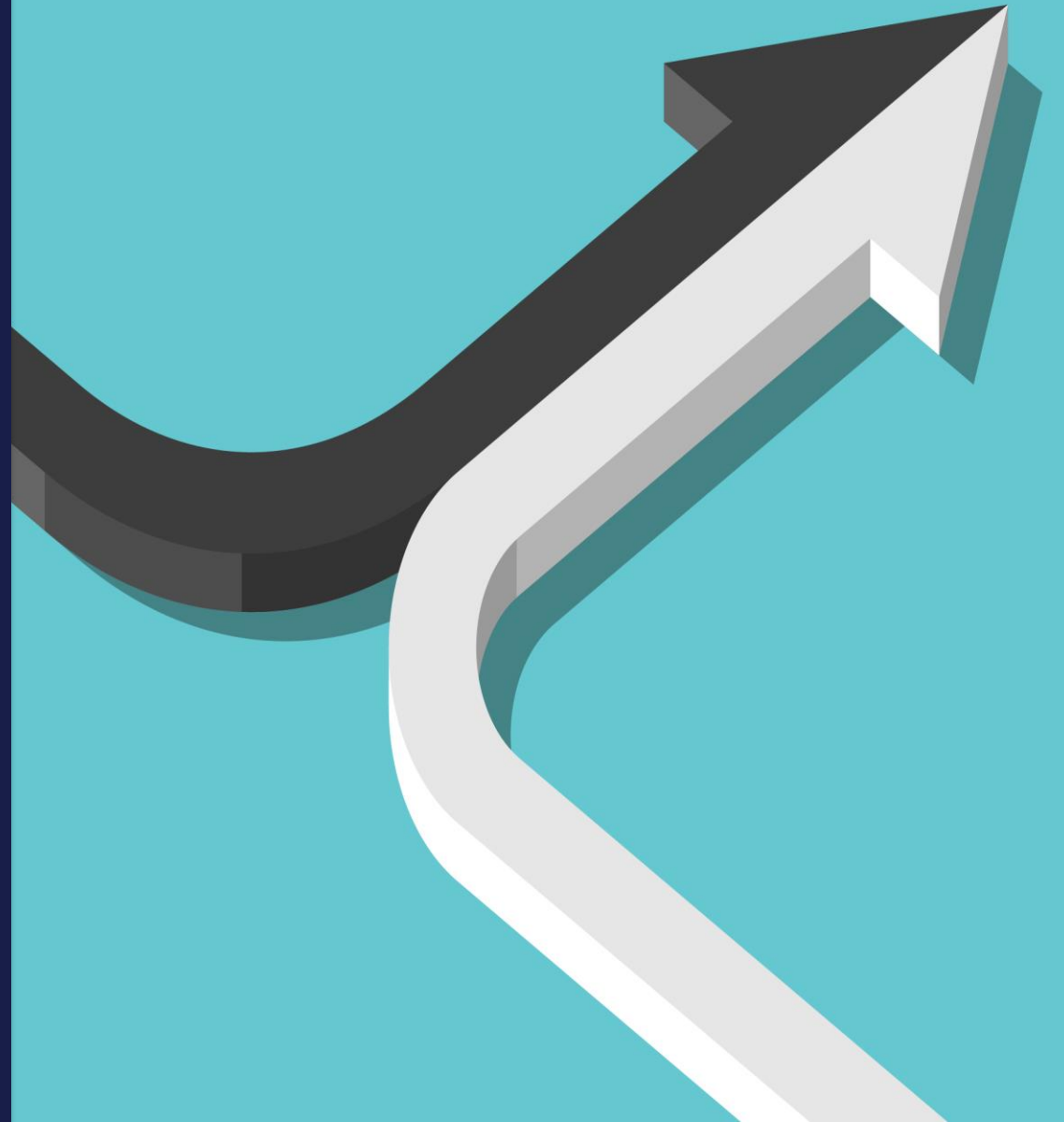
Feedback

Co-creation	Power Sharing	Enhancements
• Engage a larger variety of people representing a wider range of Oregon • In-person engagement is important to gather feedback from a wider variety of people	• Make sure Tribes and rural communities are represented • Work directly with people who work with Tribes and rural communities as representatives • Ensure call center respects relationship with agent of record (AOR)	• SEP for people experiencing hardships – i.e. immediate need for getting medical care • Pull reports for clients to see where they are at in the enrollment journey • Ensure call center actions/notes are viewable to assigned assisters/insurance agents • Build consent for assistance form into the system • Once AOR is assigned, limit who (client only) can change or remove the AOR

Anything else?

Lingering questions

- Will auto-renewal continue for people transitioning from HealthCare.gov to SBM for plan year 2027?
  - If people do not take action, will they auto renew or lose coverage?
- Will partners be able to backdate cancellations in the system?
- Is the state talking about at what point can people enroll in OHP Bridge but be enrolled through a private carrier versus a CCO?

Next steps

Log feedback → Aggregate feedback with feedback from internal Equity Tabletop Discussion → Finalize draft of SBM Project Health Impact Equity Analysis

Stay up-to-date

- Questions?
  - Email us at marketplace.sbmproject@odhsoha.Oregon.gov
- Sign up for email updates
  - orhim.info/SBMupdates
- Keep an eye on our project website
  - orhim.info/SBMtransition

Future Listening Sessions

- Quarterly (Jan., April, July, Oct.) through Jan. 2027
- Last week of the month

Assisters
Last Weds. of the month
2-3:30 p.m.
orhim.info/SBMLS-Assisters

Agents/Brokers
Last Thurs. of the month
2-3:30 p.m.
orhim.info/SBMLS-Agents

Carriers
Last Thurs. of the month
3:30-4:30 p.m.
orhim.info/SBMLS-Carriers