

Keeping your employees covered: Marketplace Transition Project

Summary

The COVID-19 Public Health Emergency will be ending. The unwinding of temporary pandemic rules means OHP member eligibility will be redetermined between April 2023 through Jan. 2024. Throughout this time, the Oregon Health Plan (OHP) will send notices to Oregonians who are enrolled in medical benefits. If information is requested, OHP enrollees will have 90 days to submit information to redetermine their eligibility for OHP.

People who are no longer eligible for OHP benefits will receive a 60-day closure notice. It is estimated that around 300,000 Oregonians may no longer qualify for OHP benefits and will need to act elsewhere to enroll in health coverage. The Marketplace will contact clients to advise of coverage options through the Marketplace.



Unwinding resources

- **Marketplace Transition Project information:**
 - English: orhim.info/Transition
 - Spanish: orhim.info/transicion
- **Marketplace Transition Help Center:**
 - Phone: 833-699-6850 (toll-free, all relay calls accepted), Monday through Friday from 7 a.m. to 6 p.m. PST
 - Email: transition.marketplace@odhsoha.oregon.gov
- **Oregon's Public Health Emergency (PHE) Unwinding site:** bit.ly/ORpheunwinding
- **PHE Unwinding Feedback Team:** Share your feedback, concerns, issues, comments, etc. by sending an email to feedback@odhsoha.oregon.gov

Marketplace resources



- **Oregon's Find Local Help tool:**
 - English: OregonHealthCare.gov/GetHelp
 - Spanish: orhim.info/encuentraayuda
 - Request to be added to the Find Local Help tool or update your information at orhim.info/FLHupdates
- **Oregon's window shopping (plan comparison) tool:**
 - English: OregonHealthCare.gov/WindowShop
 - Spanish: orhim.info/ObtengaCobertura
- **Resources, including ordering publications and materials:**
 - English: orhim.info/resources
 - Spanish: orhim.info/Recursos

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833-699-6850 (toll-free, all relay calls accepted)
transition.marketplace@odhsoha.oregon.gov



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HEALTHCARE.gov

Frequently asked **questions**

1. What is the Marketplace?

The Oregon Health Insurance Marketplace (OHIM) offers health coverage through its federal partner, HealthCare.gov. Health coverage available through the Marketplace are private insurance plans offered by Bridgespan, Kaiser Permanente, Moda, PacificSource, Providence, and Regence. The Marketplace is the only place where enrollees may access financial help. Premium tax credits reduce the monthly premium to have health coverage and cost-sharing reductions lower the out-of-pocket costs associated with health care. You and your employees can preview your savings and plan options at OregonHealthCare.gov/WindowShop.

2. How does the unwinding impact my company?

If someone in your organization is losing OHP benefits, now is the time to help them find new coverage to ensure they do not have a gap in their health coverage and can take advantage of the important health benefits and services available by having health coverage.

3. Can I add an employee to my company's health plan?

Yes, and this may be the best and simplest way for your employee to maintain coverage. OHP will be redetermining eligibility and ending coverage for some members over a 14-month period, starting in April 2023. If your employee is determined no longer eligible for OHP benefits, the employee will receive notification indicating when their OHP benefits are ending. You will have a window of time to add your employee to coverage because loss of OHP benefits is a qualifying life event which triggers a special enrollment period. That allows eligible employees to request enrollment in your company's health plan within 60 days of the OHP benefits closure date.

4. Do my employees have other options for health coverage?

Your employees could choose to shop through the Oregon Health Insurance Marketplace instead, but they won't qualify for financial assistance if the cost of your plan is considered affordable under federal standards. If the plan you offer is considered unaffordable, employees could potentially qualify for help paying for Marketplace coverage through HealthCare.gov. You or your employees can find out if the coverage you offer is considered affordable at orhim.info/ESItool.

5. I don't offer health insurance to my employees but have wanted to and might now want to set up a plan for my workers. What do I do?

In our current competitive workforce environment, now is a great time to offer additional benefits for your employees, including health coverage. If your company has 50 or fewer employees, you can start at the Oregon Health Insurance Marketplace, which offers small businesses lower-cost plans and options to save money while providing plan choices to employees. You can also find a certified insurance agent/broker who can help you complete an application and pick a plan. Find out more about the Oregon Health Insurance Marketplace for employers at orhim.info/employers.

If you have more than 50 employees, an insurance agent/broker can help you establish a plan to meet your needs and the needs of your employees. You can make sure you're finding a licensed insurance agent/broker at OregonHealthCare.gov/GetHelp.

Visit orhim.info/Transition for answers to more frequently asked questions.