

Preliminary Structure of the Plan

Goal:

1. Review and approve a preliminary structure* of the plan that the committees and staff/ contractors can work from
2. Meet SB 1089 recommendations to “consider the Join Task Force recommendations”

* The Governance Board may make changes in the future; this is the starting place for this work.

Board Member Feedback:

- Add to next steps a point that says, “Clarify the role of TPAs and regional payment authorities”
- Looks good. No further edits.
- I agree with the additions and the structure as written. No additional suggested changes.
- More time needed to discuss problem statement.
 - Are there problems identified in the statement of the problem which shouldn't be there?
 - Are there problems which the Task Force didn't address, or which are new?
 - Problem statement suggestion: “Costs continue to rise (labor and other components). Providers going bankrupt and/or closing. Consolidation and corporatization leaves people with less sense of control. Acute shortage of providers in specific areas such as primary care, regional care, and behavioral health.”
- The purpose of the Task Force Recommendations discussion is less clear to me.
- The action item of “Next Steps” seems at odds with the workplan.

Statement of the problem

Oregon's current health care is inefficient, expensive, and complex. It relies on multiple private, public, and taxpayer-subsidized insurance plans. It relies primarily on employment for health care insurance and access. It uses different benefits, different provider networks, and different insurance plans. Each year thousands of Oregonians are without insurance when their employment or family status changes.

Health care in Oregon is inequitably delivered. Too many Oregonians endure unequal access, varied care quality, and wide-ranging outcomes because of race, age, income, geography, or insurance. High health care costs generate debt and bankruptcy for many Oregonians.

Recent consolidation and corporatization leaves people with less sense of control. Acute shortage of providers in specific areas such as primary care, regional care, and behavioral health.

Citation: Joint Task Force on Universal Health Care Final Report and Recommendations September 2022

Discussion Question

Does this problem statement adequately capture the challenges we are trying to address in building a Universal Health Plan?

Preliminary Structure Recommendations:

1. All people who live in Oregon qualify for the Universal Health Plan. The plan will clarify eligibility requirements, including for people who live out of state but work in Oregon.
2. The plan will be based on current PEBB benefits and will expand behavioral health benefits.
3. People who qualify for long-term supports and services will continue to receive benefits and services through Medicaid and the Oregon Department of Human Services (DHS). The plan will explore coverage of some skilled nursing and home health care.
4. The plan will not require patients to pay when receiving care. There shall be no co-pays, deductibles, or co-insurance. Instead, there will be new revenue sources that will fund the services while protecting families and businesses from financial hardship.
5. People who qualify for Medicare will be covered by the Universal Health Plan to the extent allowed by federal law.

Preliminary Structure Recommendations cont.:

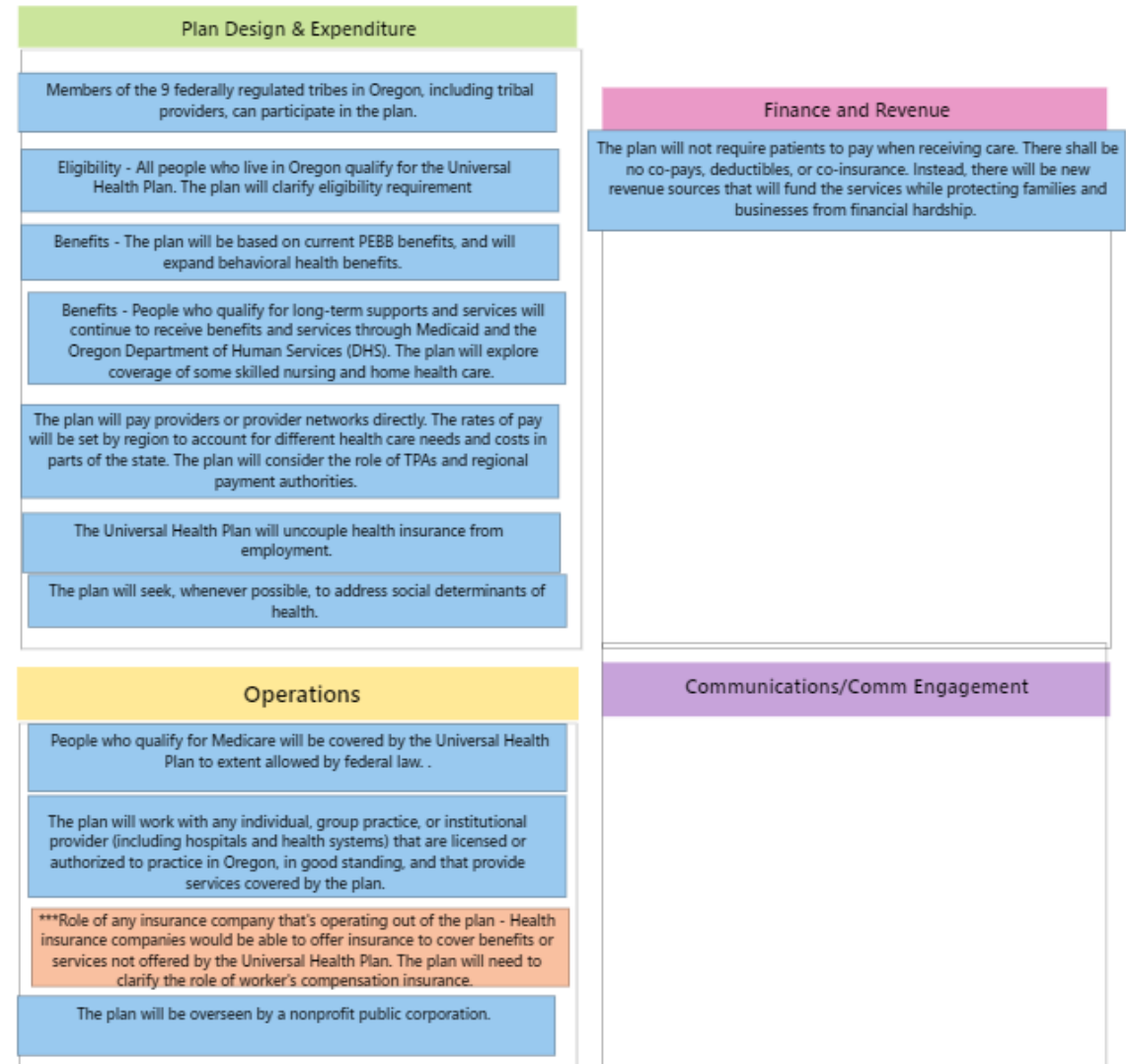
6. The plan will work with any individual, group practice, or institutional provider (including hospitals and health systems) that are licensed or authorized to practice in Oregon, in good standing, and that provide services covered by the plan.
7. The plan will pay providers, or provider networks, directly. The rates of pay will be set up by region to account for different health care needs and costs in parts of the state. The plan will consider the role of TPAs and regional payment authorities.
8. Health insurance companies would only be able to offer insurance to cover benefits or services not offered by the Universal Health Plan. The plan will need to clarify the role of workers compensation insurance.
9. The Universal Health Plan will uncouple health insurance from employment.
10. The plan will seek, whenever possible, to address social determinants of health.
11. Members of the 9 federally recognized tribes, including tribal providers, in Oregon have the option to participate in the plan.
12. The plan will be overseen by a nonprofit corporation.

Proposed Motion

The Governance Board adopts the 12 recommendations as a preliminary structure for the Universal Health Plan.

Assigning Recommendations to Committees:

- Preliminary Structure by workstream shows there is a lot of work to be done in Finance and Revenue, Operations and Community Engagement to catch up to Plan Design and Expenditure.
- Senate Bill 1089 deliverables are focused on Finance, Operations and Community Engagement workstreams.
- Are these the best committees to take-up these recommendations?



Discussion

Are these the best starting committees for these recommendations?

Is the recommendation in orange assigned to the best committee?

Considerations ahead:

There are big challenges ahead that need to be solved:

- Create a unified financing plan that incorporates all federal and state health care dollars, as well as other revenue sources as permitted by law
- Clearly spell out covered benefits, particularly in Behavioral Health services and long-term support services, or identify options for each
- Clarify options related to Medicare and Medicaid waivers that may be needed
- Create several financial models for revenue streams that will not cause financial hardship for families or small businesses
- Explore options for employers that do not violate ERISA
- Work with hospitals and clinicians on a plan for a simplified payment strategy for services that accounts for regional differences and saves money
- Engage health care entities, businesses, tribes and communities in the development of the plan
- Build a clear transition plan that moves the current system to the one in the plan



Universal Health Plan
Governance Board
