

Date Submitted: August 15, 2024

Public Comment Submission from: Mark Weiss

Organization: Mid-Valley Health Care Advocates

Topic: The importance of a business/finance plan

Will oral comments be provided as well: No

Dear Governing board members,

Where most social justice efforts fail is that they have no plan for how to finance their plans.

Please do not spend all your time working on the social justice side of things, as the 770 task force did, and spend an equal amount of time creating a “business plan.” Without a business/financial plan nothing will happen. Neither the legislature nor the voters of Oregon will support universal care.

Every person I talk to about universal health care (and as a board member of Mid-Valley Health Care Advocates I talk to a lot of folks) wants to know, first and foremost, how it will be funded. Without a clear, and viable, financial plan, Oregonians will not support this effort.

Thanks for your consideration, and thanks for doing the long, hard work of this board. I do appreciate you all.

Mark Weiss
Chair, Mid-Valley Health Care Advocates
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Date Submitted: August 20, 2024

Public Comment Submission from: Michael Huntington MD

Organization: PNHP-Oregon

Topic: As you interview candidates for staff, I hope you weigh heavily on expertise in policy and finance.

Will oral comments be provided as well: Yes

Comment for the Oregon Universal Health Care Plan Governance Board
August 20, 2024

I thank each of you for serving on the Governance Board. I am encouraged by your discussion this morning about financing the system.

On Aug. 21, 2019, the Health Page of the Oregonian reported that most Oregonians favor universal health care provided by the state, even if it requires a new tax to pay for it. According to an Elway Research of Seattle poll, this sentiment was consistent statewide across political and geographic boundaries.

The Board plans to engage the public in an open forum on how best to finance universal healthcare. The Elway Poll showed that Oregonians are ready for that discussion. Transparency and open discussion of financing options can mitigate skepticism and build public confidence in the new system.

Most Oregonians don't know that the Board exists. I hope you reach thousands of them to come talk about taxes to pay for healthcare. When you show how unfair our system is, you can stir their interest in paying the needed taxes out of self-interest and social conscience. You can share ideas on equally distributing the pain of paying taxes so that none of their family or neighbors must lose their savings or homes because of medical bills. You can teach them the vagaries of tax plans and how seemingly reasonable plans can unfairly punish certain segments of our population. Gross receipts tax comes to mind.

Another concern I have is the hiring of staff to help you. As you interview candidates, I hope you weigh heavily on their expertise in policy and finance.

A final concern is that you fill in the Finance Committee guidelines box on your slide set with specifics on financing of the system that you've discussed today.

Mike Huntington
9083 NW Lessie Place
Corvallis, OR 97330
541-829-1182

Date Submitted: September 8, 2024

Public Comment Submission from: Michael Huntington M.D.

Organization: NA

Topic: Oregon Health Authority (OHA) is overstepping its limited role with Oregon's Universal Health Plan Board . The DOJ has influenced the Board to over-comply with OR Chapter 192 Public Meeting Policies.

Will oral comments be provided as well: Yes

Testimony to the Oregon Universal Health Plan Governance Board UHPGB
September 19, 2024

First, we ask you to evaluate whether the Oregon Health Authority (OHA) is overstepping its limited role with Oregon's Universal Health Plan Board (UHP-GB).

The UHP-GB is directed by SB 1089 to "...design the financing and administrative structure for the Universal Health Plan, including an independent public corporation and a new Universal Health Plan Trust Fund."

The 2019 Elway Research Poll showed that Oregonians are ready for a discussion of financing health care. Transparency and open discussion of financing options can mitigate skepticism and build public confidence in the new system. The UHP-GB, however, has been slow to allow discussion of financing the Plan.

The Board must design a sound business model for the universal health plan and taxation fair to all Oregonians, including governments and businesses. Designing a suitable revenue structure is a complex and tedious task that deserves all the speed and expertise the UHP-GB can muster.

Many are wondering if the apparent reluctance of the Board to more rapidly address its priority task (financing the plan) may be the result of undue cautionary influence from OHA. Please confirm for us in what ways OHA is helping or hindering the Board as it pursues its top priority.

Second, we have concerns that the DOJ has influenced the Board to over-comply with OR Chapter 192 Public Meeting Policies. As a result, the Board has prematurely adopted stringent guidelines recently discussed but not yet proposed by the Oregon Government Ethics Commission (OGEC). Item 14 of the Board's State Email Accounts and Member Communications Policy: states the following:

"...members should avoid communicating with other members of the board on any matter relating to the board, board business, or the member's work and participation as a member of the board matter."

We feel strongly that volunteer Board members cannot build vital relationships and effectively share ideas if they are prohibited from talking one-on-one with each other about Board matters. I propose a less restrictive and more productive interpretation of OR Chapter 192 Records; Public Reports and Meetings Guidelines for Board Member Communications:

“While board members are not entirely prohibited from communicating with each other outside of meetings, they should follow a commonly used guideline: One-on-one conversations (about Board matters) between board members are generally permissible, as long as they do not constitute a quorum.”

We will appreciate your prompt response to our concerns.

Sincerely,

Mike Huntington MD.
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Corvallis, OR 97330
541-829-1182

Bruce Thomson
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Corvallis, OR 97330

Date Submitted: September 14, 2024
Public Comment Submission from: Karen Christianson, J.D.
Organization: Mid Valley Health Care Advocates
Topic: Tasks of the Board
Will oral comments be provided as well: No

To: The Universal Health Plan Governance Board

From: Karen Christianson, J.D.

Re: Your Primary Task

First of all, I would like to thank you for undertaking the commitment to create a plan for the creation and financing of the universal health plan for Oregon. It is a huge task, but you stand upon the work that has already been done by the Joint Task Force on Universal Health Care. That body laid much of the groundwork, and it should not be repeated by this Board. The primary question that was not adequately address is financing the program.

Not only must you come up with a business plan, but you must decide upon the transition from a premium based system to one funded by taxation. The plan will rely upon currently existing federal revenue streams such as Medicare and Medicaid. In addition, state financing from taxation must be developed in a way to be as equitable as possible. This is not an easy task. You have a deadline for completing this work by September 2026. This may seem like a distant horizon but given the complexity of the tax system you have no time to waste. While some expertise exists within the Department of Revenue and the Legislative Fiscal offices, input from outside consultants is required and the process for seeking outside advisors is time consuming.

Please move on to the question of how to pay for the system immediately. Every person that I have talked to about Universal Health Care wants to know what it will cost them. This will be the first question the legislature will ask, and you must have a clear answer for them and the people of Oregon or this effort will be a failure.

Thank you for your consideration of these comments.

Karen Christianson

Date Submitted: September 16, 2024

Public Comment Submission from: Linda Krygier

Organization: Mid Valley Health Care Associates

Topic: Public Comments for consideration at UHCGB Board meeting of September 19, 2024 Regarding Agenda Item 6

Will oral comments be provided as well: No

I have significant concerns with the guidance proposed for the Finance and Revenue Committee. At the August Board Meeting, a suggestion was made but declined by consensus of the Board to convene a small, short-term Board workgroup for the purpose of recommending additional guidance for the financing of the state's universal health plan. Later in that same meeting, there was an acknowledgement by multiple Board members that the SB 770 Task Force had done most of its work in the area of plan design and, thus, that's where the majority of the agreed-upon components of the preliminary structure are to be applied. Statements were also made regarding the volume and intensity of the work that will be required by the Finance and Revenue Committee.

Agenda Item #6 relates to the committee deliverables and appointment of members. In reviewing the slides related to this agenda item, I saw objectives and deliverables but no mention of the specific guidance being given to the Committees through the preliminary structure components. So, I assume that the 12 components agreed to in the August meeting comprise the bulk (if not only) guidance that will be provided to the Committees to supplement the objectives and deliverables. Considering the paucity of components that address the needs of the Finance and Revenue Committee, I fear that the committee will be unable to meet their objective to "...address the impacts of the Universal Health Plan with respect to specific types of employers and households..."

To address the gap in guidance, I respectfully ask the Board to reconsider the suggestion to convene a small, short-term Board workgroup to identify basic assumptions for the Finance and Revenue Committee, including the following at a minimum:

- Baseline of total state healthcare costs to use in determining a revenue target. This could be as simple as using the total cost figure from the Task Force report or agreeing on a per-person average based on other studies provided by existing entities such as the Kaiser Family Foundation or OHA. Assumptions regarding projections of future costs would also be helpful.
- Baseline of "current" revenue streams. The Committee will need to have a dollar amount or percentage of the total health care costs in the state currently paid via Federal funds, state funds, employer payments, individual payments, etc., in order to study and address the impacts of any proposed financing model. Some good work was done in this area by the Task Force and could be consolidated by the Board to provide a starting point for the Committee.
- Source(s) of data for calculating potential revenues from businesses, individuals, and government entities. There are a multitude of numbers available in various studies that the Committee might use, but identifying, studying, and agreeing on which to use is a huge task. The Committee would certainly benefit from guidance from the Board regarding a source of economic figures to use when calculating a model's potential impacts.

At least one member of the Board expressed a concern that convening a Board workgroup to provide further guidance regarding the financing model could be seen as disempowering the committee. However, this same concern was not voiced regarding the many specific preliminary structure components that apply to the Plan Design and Expenditure Committee such as not including payment when receiving care (currently copays, coinsurance, and deductibles) or including expanded behavioral health benefits. Another objection was that convening a Board workgroup would further delay the work of the Finance and Revenue Committee. I submit that not providing agreed-upon assumptions to the Committee with significantly delay, and possibly, derail the work.

Date Submitted: September 16, 2024

Public Comment Submission from: Tom Sincic

Organization: NA

Topic: Concerns Regarding UHPGB Agenda and Cost Growth Target Presentation

Will oral comments be provided as well: Yes

To: Universal Health Plan Governance Board

Submitted by: Tom Sincic, MSN, FNP-Retired, Portland

Date: Sept. 16, 2024

I am writing with concern that the work of the UHPGB is being side-tracked. The time spent talking about various payment models last meeting is part of that concern.

My sense is that the report on the Cost Growth Target brings no added value unless it shows that the pathway to affordability, access, and equity does not lie in the Cost Growth Target work. I have attended a number of those meetings including the previous committee that set the cost growth target. There is nothing in their many hours of work that says they can deliver a plan for affordable, accessible and equitable care. The Cost Growth Target work is not operate under the Values and Principles adopted by UHPGB. Let's make sure that the 40 minute agenda item on the Cost Growth Target presentation by OHA is not an unnecessary waste of the Board and staff time.

This time may be better spent focusing on organizing around the work of the committees and continuing a discussion of how to identify the many revenue sources known and yet to be discovered that are being spent that makes healthcare so expensive. Perhaps time hearing the expertise that the board members bring such as Dr. Chi who helped design a universal healthcare system. This was why the criteria for board membership was created in the bill.

It is the work of the UHPGB that actually can deliver a plan to achieve the goals of affordable, accessible, and equitable care. Reports have already been delivered to the legislature demonstrating this. Both the Rand Study of 2015 and the Task Force on Universal Health Care in 2023 showed that everyone can get care for lower cost. In essence, this work is to meet Oregon's Constitutional fundamental right to health care.

It is time to recognize that this is a time of transformation and not one modeled on the Cost Growth Target efforts work within the current failed system.

Under whose recommendation did this item get on the agenda? Was it requested by staff? By Board members? By OHA? I am assuming the board must approve the agenda.