

Finance and Revenue Committee (F&R) November 19, 2024 Meeting Summary

Attendees	Chair Cherryl Ramirez, Samantha DuPont, John Santa, Richard Gibson, Charlie Swanson, Bethany Stairs, Jeff Gudman, Morgan Cowling (staff), Jeanene Smith (HMA), Anya Wallack (HMA), Laurel Swerdlow (staff), Jessica Merino (staff), Danielle Ross (staff) and Katy DeLuca (staff)
Absent	Chris Hogan
Date/Time	Tuesday November 19, 2024 / 9 a.m. – 12 p.m.
Meeting Video Recording	
Meeting Purpose	<p>The purpose of today’s meeting is to continue building a strong foundation for the committee for the future work. The committee will be reviewing the board’s workplan and values and principles as well as the committee’s charter and timeline. The committee will also hear a presentation from Jeanene Smith, Health Management Associates, on Oregon Health Spending as well as discuss revenue principles and attributes of a sound financial plan.</p> <ol style="list-style-type: none"> 1. Review Universal Health Plan Governance Board (UHPGB) workplan, committee charter/process, and UHPGB’s values and principles (00:08:45) 2. Oregon Health Spending - Jeanene Smith, Health Management Associates (00:30:53) 3. Develop revenue guiding document and review revenue principles and attributes of a sound financial plan (02:27:36)
Committee Member Follow-up Questions and Feedback	
Oregon Health Spending Questions/ Feedback	<ul style="list-style-type: none"> • “Total healthcare expenditures” presented don’t include expenses for public health and expenditures for structures and equipment • Regarding slide 35: Can we get total health expenditure data from OHA [that includes public health expenditures and expenditures for structures and equipment] • Regarding slide 38: relating to hospital inpatient and outpatient, total is 10.8 B. If you look at OHA’s data from hospitals (“detailed hospital data bank” that OHA collects from hospitals), you’ll find that the total net patient revenue in 2022 was 15.6 B. So you can see there is a lot missing from this cost growth data. We need to work with OHA on getting decent information. • Can we find a way that the committee can work with OHA, DCBS, Saif, etc. to try and get appropriate data? Not in a meeting, but between meetings. We should keep all healthcare expenditures that we can identify (2019 – 2023) in one document and then we can go through line by line and decide what doesn’t need to be included for purposes of the Universal Health Plan.

	<ul style="list-style-type: none"> • Recommendation to have a few members of this committee, OHA, DCSB and HMA to have a meeting that can be available to the public where we can dig into this further. • There’s a large hole in cost growth’s data regarding self-insured. That needs to be sorted out. • Concern about what’s going on in Medicare Advantage. Want to understand the numbers around non claim expenditures. • DCBS provides detailed enrollment information and it includes self-insured as part of that. Need complete enrollment data from DCBS. • Can we get the data separated out so that we know how many people are self-insured in cost growth’s data? • In cases of the behavioral health system, we have historically underspent. Worried we are solving for the status quo, and that is not wise. • Would like a spreadsheet of all expenditures in Oregon • If the Oregon state hospital and dept of corrections are reliant on state dollars, then they should be included in the plan. • Is the individual contribution on an employer plan subject to FICA taxes • Can we get more complete OEGB and PEBB data? • From DCBS – would like the data collected on enrollment by quarter from 2015 – 2024 by ATM (Associations Trust and Multiple employer welfare arrangements, small group, large group, individual, student plans, separately self-insured) • From DCBS – can we get data on stop loss only, short term medical, Tricare, Medicare advantage, Medicare HMO and Medicare supplement. Need it from at least 2019-2024 • From OHA - Need data on CAK and healthier Oregon for undocumented residents, beyond 2022. • From DCBS - Each insurance company – what are their earned premiums, written premiums and losses. This data should be sorted out into various categories and show what is for Medicare advantage, commercial insurance, etc. • We need to eventually look at reserves. • To what degree is capital spending apart of the budgeting? We have to account for how we build new facilities for this plan. • How do we account for the aging population? • Can we have a line item to estimate how much is being funded by private pay? This wouldn’t be included in the plan, but it would be good to understand.
<p>Principles/ Attributes of a Financial</p>	<ul style="list-style-type: none"> • Ensure the equity definition matches OHA’s exactly. • Suggest including – “Consider federal tax expenditures” • Should include a principle around what the plan does with any savings from the plan.

Plan Feedback	
Additional Resources Needed	<ul style="list-style-type: none">• Additional data requested on Oregon's health care expenditures.• Committee would like to schedule an additional meeting before the December 17th meeting.
Committee Member Tasks	<ul style="list-style-type: none">• If you have additional principles you would like to see added, please email to staff.

Upcoming Meetings: Tuesday, December 10 at 2 p.m. [Register here](#)