
Oregon Health Authority Oregon Health Plan

Presented to
Joint Ways & Means Subcommittee on Human Services
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OREGON HEALTH AUTHORITY
Health Systems Division

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Governor Kotek's Budget Priorities

Build more housing
and reduce
homelessness

Improve access to
mental health and
addiction services

Ensure Oregon's children
are better served by
early literacy, child care,
and K-12 investments

Oregon Health Plan's Role in this Budget

- Implementing first-in-the-nation service expansion to address health-related social needs
- Maintaining coverage gains achieved during COVID-19 by investing in continuous coverage and coverage expansion
- Expanding eligibility for Oregon Health Plan (OHP) to new populations

OHP and Health Equity

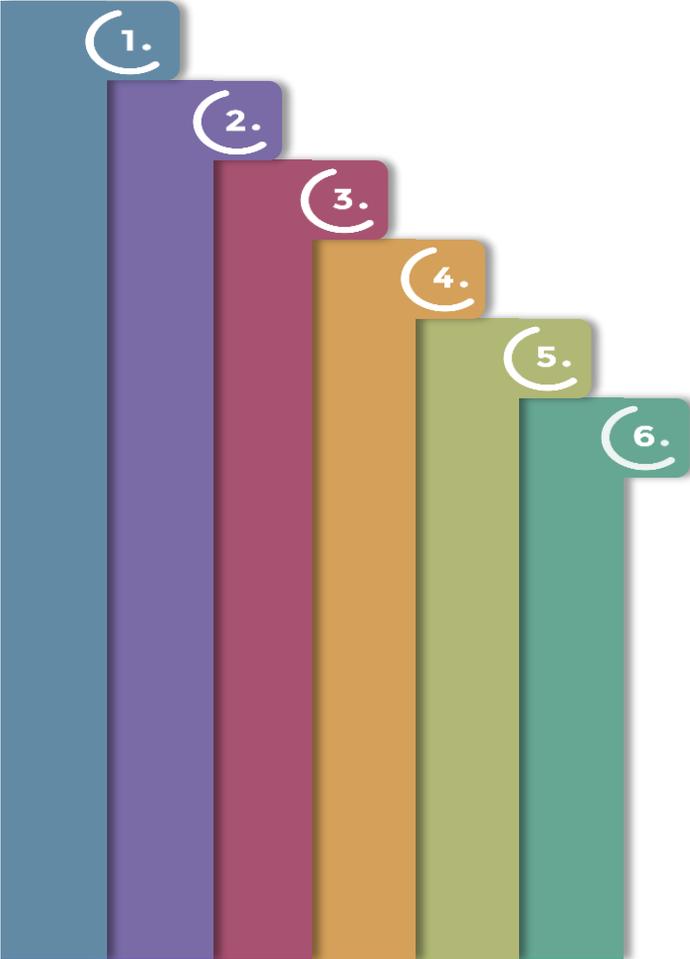
Community Partnerships

OHP's Work

Successes

Initiatives

Proposed Budget



The Triple Aim

- 1 Better health**
- 2 Better care**
- 3 Lower costs**

OHA's Strategic Goal

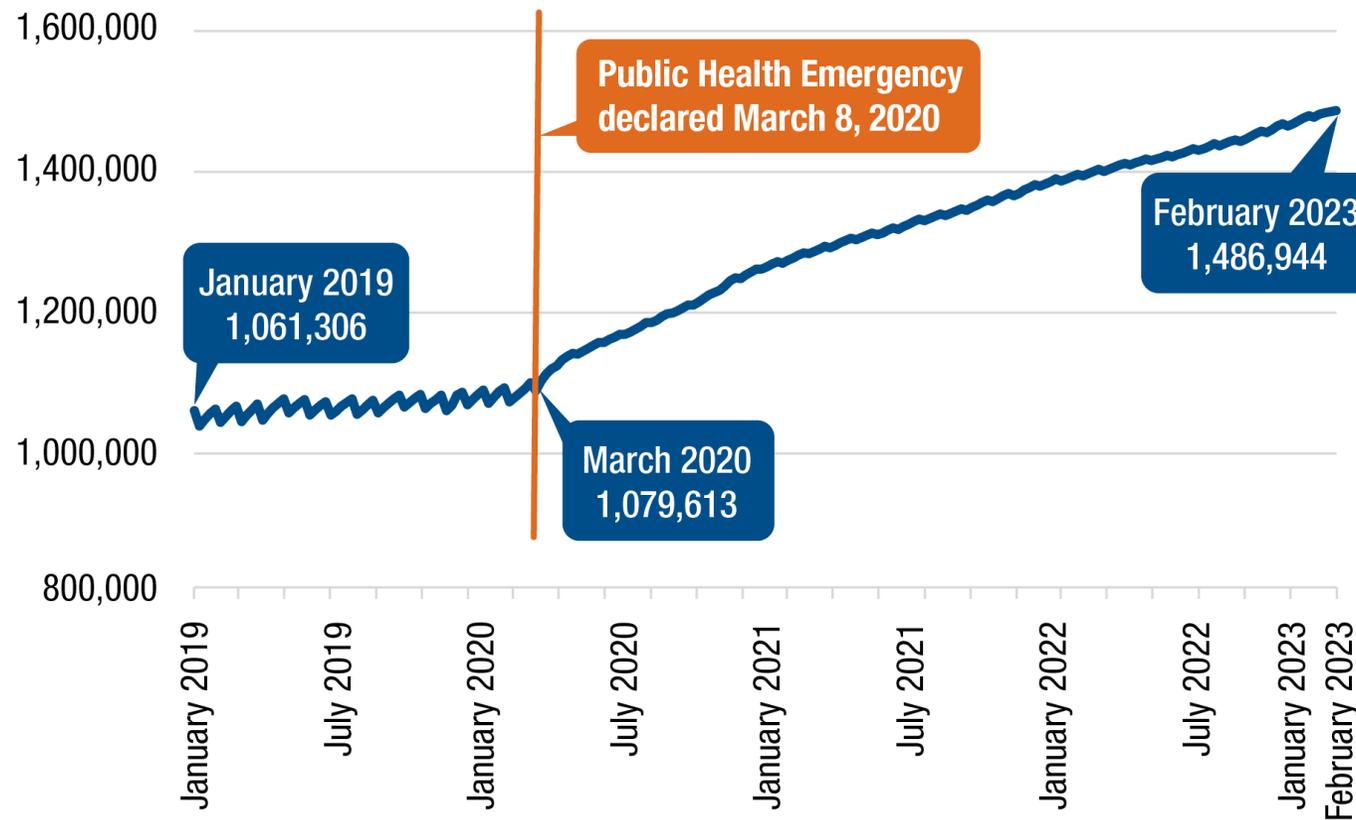
**Eliminate health inequities
in Oregon by 2030**

OHP Approach to Health Equity

- Ensure continuity of coverage
- Increase access and quality of care, especially in communities most impacted by health inequity
- Address root causes of health inequities through the social determinants of health and underlying systemic racism and bias
- Redress power imbalances and partnering with communities in decision making

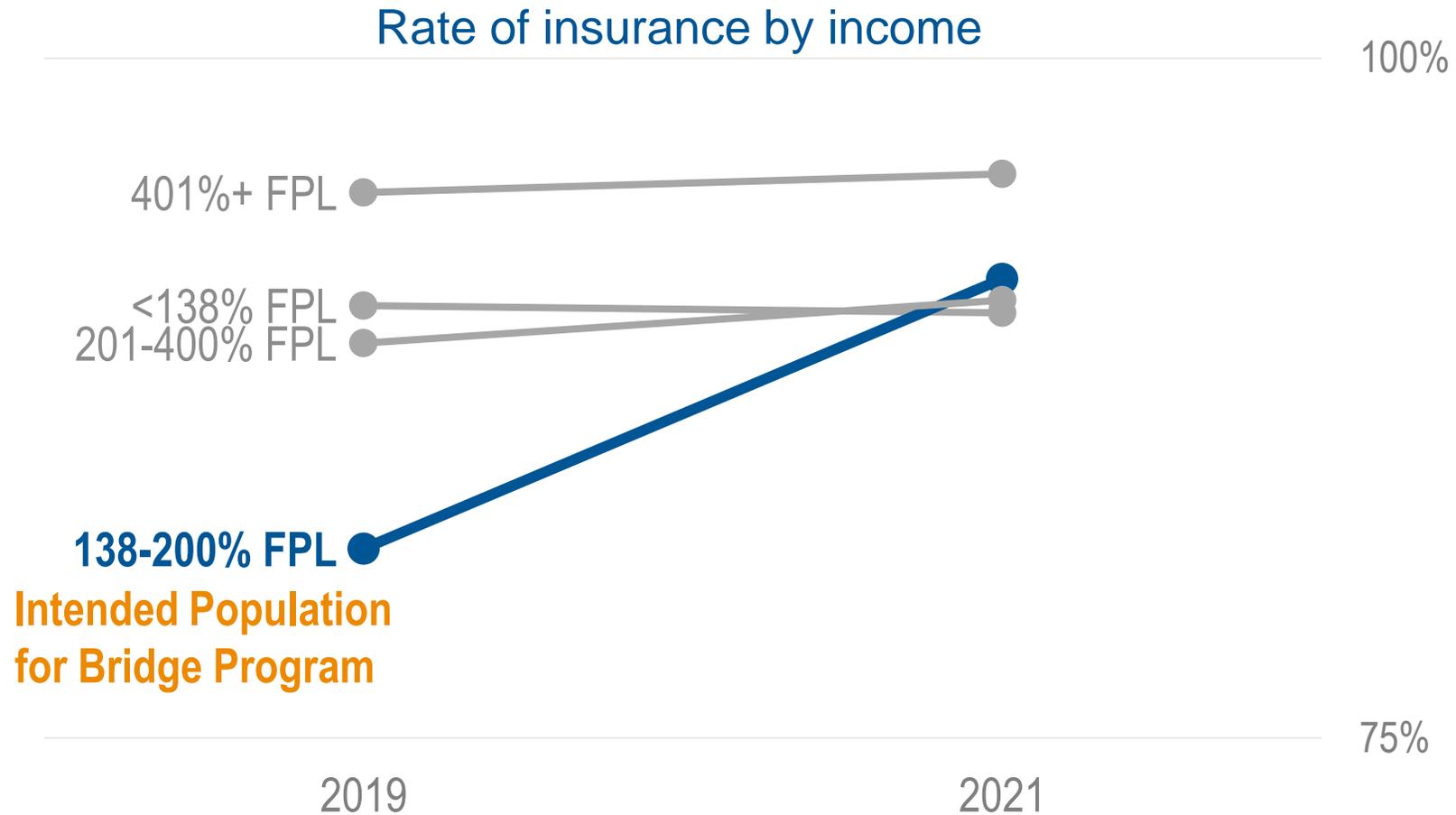
OHP Coverage Gains During the Pandemic

- During the Public Health Emergency, federal rules kept every Medicaid member enrolled
- Oregon Health Plan (OHP) membership is now **1.48 million** people



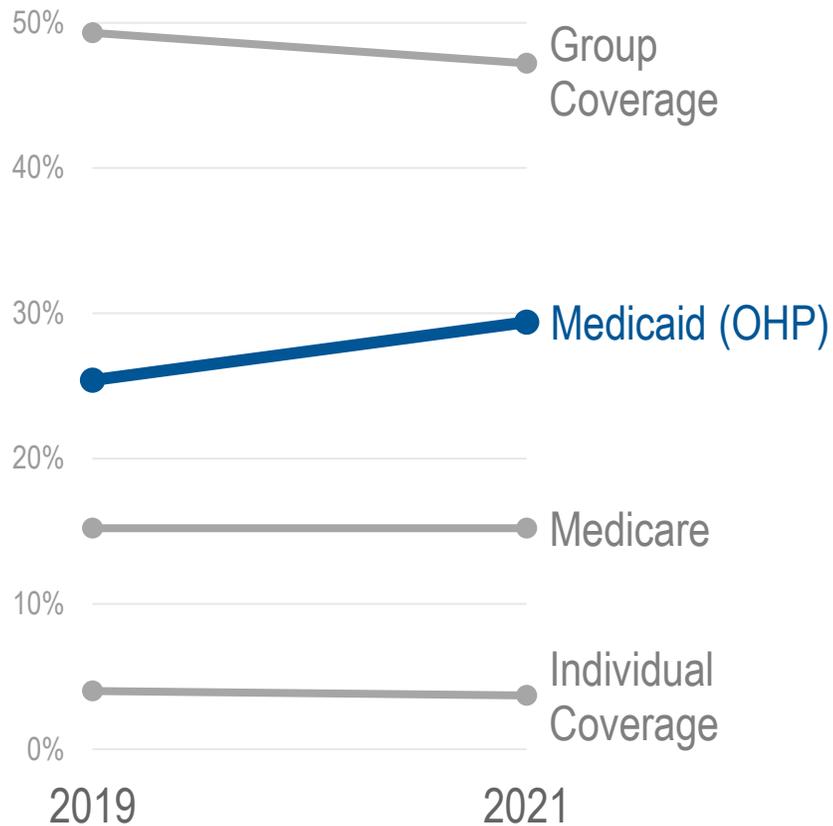
Who Benefited from these Coverage Gains?

- The largest coverage gains were among low-income adults not already covered by Medicaid



What was the Overall Coverage Gain?

Population by coverage type

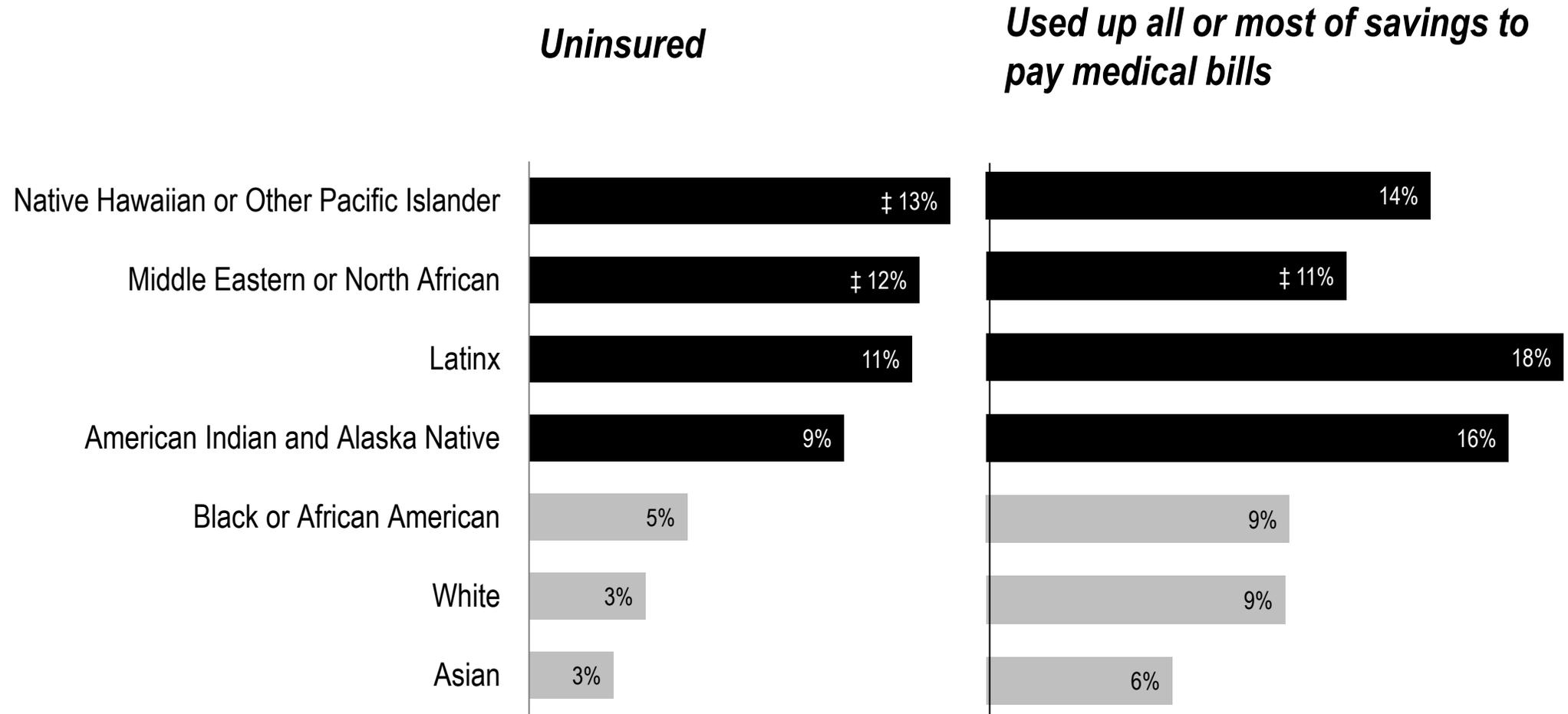


- Continuous Medicaid coverage during the pandemic increased overall health coverage in Oregon
- All people covered in Oregon:
 - 2019: **94.0%**
 - 2021: **95.4%**
- Black/African American people covered in Oregon
 - 2019: **92%**
 - 2021: **95%**

Identifying Equity Opportunities

- A critical component to eliminating health inequities is ensuring meaningful access to services for everyone in Oregon
- Identifying access disparities requires complete and quality data on:
 - Race, Ethnicity, Language and Disability (REALD)
 - Sexual Orientation or Gender Identify (SOGI)
- OHP is a key source of REALD and SOGI data in Oregon

Coverage and Cost Inequities



Note: All data shown are calculated using rarest race methodology. ‡ May be statistically unreliable due to small numbers; interpret with caution.

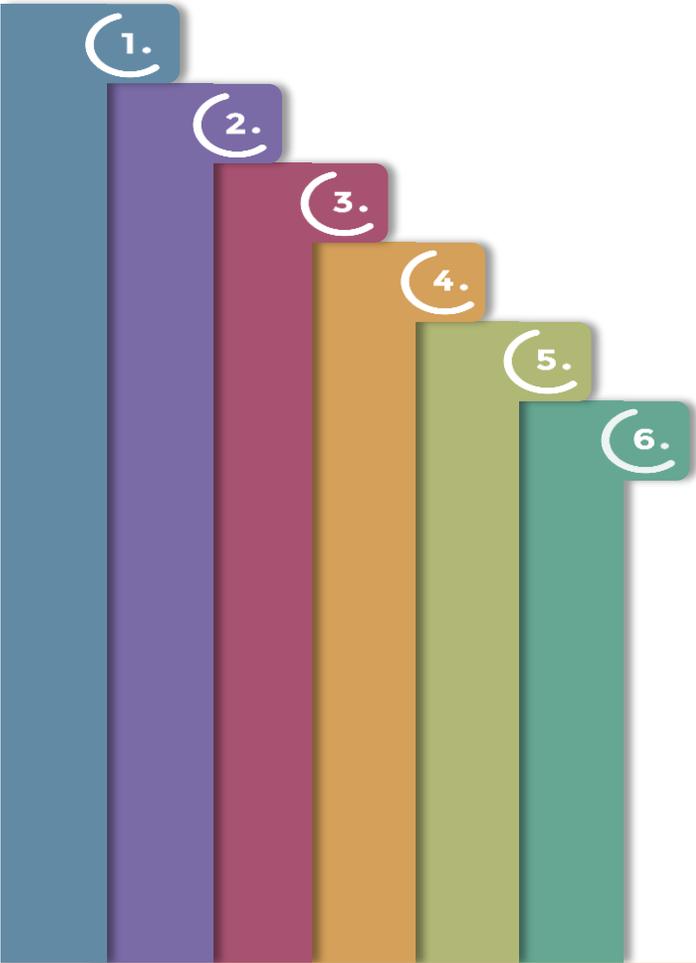
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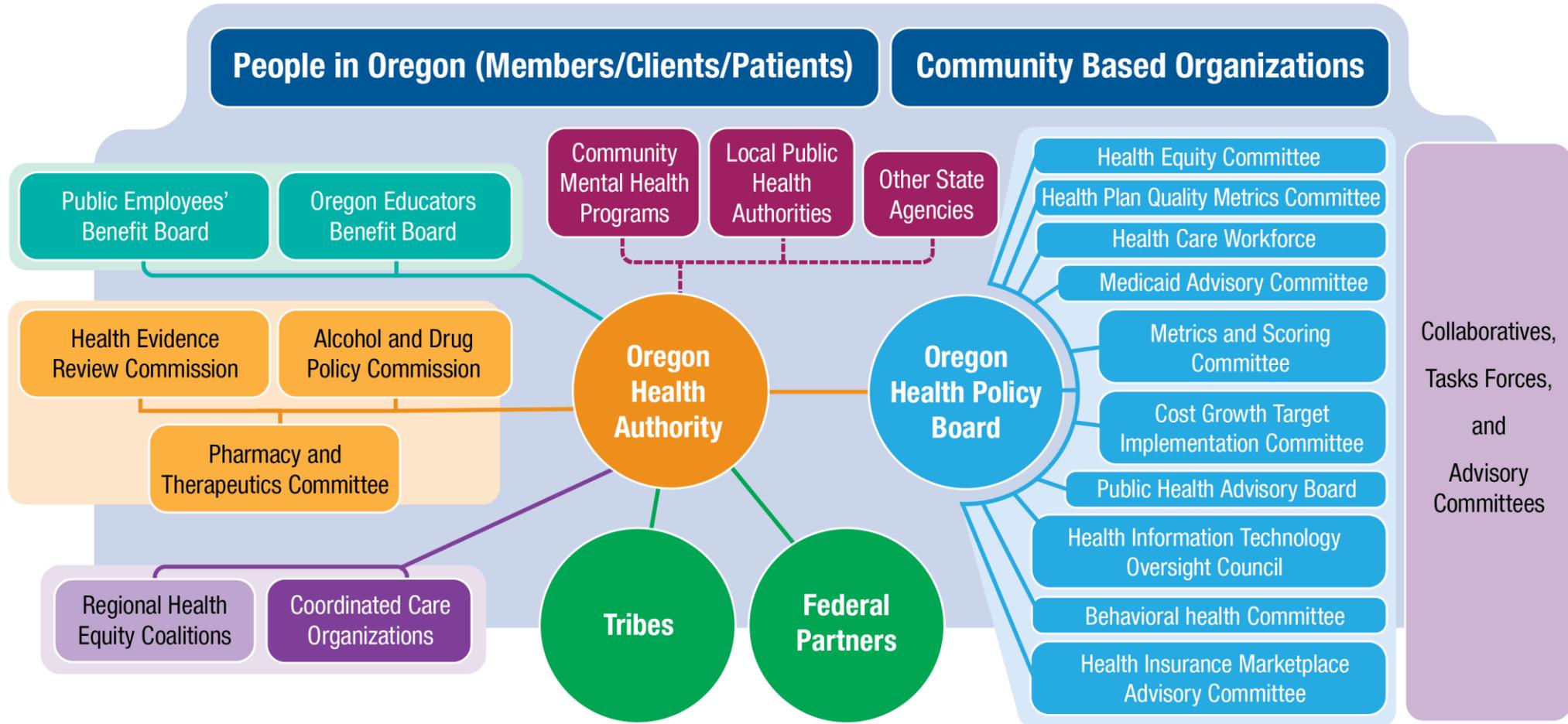
Proposed Budget



Meaningful Community Engagement

- Centering equity: Authentic relationships with communities historically underserved is a priority
- Oregon Health Plan staff work with other areas of OHA to build on successful engagement strategies

OHA Partnerships



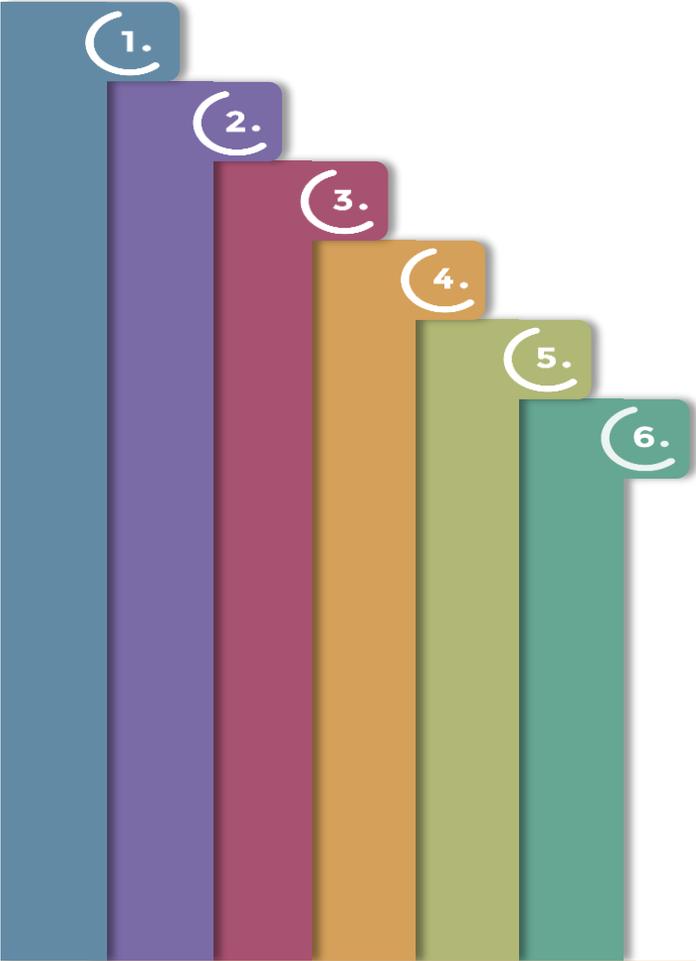
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Oregon Health Plan



OHP provides:

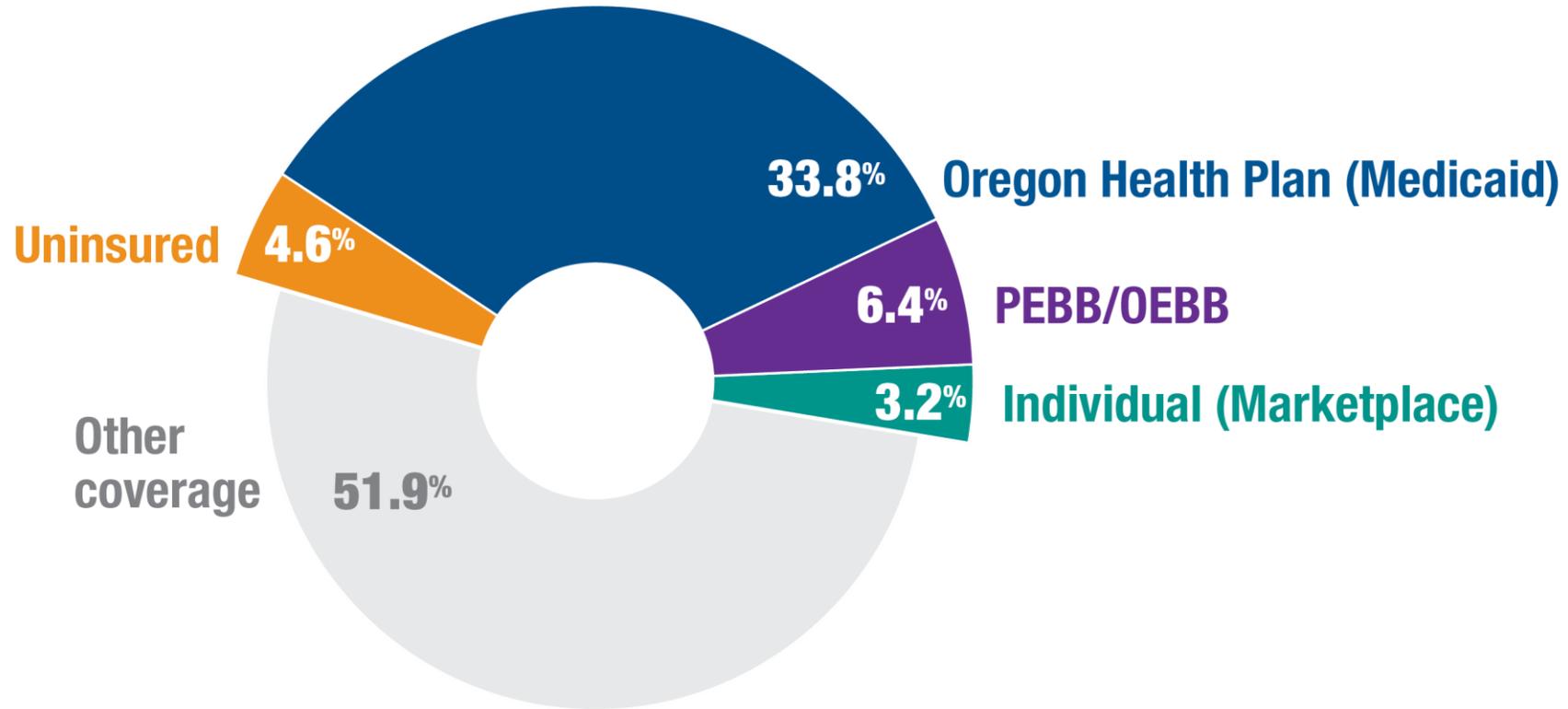
- Physical, oral, and behavioral health care
- **1.48 million people** in Oregon (as of February 2023)

OHP includes:

- Medicaid
- Children's Health Insurance Program (CHIP)
- Healthier Oregon (state funds only)
- Reproductive Health Equity Act (RHEA)
- Other related services

Oregon Health Plan Coverage

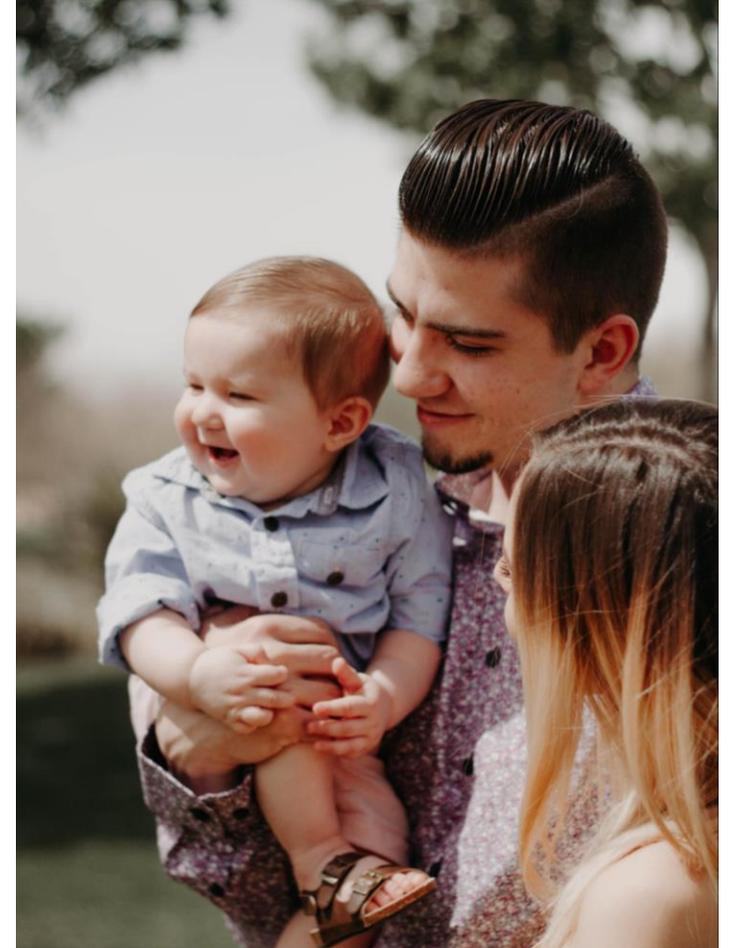
- OHP provides health coverage for **one in three** people in Oregon



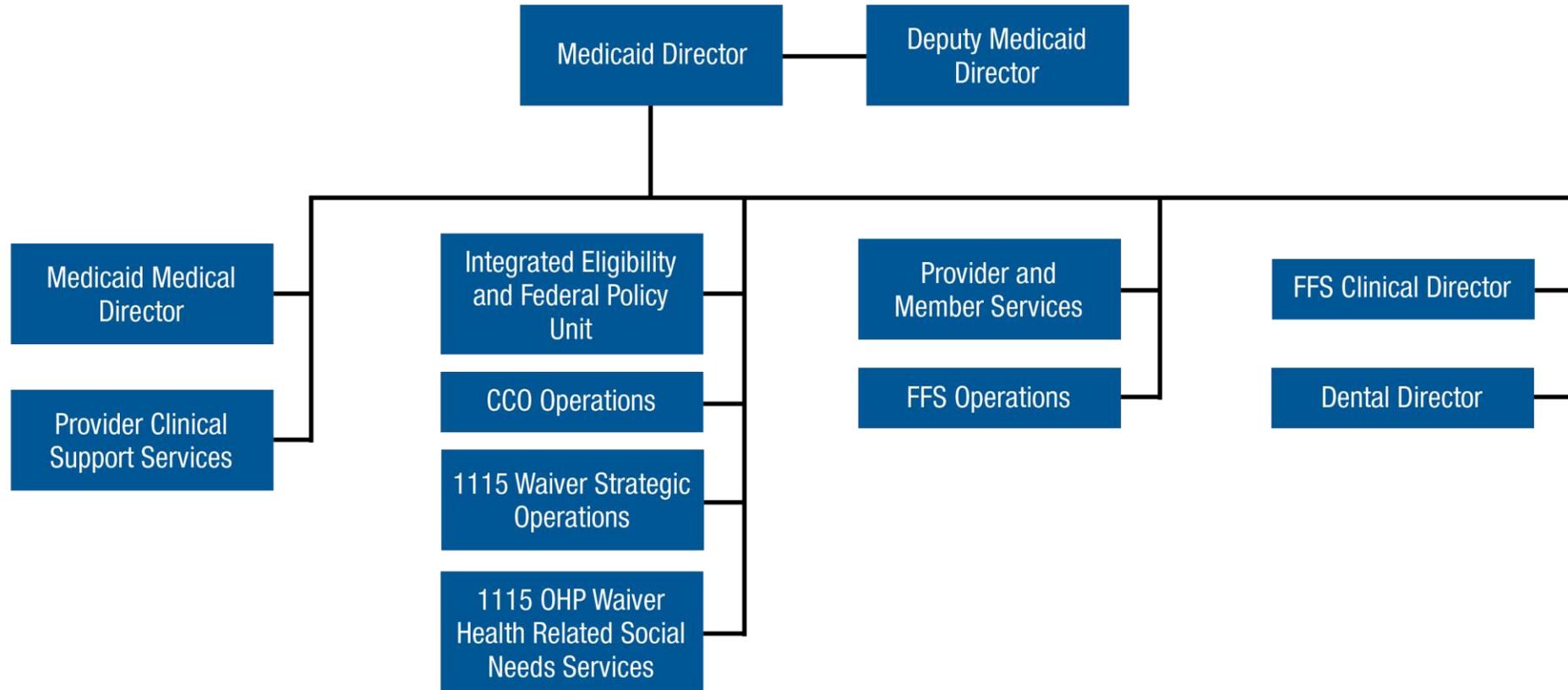
1.48 million Oregon Health Plan members

36% are children

185 total languages spoken among OHP members



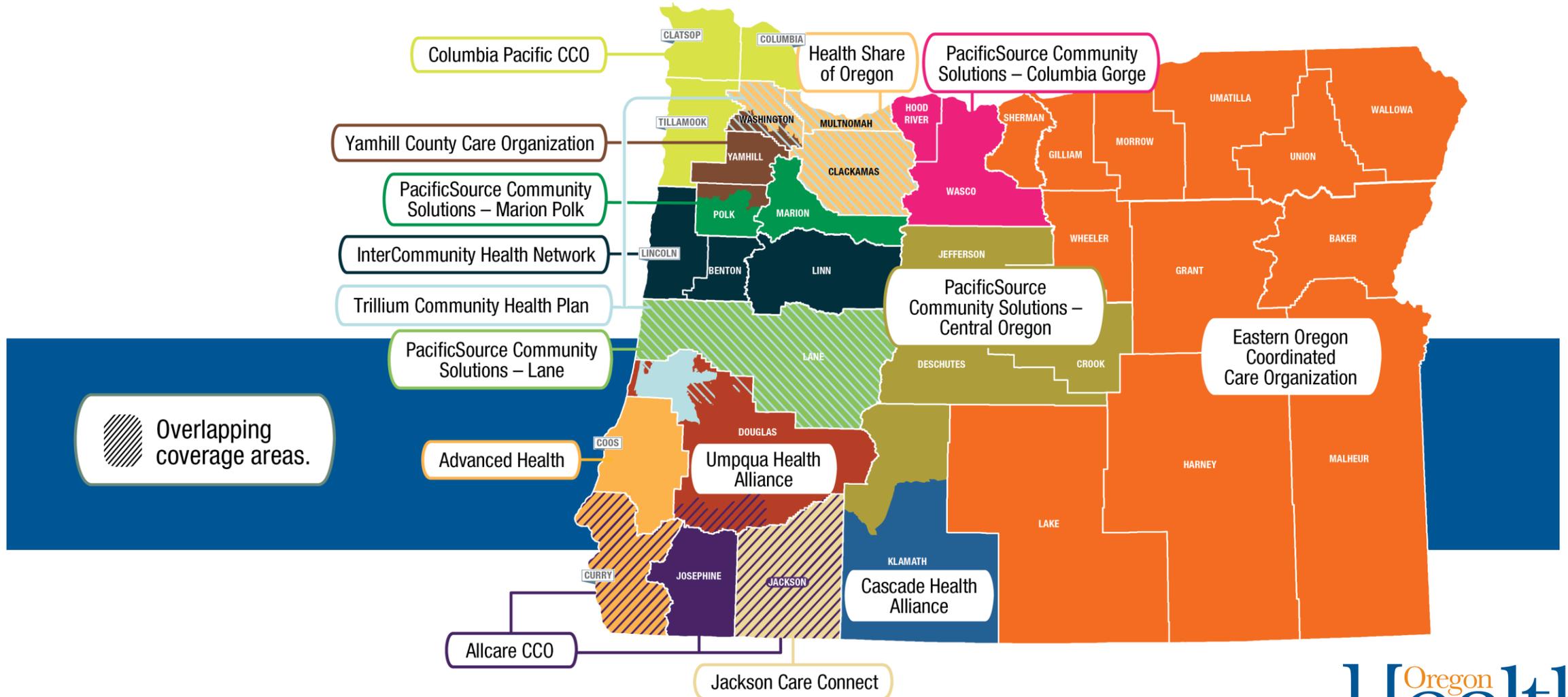
Health Systems Division: Medicaid Administration



Structure of OHP Medicaid Delivery System

- Coordinated Care Organizations (CCOs)
 - **91%** members are enrolled with CCOs
 - Manage financial risk and coordinate health care access for their members
- Statewide Fee for Service (FFS)
 - **9%** members have an “open card” arrangement
 - OHA pays providers directly for services to members
 - Exists outside the CCO structure due to federally mandated exemptions

16 CCOs in Oregon



Statewide Fee For Service (FFS)

- 120,315 FFS enrollees
 - 36% of FFS enrollees are children
- Covered populations:
 - American Indian/Alaska Native
 - Youth involved in child welfare
 - Youth served by Oregon Youth Authority
 - People who are Dual Eligible (Medicaid & Medicare)
 - Newly eligible pregnant people in 3rd trimester
 - Medically fragile children
 - Individuals with third party insurance

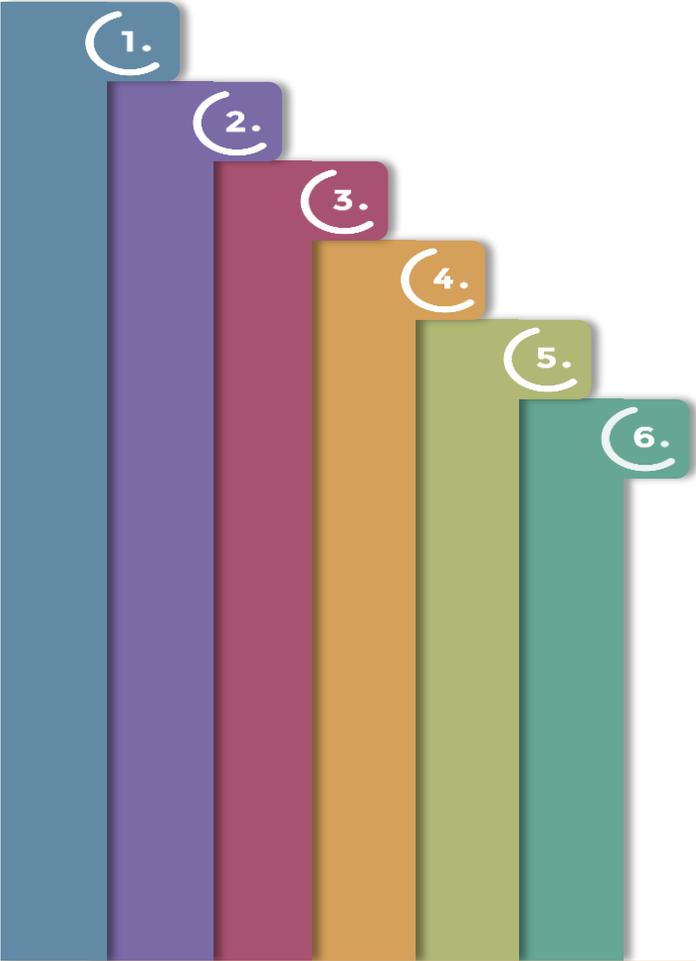
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Healthier Oregon Program

- Originally “Cover all Kids”, then updated to “Cover all People”
 - On the recommendation of a community workgroup, the name was changed to “Healthier Oregon”
- Opened access to full OHP coverage for people living in Oregon who:
 - Meet income and other criteria
 - Do not qualify for full OHP benefits because of their immigration status, and
 - Are 19-25 years old or 55 years and older
- Over 14,000 adults and 7,000 children/youth are enrolled in OHP via HOP (as of November 2022)

Healthier Oregon & Health Equity

- 80%** of members identified a preferred language other than English
- 69** languages spoken among HOP members
- 40** race or ethnicity groups
- 14%** of members self-identified as having one or more disabilities

OHA supports 24 organizations to supply **culturally and linguistically responsive** outreach, enrollment and navigation to help members and those who wish to enroll in OHP through Healthier Oregon

Coverage Expansions

- Healthier Oregon Program
- Compact of Free Association and Veteran (COFA/VA) Dental benefits
- 12-month coverage eligibility OHP postpartum benefits
- Early and Periodic Screening, Diagnostic and Treatment (EPSDT) coverage
- 1115 Waiver continuous enrollment approval

Service Expansions

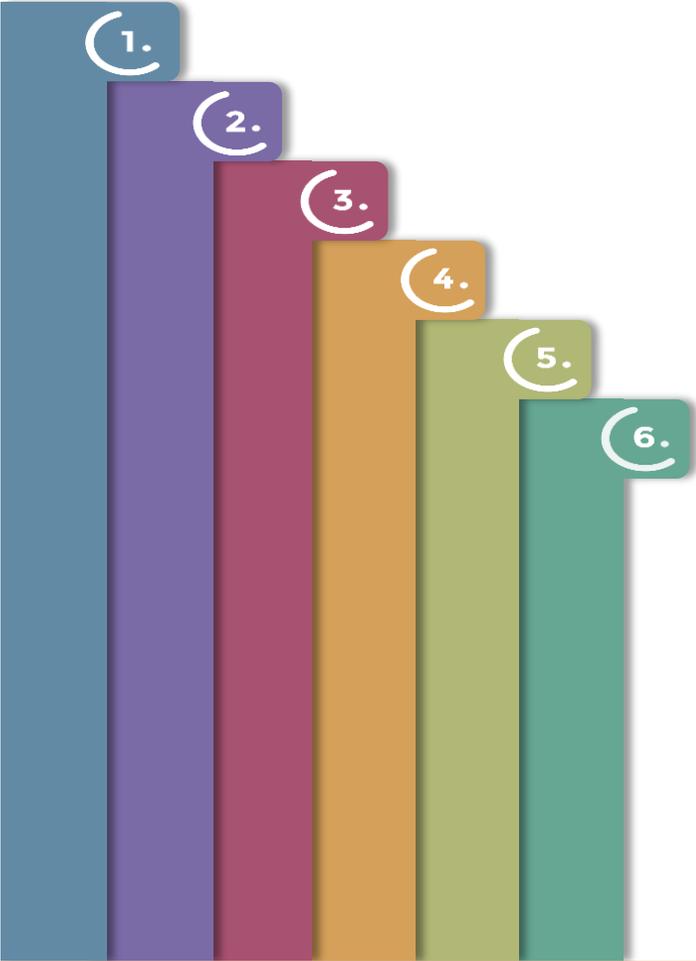
- Substance Use Disorder 1115 Demonstration Waiver
- Expansion of telehealth/telephone services for physical and behavioral health
- 1115 Waiver Health Related Social Needs and Youth with Special Health Care Needs services approval
- Expansion of Citizenship Waived Medical (CWM) benefits
- Mobile Health Units Pilot
- Air conditioner deployment for extreme heats events

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Key Initiatives for 2023-2025 Biennium

- 1115 Waiver Implementation
- Public Health Emergency Unwinding/Eligibility Redetermination
- Healthier Oregon Program eligibility expansion
- Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Program
- Mobile Health Pilot
- Long term care employee support
- Fee-for-Service Dental rate increases

Current

Preserved Coverage & Improved Access to Services

Future

People who meet eligibility requirements but don't qualify as they are non-citizens

4 – Healthier Oregon Program

Youth with special health needs

5b – 1115 Waiver Coverage Expansion

Members with coverage

1 – The Unwind

Members who will continue to be eligible

Members who will no longer be eligible after the Unwind

2 – Temporary Medicaid Expansion

3 – Bridge Program

6a – Basic Health Program

Children 0-18 years currently receiving benefits

5a – 1115 Waiver Continuous Eligibility

Members needing health related supports

5c – 1115 Waiver Health Related Social Needs

People who currently go to Healthcare.gov because they don't qualify for Medicaid

6 – Oregon Marketplace

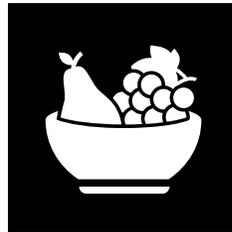


Overarching Waiver Goal: Advance Health Equity

To achieve this, there are four actionable sub-goals:



Ensuring people can maintain their health coverage



Addressing health related social needs



Ensuring smart, flexible spending for health-related social needs and health equity



Creating a more equitable, culturally- and linguistically-responsive health care system

What Does the Waiver Mean for OHP Members?

- Currently, there are limited supports for:
 - Housing
 - Nutrition
 - Climate-related needs

FFS and CCO members who are facing certain life transitions will now have access to services for Health Related Social Needs

New Opportunities: Coverage

- Broader access to Early and Periodic Screening, Diagnostics and Treatment (EPSDT) benefits
- Kids stay enrolled until their 6th birthday
- People ages 6+ stay enrolled for two years (instead of one)
- Coverage for Youth with Special Health Care Needs ages 19 – 26 with income up to 300% of FPL, and EPSDT benefits
- Still under negotiation:
 - Limited benefit for some transitioning out of OSH and criminal justice settings
 - Tribal requests

New Opportunities: Health Related Social Needs

Oregon will provide benefits to:

- People who are going through transitions:
 - Youth with Special Health Care Needs, if they have a need for services
 - Youth who are child welfare involved, including leaving foster care at age 18
 - People experiencing or at risk of homelessness
 - People being released from jail/corrections, psychiatric and substance use disorder facilities (including Oregon State Hospital)
 - Older adults who have both Medicaid and Medicare health insurance
- People at risk of extreme weather events due to climate change

New Opportunities: Health Related Social Needs

Housing

- Housing-focused navigation and/or case manager
- Pre-tenancy and tenancy support services (such as support with rental applications or moving, or eviction prevention)
- Home modifications (such as ramps or handrails)
- Rental assistance or temporary housing for up to 6 months (such as rent payments and rent deposits)
- Utility assistance for up to 6 months when provided rental assistance

Nutrition

- Community-based food resources (such as application support for SNAP and WIC)
- Nutrition and cooking education
- Fruit and vegetable prescriptions (such as VeggieRx) for up to 6 months, and healthy food boxes/meals
- Medically tailored meal delivery

Expanded Opportunity: Health Related Social Needs

Climate

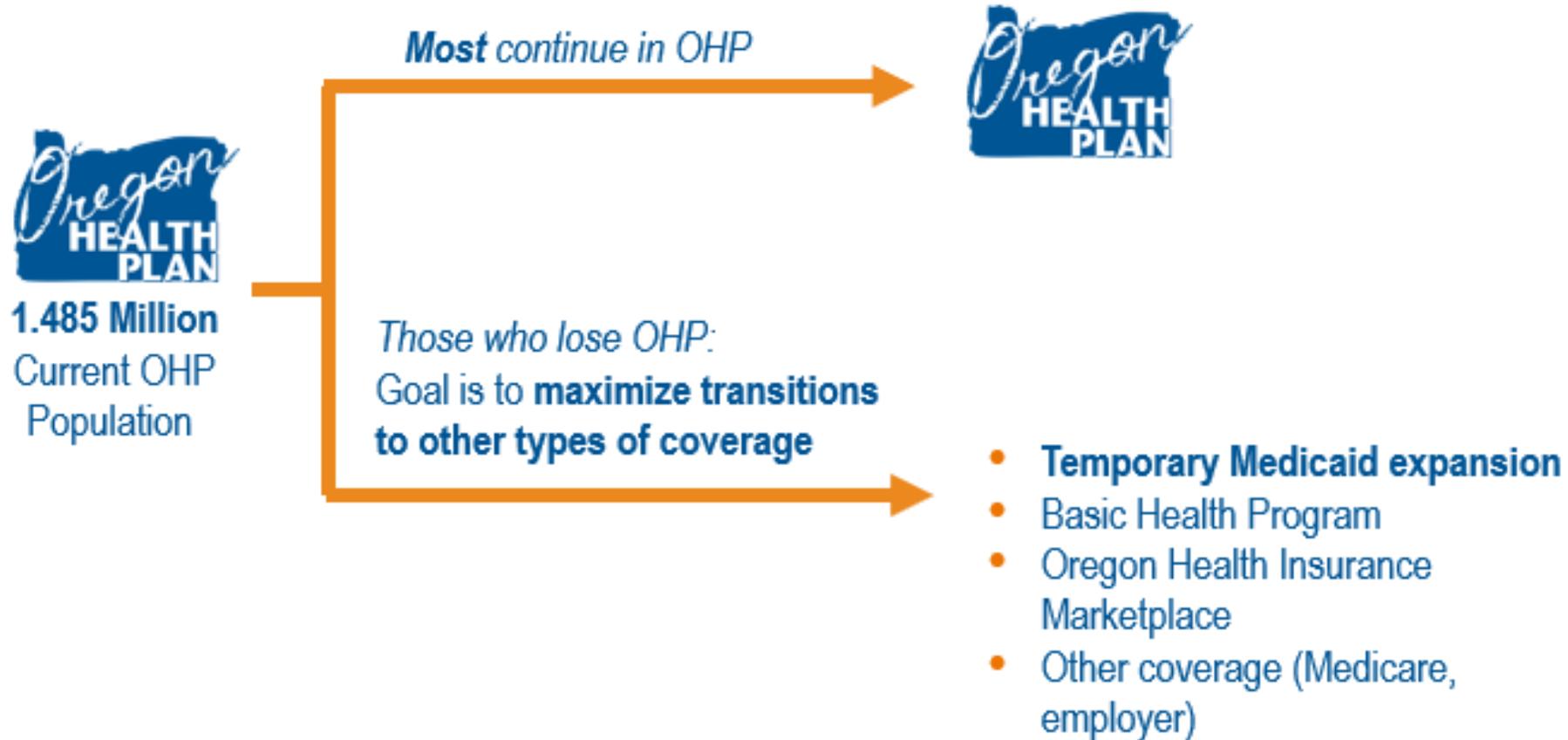
- Payment for devices that maintain healthy temperatures and clean air, including air conditioners, heaters, air filters
- Generators to operate medical devices, such as ventilators, when power outages happen

These benefits will be available to individuals with chronic or complex health issues for whom extreme climate events, as declared by the Federal government or Governor of Oregon, would pose additional health risks

Public Health Emergency Unwinding

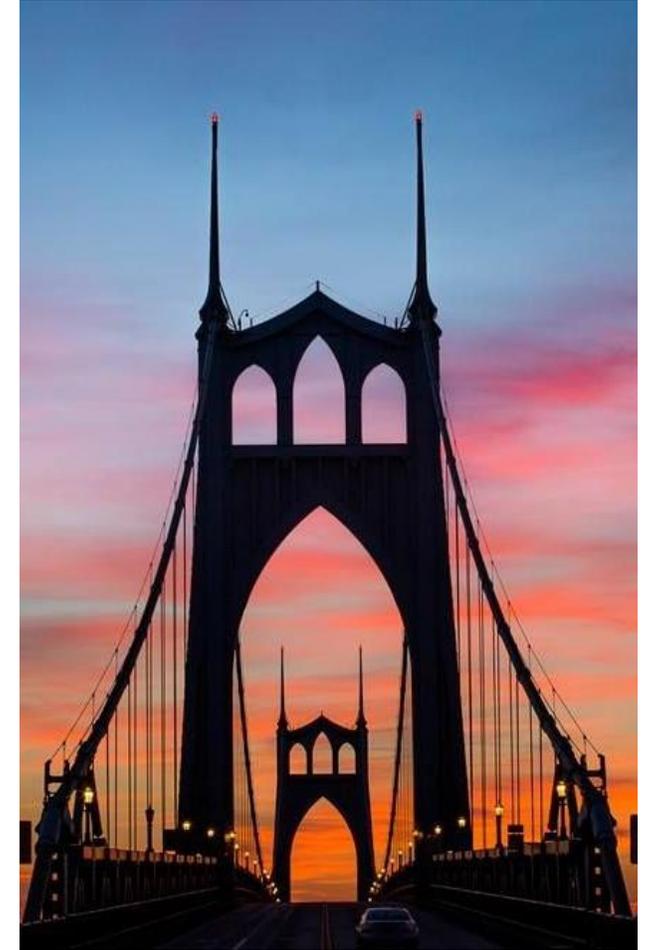
- **Redeterminations** will establish whether members remain eligible for OHP, including the temporary Medicaid program that expands coverage for those who earn up to 200% of the federal poverty level (FPL)
- Oregon will have 14 months to complete the redeterminations process for all OHP members
- Oregon's goal is to preserve coverage for as many individuals as possible
- Some flexibilities established during the Public Health Emergency will continue

Automatic OHP Coverage Ends when PHE Ends



Maintaining Coverage Gains – “Bridge Program”

- More than 300,000 people gained insurance coverage from policies put in place during the COVID-19 Public Health Emergency
- OHA will work to implement a **temporary Medicaid expansion** so people 138-200% FPL do not lose coverage
- The temporary Medicaid expansion will maintain coverage for this population **until the Basic Health Program launches**



Fully Open Healthier Oregon Program

- Currently, Healthier Oregon covers only a portion of those potentially covered
 - The program is “closed” to additional enrollees
- State law requires a fully open program by July 2023
- Based on current projections, 55,000 adults could be covered via Healthier Oregon
 - Nearly four-times the number of adults currently covered

Early & Periodic Screening, Diagnostic and Treatment

- Early & Periodic Screening, Diagnostic and Treatment (EPSDT) is a federally required Medicaid benefit for children and youth up to age 21
 - EPSDT is key to ensuring that children and youth receive appropriate preventive, dental, mental health, developmental, and specialty services
- All medically necessary and medically appropriate services for this population must be covered by the state
- Full access to EPSDT benefits became effective on January 1, 2023
 - Operationalized by OHA for FFS members, and by CCOs for their enrolled members

Mobile Response and Stabilization

- Designed to address root causes of health inequities
 - Serves to remove barriers in order to increase access and quality of health care for priority populations and communities of color by bringing care directly into communities
- Program development is guided by a legislatively mandated Mobile Health Advisory Committee
 - Composed of over 50% priority population members
 - Began meeting October 2022
 - Has finished the final draft of the Request for Grant Proposals
- Has a sunset date of January 2027

Essential Workers Healthcare Trust

- Oregon Essential Workforce Health Care Program provides supplemental payments to nursing facilities
 - As approved by the federal Centers for Medicare and Medicaid Services
 - Payments received are to be used to provide health care benefits to employees of long-term care facilities, residential facilities, residential facilities and in-home care agencies
- Funding in the 2023-2025 biennium will:
 - Continue state and federal support to provide health insurance to lower-income health care workers within specific healthcare industries
 - Reduce out-of-pocket costs and increase the standard for total compensation in this sector

Fee for Service Dental Rate Increase

- Fee-for-Service (FFS) dental rates will be brought closer to Coordinated Care Organization (CCO) dental rates. Impacts of this change could be significant, by:
 - Increasing access to dental services for FFS members
 - Making Medicaid more attractive to dental provider networks

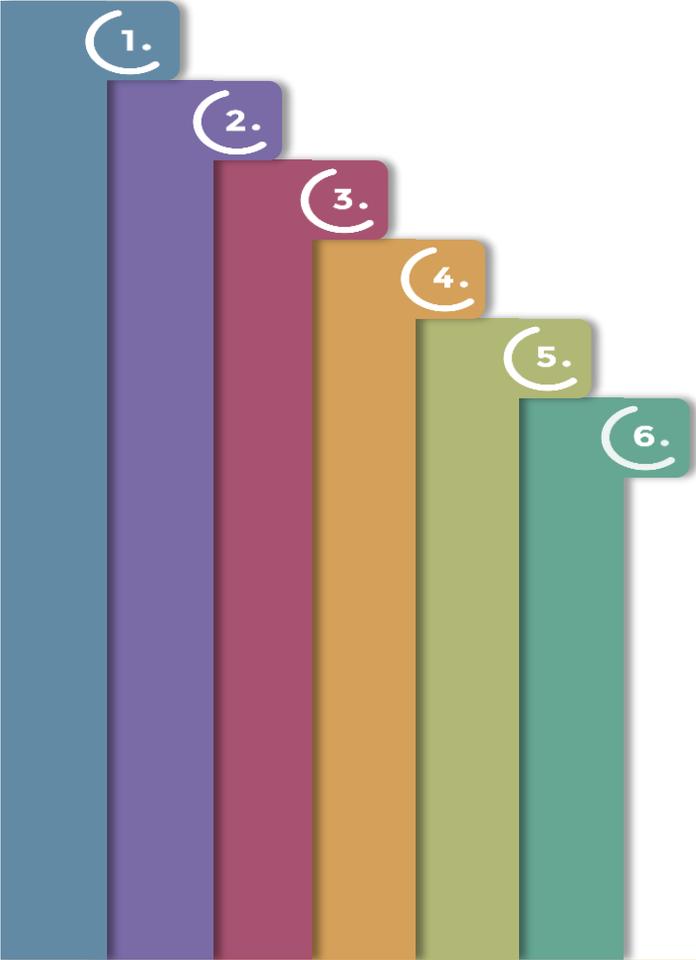
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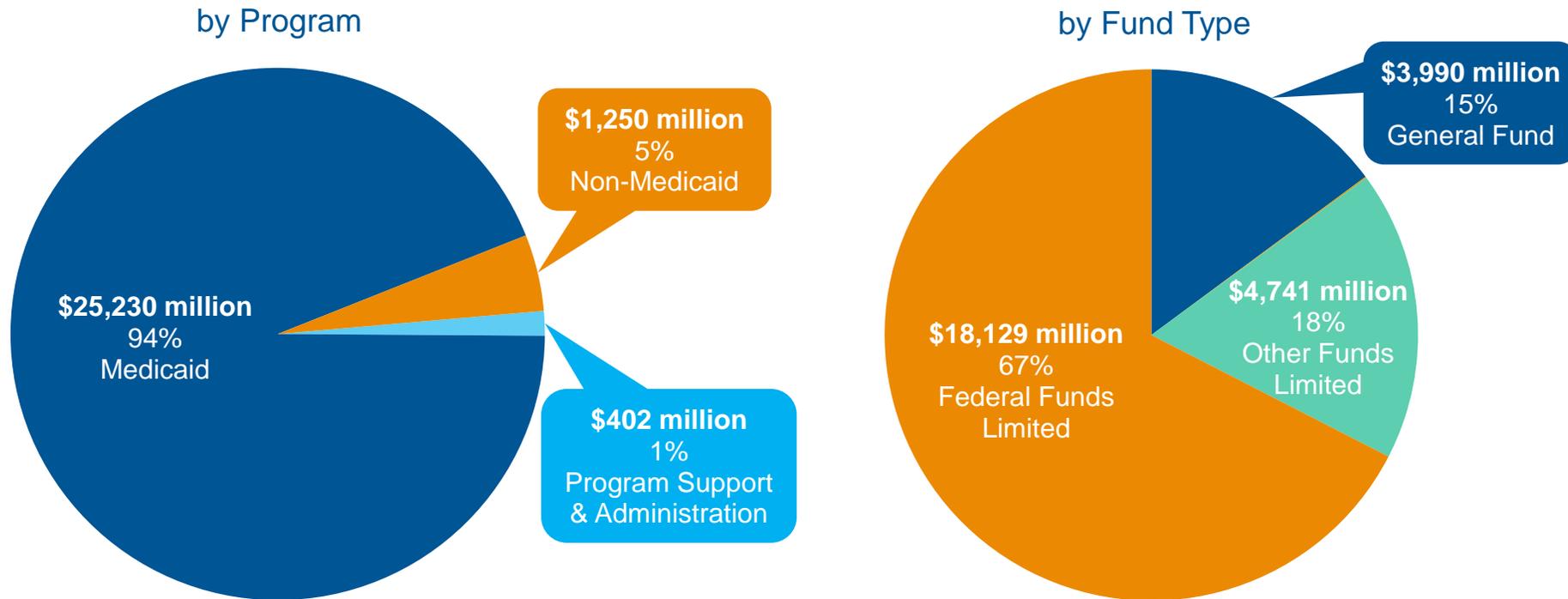
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2023-2025 Governor's Budget

- Health Systems Division: \$26,882 Total Funds, 664 positions (631.54 FTE)



Federal and State Funding Breakdown

Non-ACA Rate Groups (i.e., Children, Disabled Adults, Foster Children, etc.)



ACA Rate Group



Total (Weighted)



Major Budget and Program Changes from 2021-23

- **Coverage** expansions
 - Healthier Oregon Program
 - Compact of Free Association and Veteran (COFA/VA) Dental benefits
 - 12-month coverage eligibility OHP postpartum benefits
 - Early and Periodic Screening, Diagnostic and Treatment (EPSDT) coverage
 - 1115 Waiver continuous enrollment approval
- **Service** expansions
 - Substance Use Disorder 1115 Demonstration Waiver
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Major Budget Drivers and Risks

- COVID-19 Public Health Emergency and anticipated unwinding
- Health inequities and disparities
- Wildfires and climate events
- Housing and behavioral health crises

POP 201: 1115 Medicaid Waiver

- Oregon's 2022-2027 1115 Medicaid Demonstration Waiver aims at eliminating health inequities by 2030 through:
 - Continuous enrollment to increase access to care and to promote better health
 - Coverage of new health-related social needs benefits for certain members facing complex challenges
 - Enhanced coverage of and access to services for youth with complex medical and behavioral health needs
 - Additional federal support for these initiatives through Designated State Health Programs

	General Fund	Total Funds	Positions
POP 201	\$128.8 M	\$978.6 M	131

POP 202: Redeterminations and Basic Health Program

- The end of the Public Health Emergency brings an obligation to conduct an enormous administrative redeterminations process
- It is also a tremendous opportunity to maintain the gains in health care coverage, ensure coverage for even more people in Oregon, improve health outcomes, reduce health inequities, and save money in our health care system
- This policy package will:
 - Fund policy development work to obtain federal approval for a Basic Health Program (BHP)
 - Support policy and actuarial analysis required to inform the build of the BHP
 - Make final determinations of caseloads and service levels
 - Identify and address potential impacts on the Health Insurance Marketplace

	General Fund	Total Funds	Positions
POP 202	\$3.0 M	\$3.0 M	0

POP 414: Early & Periodic Screening, Diagnostic and Treatment (EPSDT)

- EPSDT is a critical federal standard that ensures state Medicaid programs meet the health care needs of children ages 0-21
- This policy package funds the staff and system updates necessary to build an EPSDT program that will:
 - Ensure children and adolescents receive appropriate preventive, dental, mental health, developmental and specialty services that EPSDT entitles them to and are necessary to meet OHA's health equity goals
 - Meet all federal regulations

	General Fund	Total Funds	Positions
POP 414	\$1.1 M	\$2.6 M	9

Thank You

Oregon
Health
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