



Medical Renewal Operations Timeline

This interactive presentation outlines the key dates, activities, processes and worker impacts that will happen as the public health emergency unwinds.



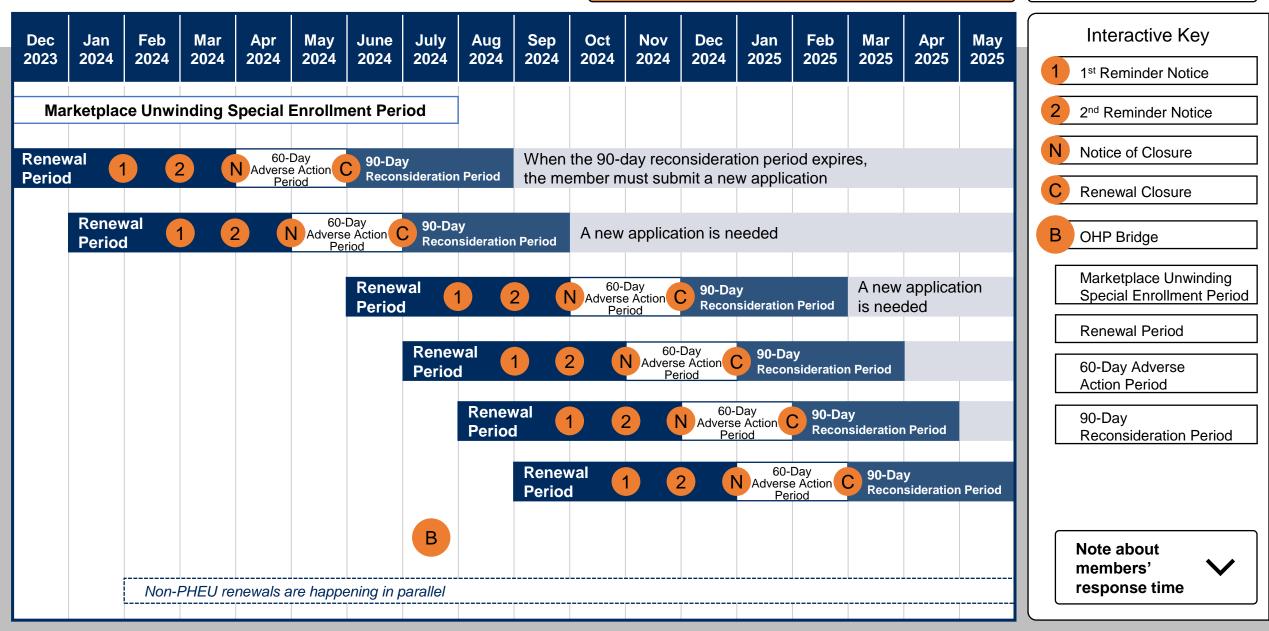


You can interact with this presentation by clicking around. To quickly return to this screen, use the Main Menu button. To close out of any pop-ups, use the Back button.

Full timeline of each time period for renewals starting in each month from December 2023 through May 2025.

This is an interactive timeline. To receive more information on an item, try clicking it.

🏠 Main Menu

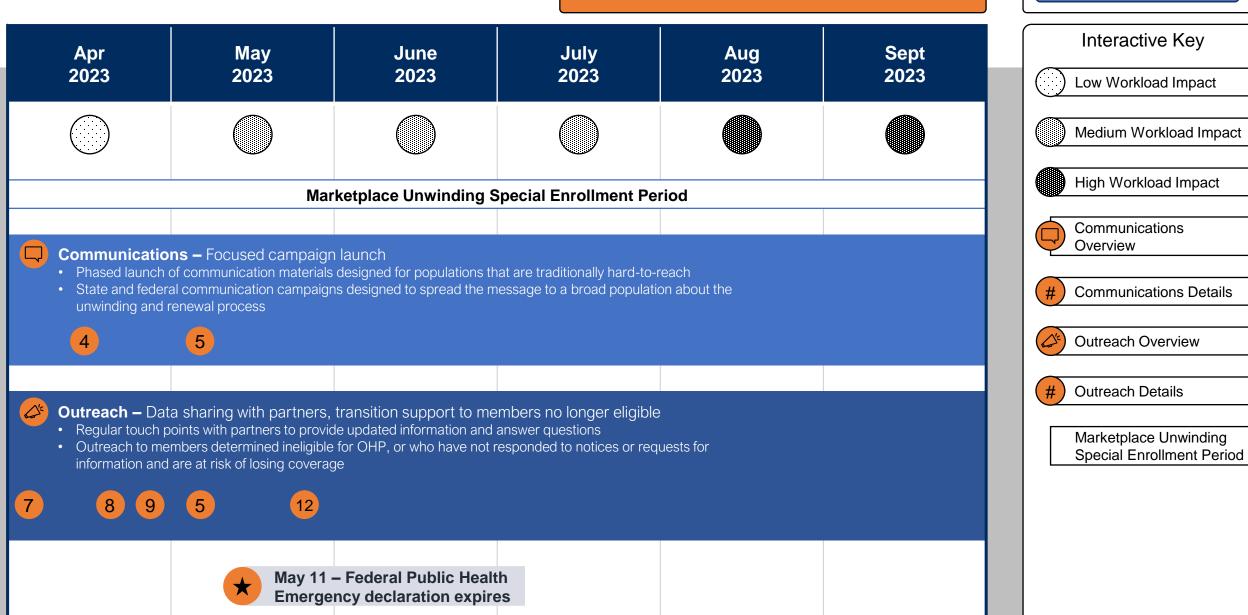


Communications and Outreach Timeline

First six months – Detailed view

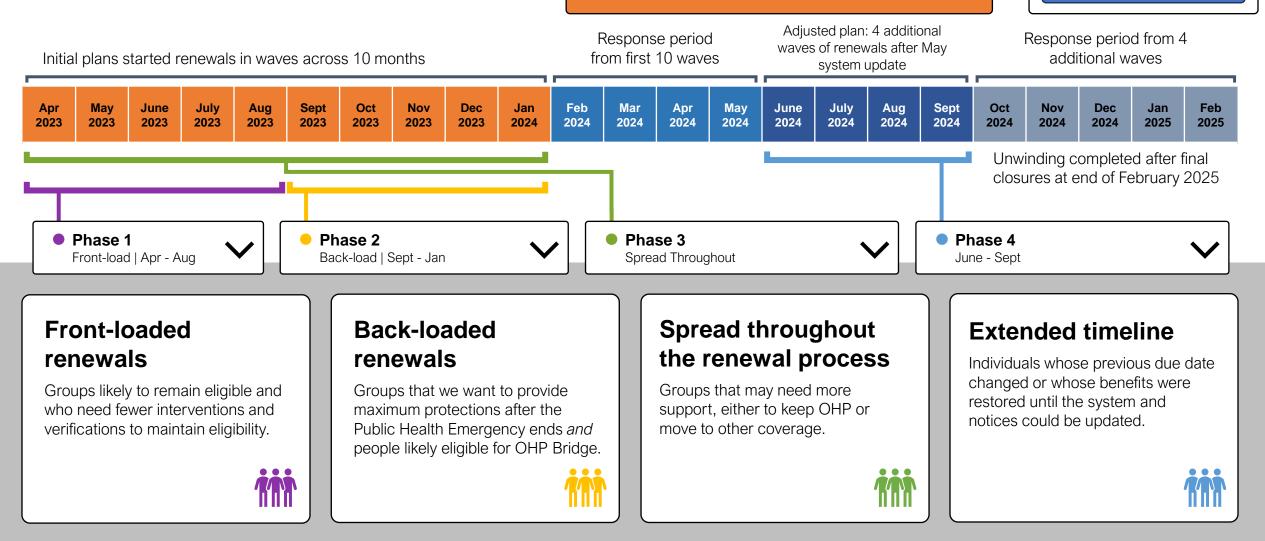
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Practical considerations

- Months with fewer staff, agency, and community resources (November, December, January)
- Marketplace enrollment

Tools to Support the Unwinding and Reporting on Progress







Tools to Support the Unwinding

What we have produced to keep partners informed, supported, and able to escalate problems and issues, as well as how we plan to stay connected.

- Partner and provider toolkits
- Interactive timeline
- Talking points for staff and partners

Reporting on Progress

How we are monitoring and reporting on the work to interested parties, escalating issues and risks, and monitoring for inequities in outcomes.

- Medical Redeterminations Dashboard / Unwinding Dashboard / HB 4035 Dashboard
- Bi-weekly PHE Unwinding Status Report



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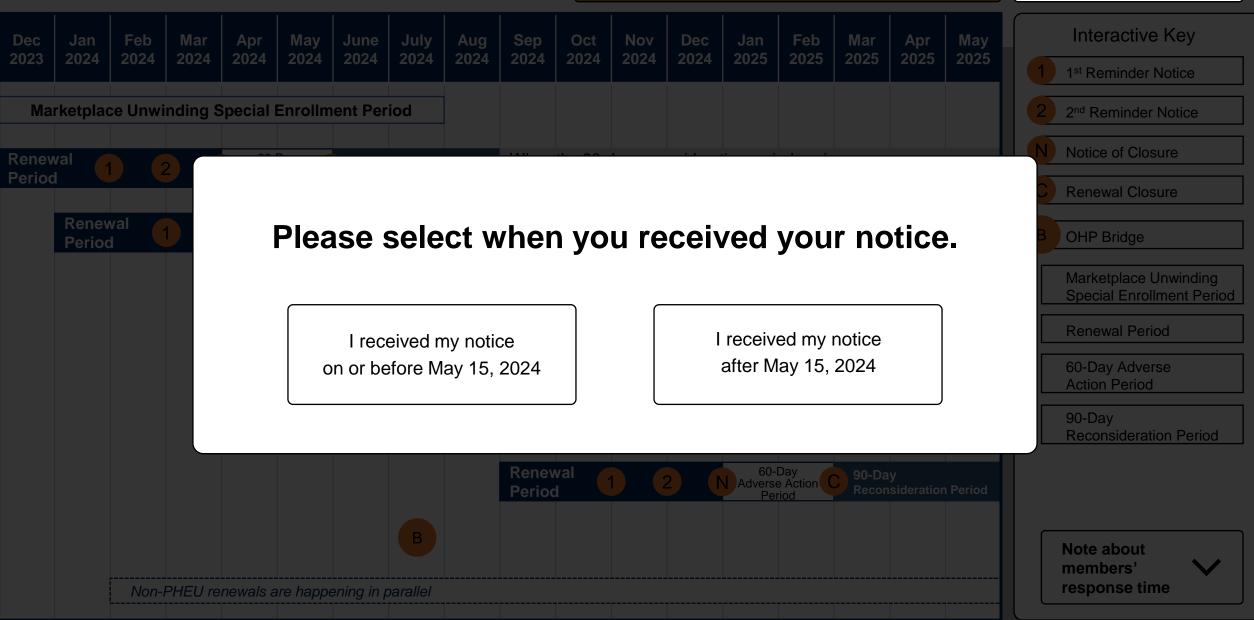
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(x)<Closed Benefits

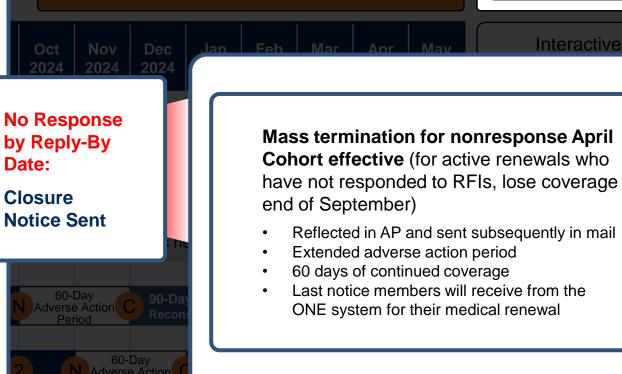
<These medical benefits ended and will not be active after the date listed below. We gave the reason(s) why. Let us know if the reason no longer describes your situation, as it could mean you are still eligible for benefits>

Date:<<Date of Letter>> Your Case ID: <<Case#>>

<<Medical care level>><<(Coverage Type)>>

Name	Age	Program	Reason	Benefit End Date
< <individual Name>></individual 	< <age>></age>	<mm dd="" yy<br="">yy ></mm>	<< Reason >>	< <mm dd="" yyyy="">></mm>
Oregon Administration Rule we used to make this decision: < <oar reference="">></oar>				
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Workload impact:

- Hearings and appeals
- Higher call volumes to explain why someone was closed
- Processing from staff
- Processing mail





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Date: <<Date of Letter>> Your Case ID: <<Case#>>

Medical Benefits Overview

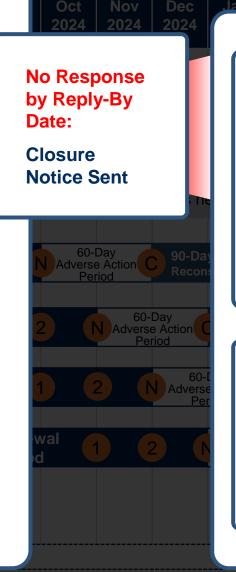
<Medical Benefit Overview for <<Individual Name (Age)>>>>

<These medical benefits are ending and are not active after the date listed below. We gave the reason why below. Let us know if the reason no longer describes this person's situation, as it could mean they could continue to be eligible for benefits.>

Medical Benefit	Decision	Benefit Start Date	Benefit End Date	Reason
< <medical Benefit Package>></medical 	<benefit Closed></benefit 	<mm dd="" yy<br="">yy ></mm>	<mm dd="" yy<br="">yy ></mm>	We sent this person a renewal notice and they did not respond. Their benefits are ending because they did not respond by the due date.

<Continuous Eligibility Period: <MM/DD/YYYY> - <MM/DD/YYYY>> <<TOA Description>><**> (<<Begin Date>> - <<End Date>>) <<Eligibility Summary>>: <<Approval OARs>>

<Oregon Administrative Rules we used to make this decision: <<Closed Benefit OARs>>> To get full details of these rules visit <u>https://secure.sos.state.or.us/oard/</u>

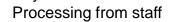


Mass termination for nonresponse April Cohort effective (for active renewals who have not responded to RFIs, lose coverage end of September)

- Reflected in AP and sent subsequently in mail
- Extended adverse action period
- 60 days of continued coverage
- Last notice members will receive from the ONE system for their medical renewal

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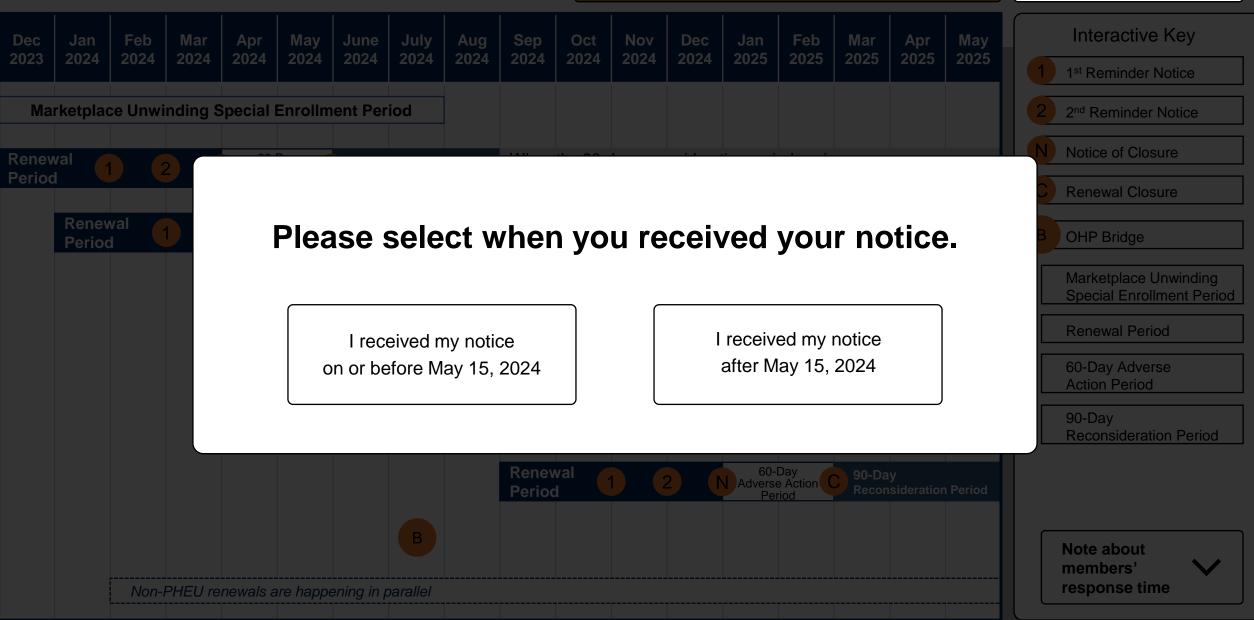
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Interactive Key

Full timeline of each time period for renewals starting in each month from December 2023 through May 2025.

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Date:<<Date of Letter>> Your Case ID: <<Case#>> **Activities No Response** Closure notice with effective date of at least 60 by Reply-By days in the future Date: · Member profile information will be sent to Closure Marketplace **Notice Sent** Marketplace will receive a report with who has been referred • Only people potentially eligible for marketplace get referred · Marketplace will send household their own notice to tell them to go to healthcare.gov to create a new application to apply for the Marketplace PH Tech call center outreach (still finalizing details on this process)

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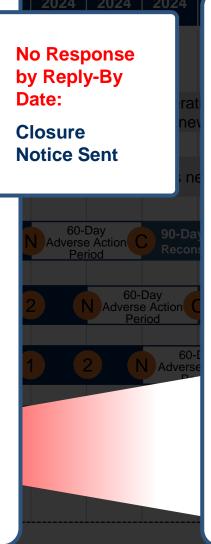
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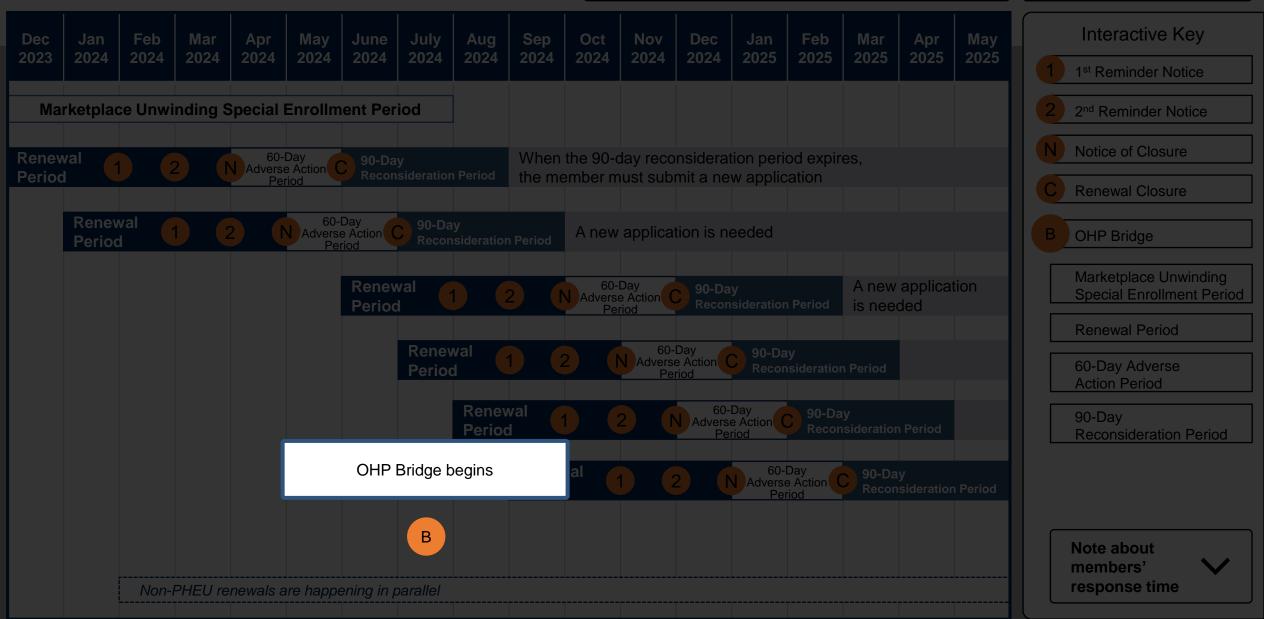


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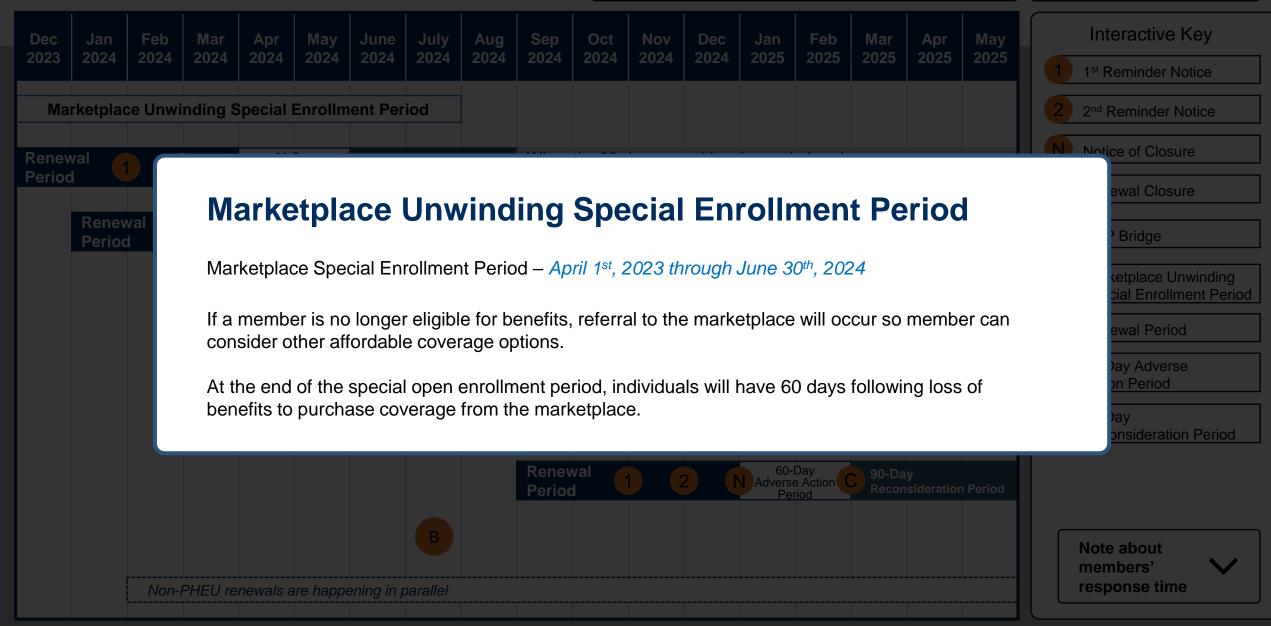
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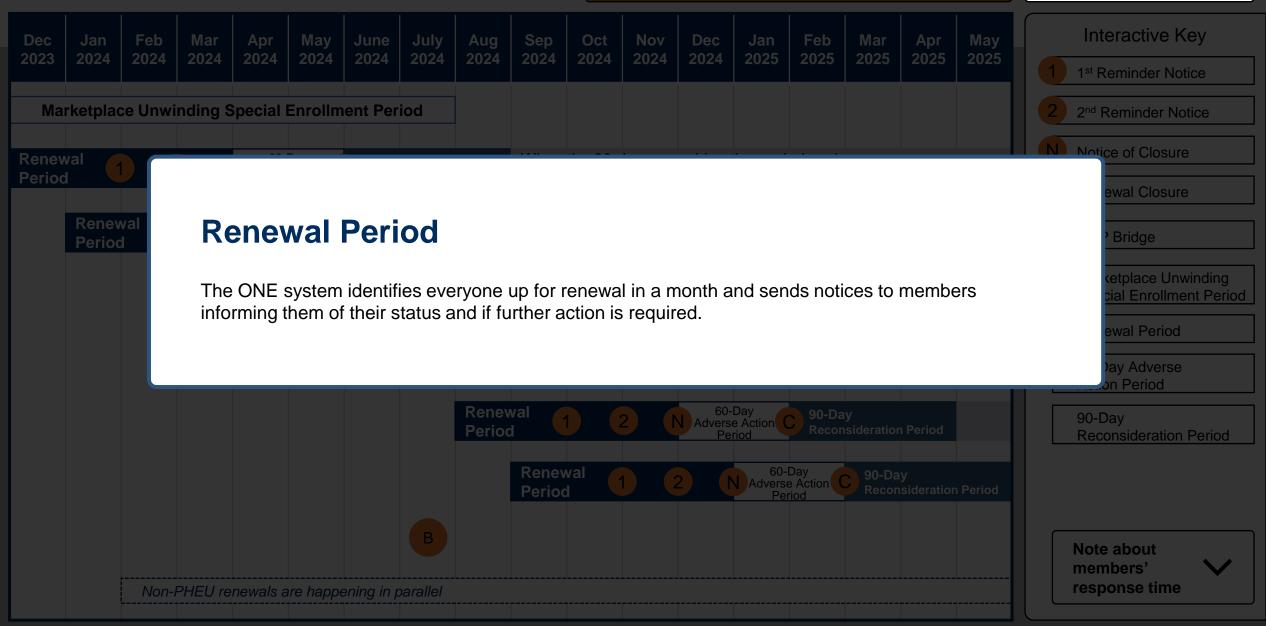
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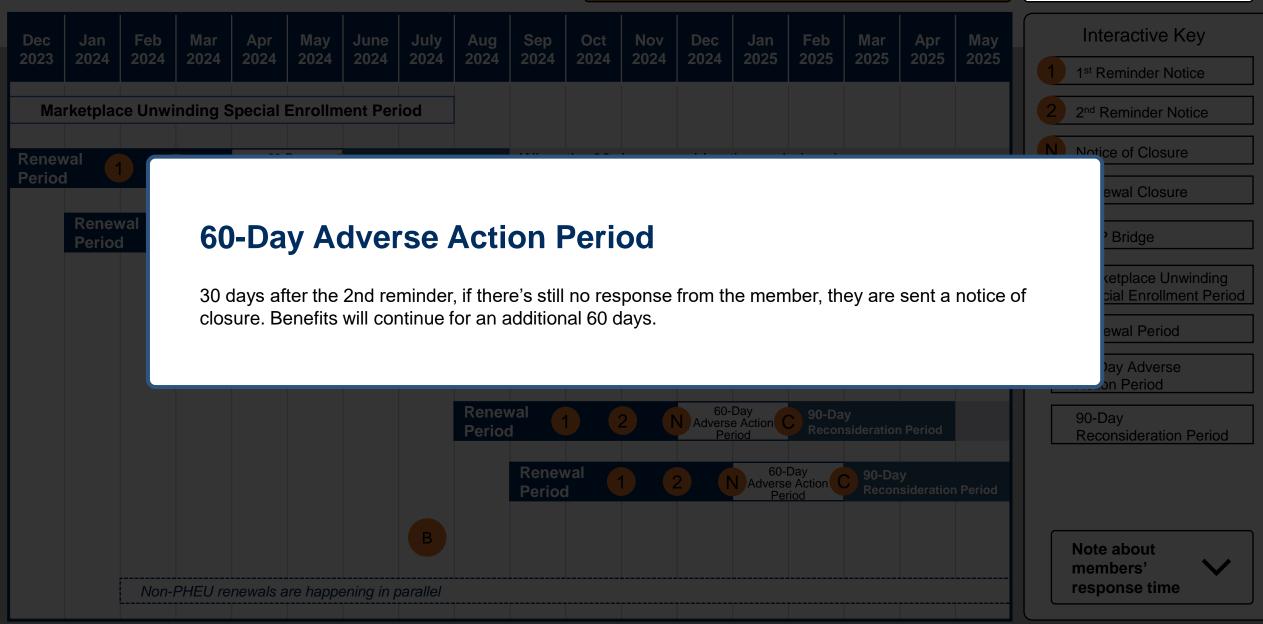
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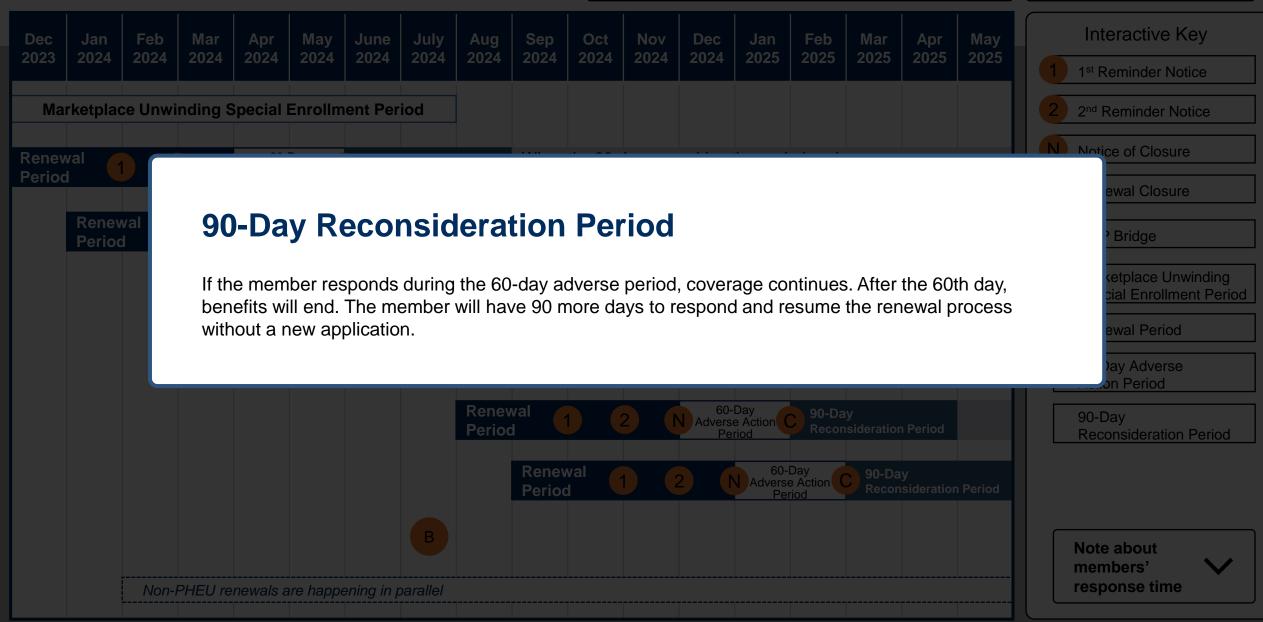
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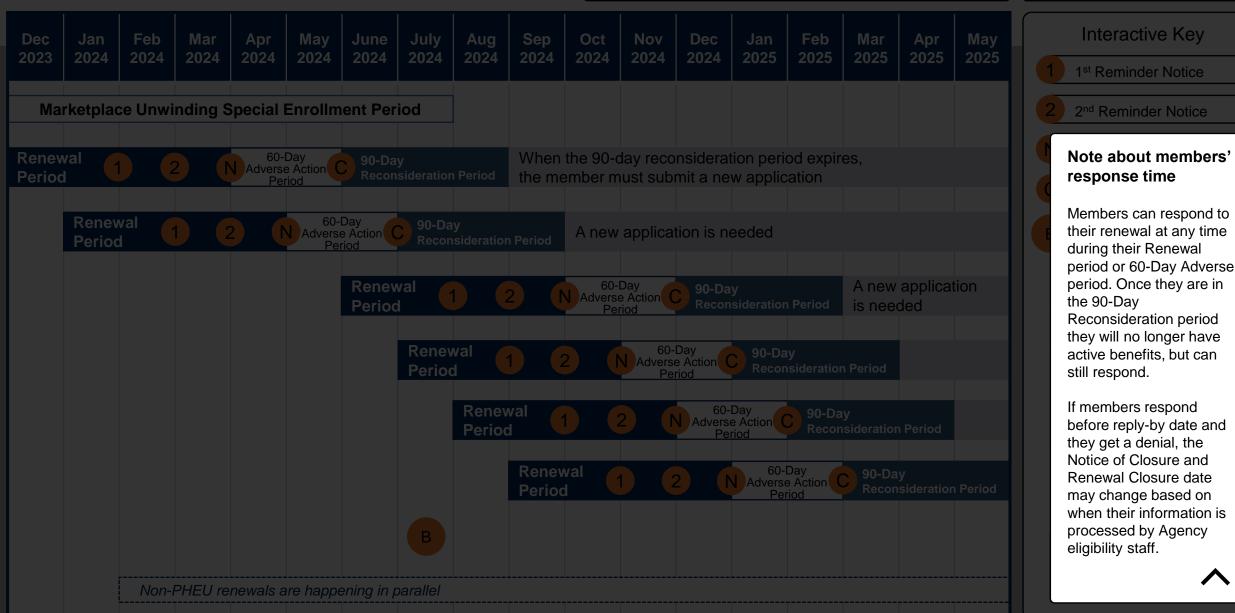
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Communications Planning

In addition to the notices that will be mailed directly to members, a campaign focused on priority populations with barriers to communication (such as people experiencing houselessness, individuals who prefer to speak a language other than English) will launch in phases starting in mid-April.

Metropolitan Group

Designing the communications campaign for community outreach including messaging, materials, and the co-creation of products and collateral for widespread distribution.

Printing and Distribution

State of Oregon – (DAS, OCE, ODHS/OHA Shared Services Printing and Distribution)

- Printing and mailing renewal notices and packets (DAS Printing and Distribution, with oversize packets processed by Oregon Correctional Enterprises)
- · Manual production of translated communication in languages not supported by the ONE System

Traditional Channels

- An external-facing site is regularly updated with information about tools and resources for partners in multiple languages: keepcoveredpartners.oregon.gov
- Email distributions to providers, community partners, and other interested parties are drafted on a bi-weekly basis
- Monthly community partner webinars in English and Spanish

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Communications and Outreach Timeline First six months – Detailed view

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Outreach to Members and Engagement with Partners

- Community outreach campaigns utilizing trusted advisors, with co-created, culturally and linguistically appropriate materials
- Iterative process to determine if campaign and communication materials are having an impact on the responsiveness of members pilot use of the dashboard to identify issues

Regular Touchpoints and Data Transfer

- Monthly data files to support outreach by the Oregon Health Insurance Marketplace to individuals deemed ineligible for OHP
- Monthly data file showing individuals who have not responded to notices after 30 and 60 days (Nonresponse Outreach Report) to CCOs, Kepro, CareOregon, Tribes, Healthier Oregon Program Community Partners, CDDPs, SHIBA

May 11 – Federal Public Health Emergency declaration expires

Communications and Outreach Timeline

distribution.

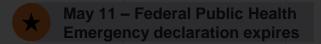
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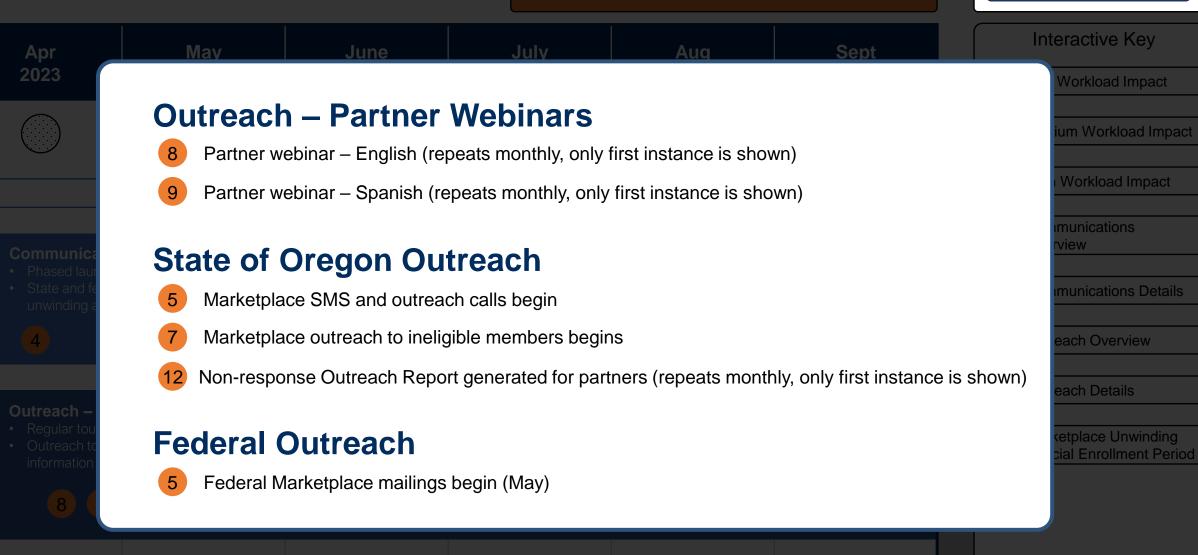
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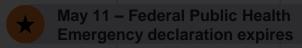
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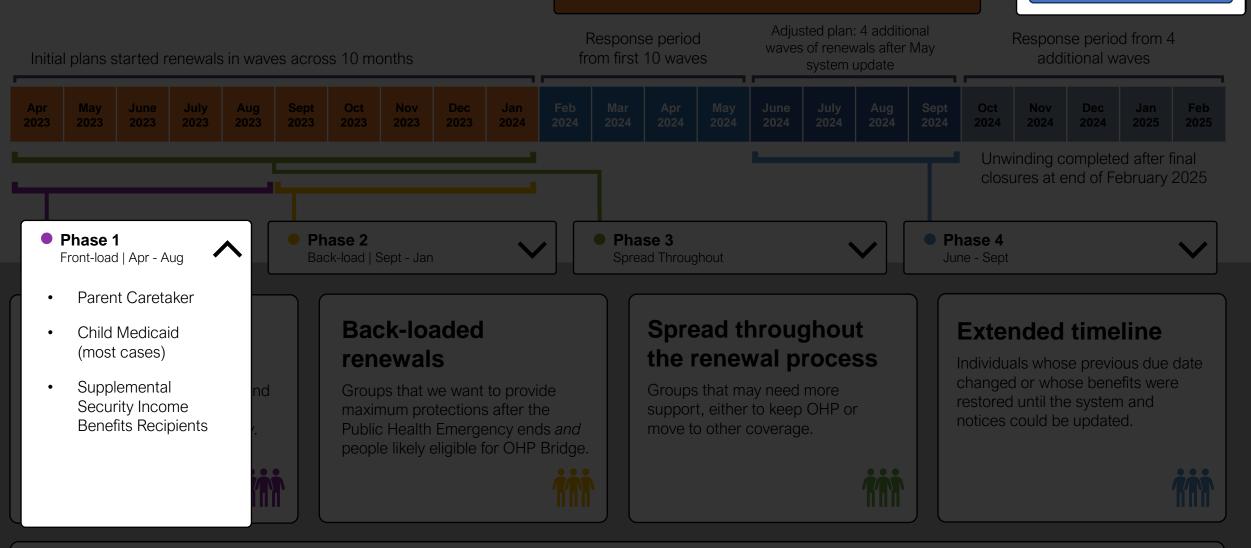
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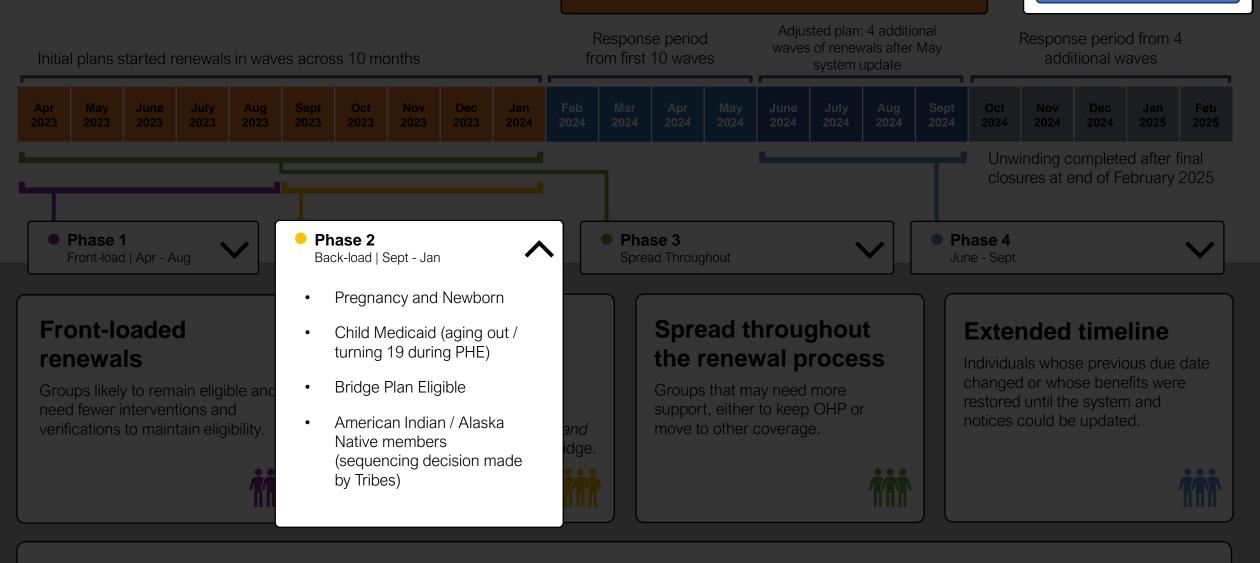


Practical considerations

Months with fewer staff, agency, and community resources (November, December, January)
Marketplace enrollment

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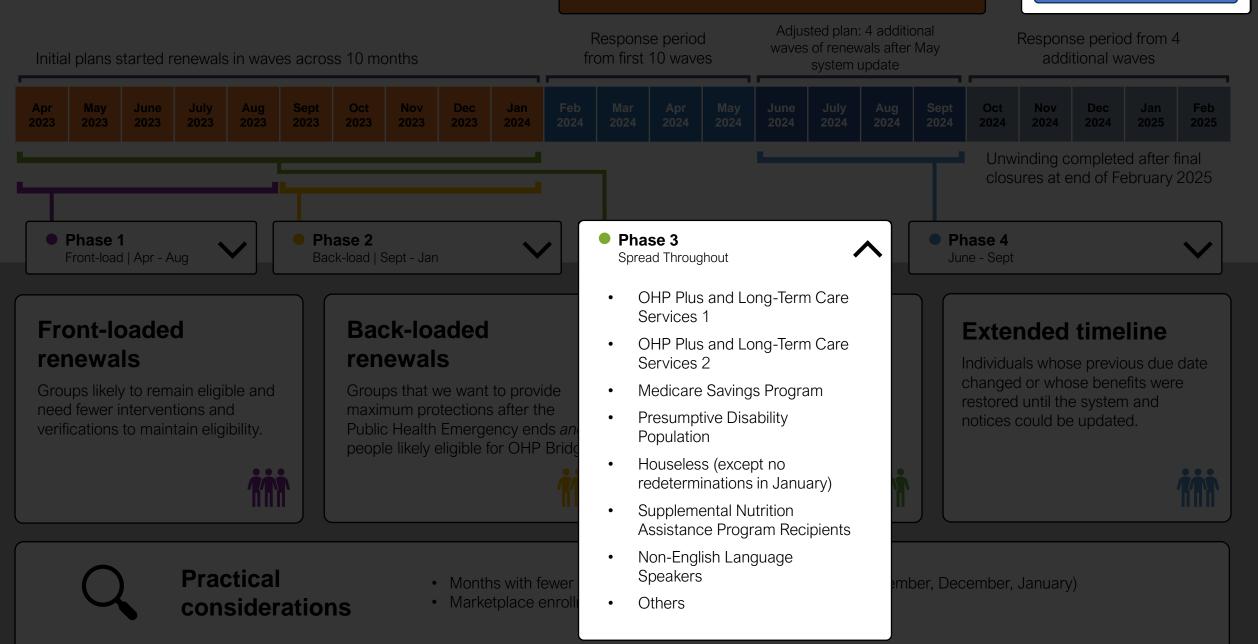
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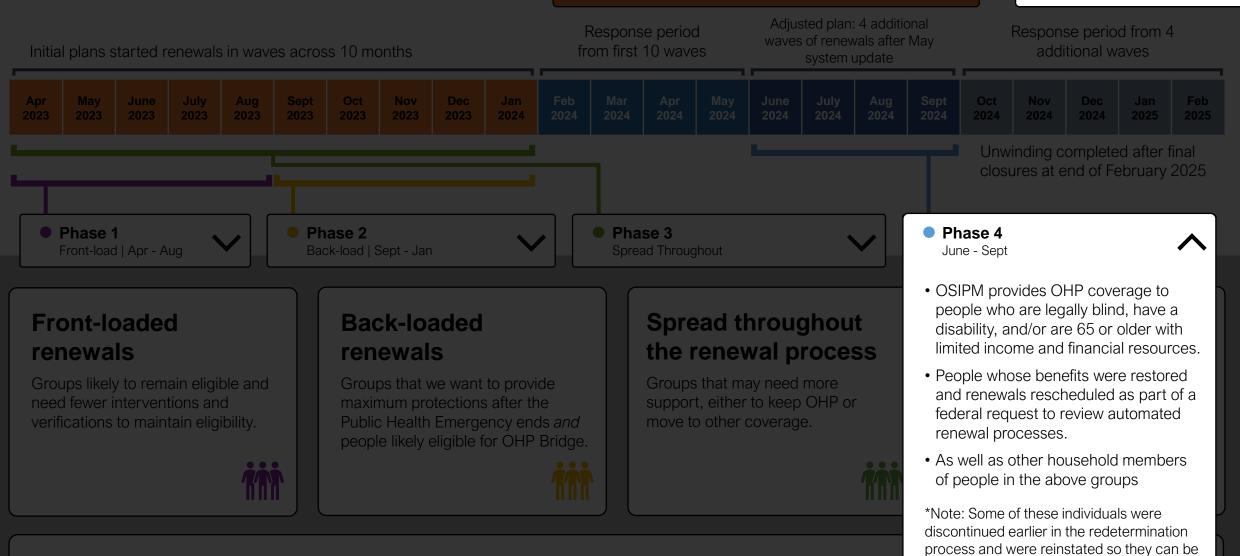
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evaluated after changes are made based on

updated guidelines from CMS and the

Department of Justice.



Practical considerations

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