



# **Oregon Health Update**

**Community Partner Office Hours** 

October 8, 2024

Welcome! Meeting begins at 1:05

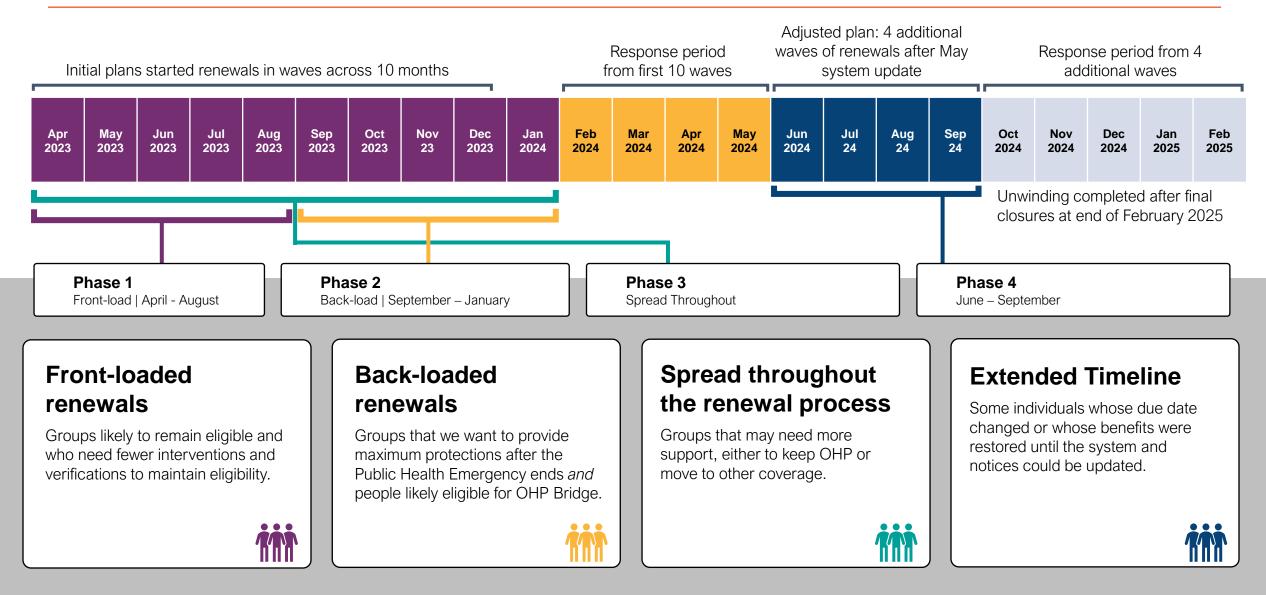
### **Agenda for Today**

- Unwinding, Normal Renewals, and Outreach
- Housing benefit goes live
- OHP Bridge Updates
- Discussion Time

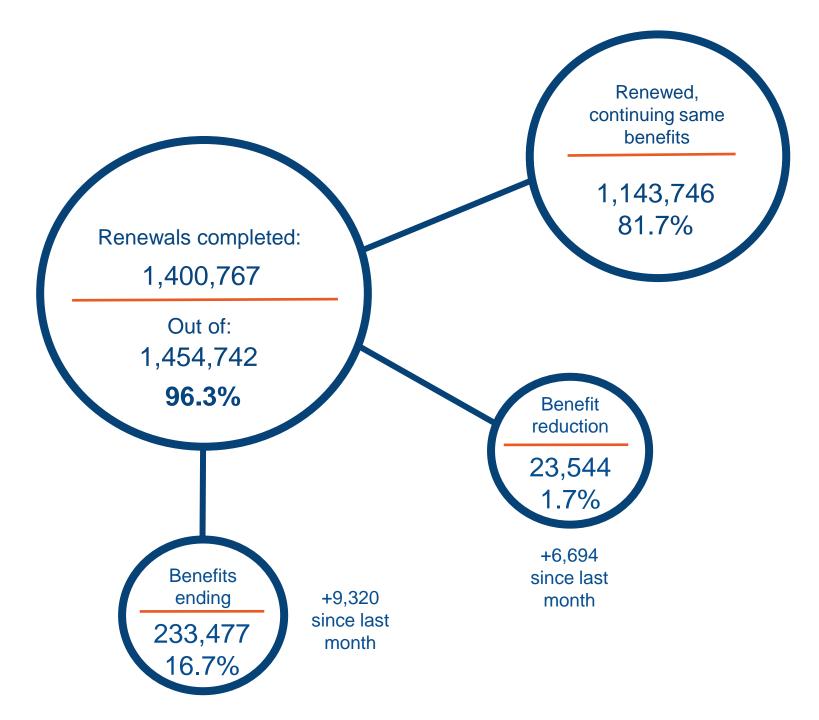


# Renewal Updates

## **Phased Renewals by Population**



Renewal Outcome Summary Completed renewals as of Oct. 08, 2024



#### **Nonresponse Outreach**

# Leveraging internal and external networks and trusted messengers to reach remaining renewals.

#### **Examples of nonresponse outreach:**

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- PH Tech calling members with 30 or 60 days left to respond during the last phase of renewals, including Oregon Supplemental Income Program Medical (OSIPM) members with Long Term Services and Supports (LTSS), Medicare Savings Program (MSP) members, and OSIPM members without LTSS or MSP.
- Case managers from Aging and People with Disabilities (APD) and Office of Developmental Disabilities Services (ODDS) directly contacting their members about renewals and sending reminders throughout the process.
- OHA is sharing member data on a monthly cadence with agency partners, including Coordinated Care Organizations (CCOs), Acentra (formerly known as Kepro), and CareOregon.
- Lists of your organization's associated clients that haven't responded are available to community partner application assisters--ask your regional outreach coordinator!

#### **Medicare Open Enrollment**

Medicare open enrollment season runs from October 15 to December 7.

• Members can make Medicare plan decisions, such as changing Medicare Advantage, Medicare Supplement/Medigap, and Medicare Part D Prescription Drug plans.

People with Medicare who are losing full OHP benefits or recently started Medicare may want help considering their Medicare plan choices—refer to free choice counseling help via the OregonHealthCare.Gov/GetHelp locator tool:

- Senior Health Insurance Benefits Assistance (SHIBA) counselors at 800-722-4134
- Medicare Insurance Agents

#### Normal renewal timelines resume in October

- Renewals started up until September had extended timelines:
  - At least 90 days to respond
  - 60 days advance notice before closing benefits.
  - Renewals already started in September or earlier will still use those longer timelines, but not renewals started in October going forward.
- Normal renewals have at least 30 days to respond, or we will send a 30 day closure notice:
  - Members can still respond anytime before benefits end
  - If renewals sent in October do not respond by the end of November, we will send a closure notice ending benefits at the end of December. They still can respond up until December 31 to prevent closure.
  - The 90 day reconsideration window after closure will continue

#### **Key Dates for Renewals**

RENEWAL BATCH	Medical Renewal Date	Reply by Date	Closure Notice Period	Closure Date
(month initiated and mailed)	(AP Renewal Date)	(Closure Notices sent if no response)		
June 2024	8/31/2024	9/30/2024	10/1/24-11/30/24	11/30/2024
July 2024	9/30/2024	10/31/2024	11/1/24-12/31/24	12/31/2024
August 2024	10/31/2024	11/30/2024	12/1/24-1/31/25	1/31/2025
September 2024	11/30/2024	12/31/2024	1/1/25-2/29/25	2/28/2025
October 2024	12/31/2024	12/1/2024	12/1/24-12/31/24	12/31/2024
November 2024	1/31/2025	1/1/2025	1/1/25-1/31/25	1/31/2025
December 2024	2/28/2025	2/1/2025	2/1/25-2/28/25	2/28/2025
January 2025	3/31/2025	3/1/2025	3/1/25-3/31/25	3/31/2025

**Note**: Members can respond to their renewal at any time during their Renewal period or Closure period. If members respond **before** reply-by date and are no longer eligible, the notice date may change based on when their response is processed.

## **Oregon's Uninsured Rate: only 3%**

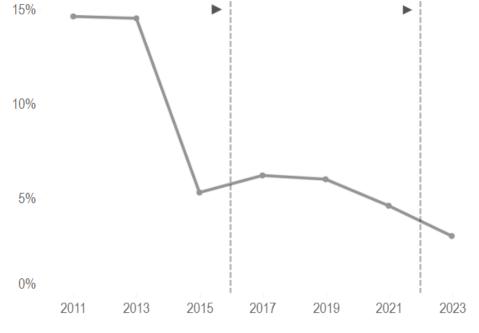
Press release last month announced the results of 2023 Oregon Health Insurance Survey

**Contributing Policies:** 

- Affordable Care Act
- Healthier Oregon
- OHP Bridge
- Unwinding
- Continuous Eligibility

Latino uninsured rate dropped from 27% to 7.7%





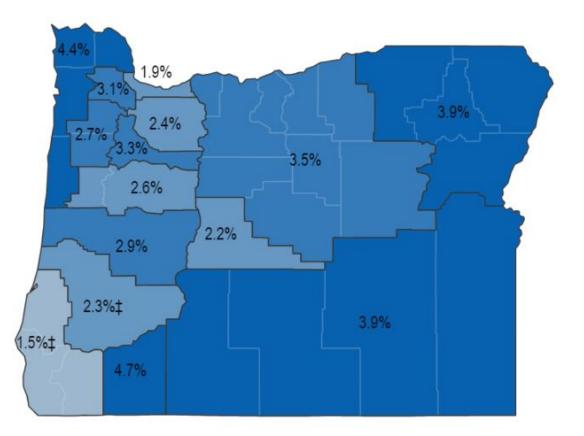
## **Outreach to Remaining Uninsured**

<u>New data dashboard</u> with many options

Counties with largest uninsured population (percent of total uninsured):

- Washington: 18,000 people (15.4%)
- Multnomah: 14,000 (12.0%)
- Marion: 10800 (9.3%)
- Lane: 10,200 (8.7%)
- Jackson: 10,000 (8.6%)
- Clackamas: 9,000 (7.7%)

Insurance rates: Uninsured at time of survey by region, 2023.



### **Demographics of OHP-Eligible Uninsured**

- About 24000 people who are uninsured and likely eligible for OHP (data collected in 2023, prior to OHP Bridge launch)
  - 4300 children, 9900 age 19-34, 9800 age 35-64
  - 10700 are employed, 2300 self employed, 3300 unemployed, 4200 out of the labor force
  - 14300 men, 8400 women, nonbinary sample size too small
  - Primary race/ethnicity identification: 2200 latino, 15200 white, others were also a statistically unreliable sample size
  - Primary reason for not applying: Not eligible, make too much money

## NEW HOUSING BENEFIT IN NOVEMBER

#### Housing benefit goes live in November

- Housing benefits through Health Related Social Needs (HRSN) go live November 1<sup>st</sup>
  - HRSN and Housing eligibility is a complicated topic
  - We strongly recommend attending the webinars and trainings on this topic!

- There are unique requirements to be eligible for housing supports beyond the requirements for other HRSN services
  - Basic process is for members to contact their CCO for screening

#### **HRSN Program Overview**

The goal of Oregon's HRSN program is to improve health outcomes, decrease costs, and reduce inequities. Eligible OHP members can access the HRSN services below once live.



#### Climate (go-live date, 3/1/24):

These supports include air conditioners for heat risks, air filtration devices to protect against wildfire smoke, portable heaters, mini refrigeration units for medications, and portable power supplies to operate medical devices during power outages.



#### Outreach & Engagement (go-live date, 3/1/24):

These supports include outreach and linkages to other Medicaid or non-Medicaid benefits, for OHP members in eligible HRSN populations that are presumed eligible for HRSN services



#### Housing (go-live date, 11/1/24):

These supports focus on members who need support to maintain current housing. Eligible members could be connected to rental assistance, utilities, and storage fee assistance and tenancy support services.



#### Nutrition (go-live date, 1/1/25):

These supports include services such as medically-tailored meals for specific health conditions and nutrition education.

## **HRSN Housing Supports**

**Goal:** To help people to stay in their current housing and prevent homelessness

**When:** Available to some OHP members on November 1, 2024

#### Who Qualifies?

• HRSN Services are only available to OHP Members.



## **HRSN Housing Supports**



Housing tenancy sustaining services.



Medically-necessary home accessibility modifications and remediations, such as ramp and grab bar installation, pest control, heavy duty cleaning, and related hotel costs.\*



Rent for up to six months, including past due amounts.





Storage fees.

\*To qualify for HRSN Home Modifications and Remediations, an OHP Member must 1.) have a Housing Clinical Risk Factor 2.) belong to one of the HRSN Transitions Populations and 3.) the home modification or remediation service must prevent, treat, or ameliorate the Housing Clinical Risk Factor.

# Eligibility- HRSN Housing Support

## To qualify for HRSN Rent, Utilities Assistance, Storage Fees and Tenancy Services, an OHP Member must:

- 1. Be currently housed
- 2. Need support staying housed
- 3. Have a lease or written agreement with their landlord
- 4. Have an income that is 30% or less than the area median income in their area
- 5. Lack sufficient resources or support networks to prevent homelessness, and
- 6. Have a Housing Clinical Risk Factor.

Notes:

- Annual Median Income levels are set by the Department of Housing and Urban Development on an annual basis.
- Only OHP Members who receive HRSN Rental Assistance can receive Utilities Assistance and Storage Fees

# Bigging Clinical Risk Factors

#### **Housing Clinical Risk Factors**

- Complex behavioral health condition
- Developmental disability
- Complex physical health condition
- Needs assistance with Activities of Daily Living/Instrumental Activities of Daily Living or is eligible for Long Term Services and Supports
- Current or past interpersonal violence experience
- Repeated emergency department use
- Repeated crisis encounters
- Currently pregnant or 12 months postpartum and at risk of certain clinical factors
- Less than six years of age and at risk of certain clinical factors
- More than 65 years of age and at risk of certain clinical factors

## **Examples of Eligible Populations for 11/1/24**



- Member with a qualifying chronic disease is behind on rent due to job loss and needs rental assistance until job is replaced.
- Member has a serious medical event (e.g., hospitalization; broken leg) and needs rental assistance while unable to earn income.
- Family has moved into friend's home (i.e., "is doubled up") and needs rental assistance to stay in that housing.
- Family at risk of eviction due to severe lack of upkeep of the home and needs chore services to maintain housing.
- Five-year-old with special health care needs rental assistance while parent takes time off from work to support child's needs.

## **Key Messaging Points**

In our communications we're emphasizing the following high-level messages:

- The purpose of housing benefits is to keep eligible OHP members housed
- To qualify, you must be an OHP member AND have a qualifying health condition AND meet requirements on things like income and housing situation
- HRSN housing benefit applications may take up to two weeks to be reviewed. If approved, additional time may be needed to provide the benefit
- These benefits are **not**:
  - Available to all OHP Members
  - For OHP members who are currently houseless or experiencing homelessness
  - Set up to respond to emergency housing needs

#### HRSN Outreach and Engagement (O&E) Overview

HRSN Outreach and Engagement is an OHP benefit. Community Partners can become Outreach and Engagement Providers and bill OHP for that work



O&E is intended to:

- Identify members who may be eligible for HRSN services and help them understand the process to access needed services in a culturally-specific and responsive manner
- Connect members to HRSN, healthcare, and nonhealthcare services to address social determinant of health needs
- Give individuals the opportunity to choose whether they would like to access the additional HRSN benefits

# **HRSN Webinars and Trainings**

Learn more at the All Come and Para Todos webinars:

- English: October 9th and November 13th, 10:00 AM
- Spanish: October 9th and November 13th, 2:00 PM

#### Provider trainings and modules

- HRSN Provider Training Webpage:
  - Information about past and upcoming trainings and modules
  - Every month, 90-minute trainings are available on various topics, with an opportunity for Q&A.
  - 30-minute, pre-recorded trainings specifically for HRSN providers.
- Housing Module upcoming on October 22nd





## **Current HRSN Resources**

- <u>1115 Waiver HRSN Webpage</u>
- HRSN Service Provider Webpage
  - Provider Qualification Fact Sheet: <u>English</u> or <u>Español</u>
  - Outreach and Engagement Fact Sheet: English or Español
  - NEW: Housing Eligibility Fact Sheet: English
- HRSN Climate Benefit Webpage
  - Climate-Related Supports Fact Sheet and FAQ (available in 7 languages)
  - HRSN Request Form for Climate-Related Devices (available in 11 languages)
  - NEW: Links to each CCO's HRSN Request Form
- For any questions related to today's presentation, please contact us: <u>1115waiver.renewal@odhsoha.oregon.gov</u>

# **OHP Bridge**

### What's OHP Bridge?

- OHP Bridge is a new benefit for adults with higher incomes. People who get OHP Bridge must:
  - Have income up to 200 percent of the federal poverty level,
  - Be 19 to 64 years old,
  - Not have access to other affordable health insurance, and
  - Have an eligible citizenship or immigration status to qualify.
- OHP Bridge is almost the same as OHP Plus.
- OHP Bridge is free coverage with no member costs like copays or deductibles.

# In Oregon, we have two OHP Bridge programs with the same benefit package.

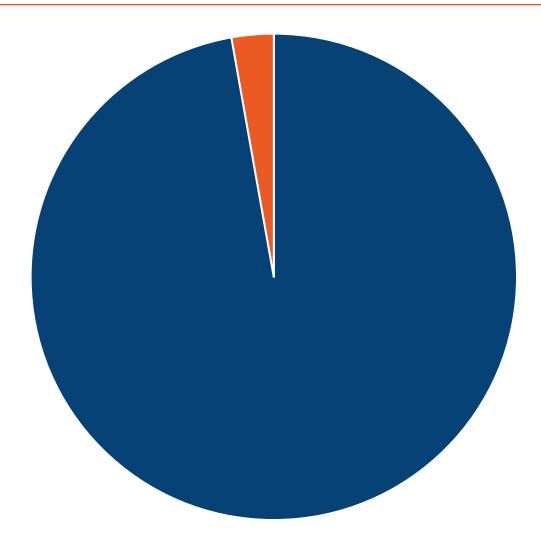
#### **OHP Bridge – Basic Health Program (BHP)**

- Managed exclusively by CCOs
- No option for open card

#### **OHP Bridge – Basic Medicaid**

- Allows enrollees option to choose between CCO and open card
- Only available to American Indian/Alaska Native individuals

#### **October 1 Enrollment totals 29,077 members**



28,265 on OHP Bridge -- Basic Health Program

812 people on OHP Bridge --Basic Medicaid

#### People will enroll in OHP Bridge over the next few years

#### People have moved from the **Oregon Health Plan** (Medicaid)

People with income 138-200% FPL were kept on OHP following the end of the public health emergency through a Temporary Medicaid Expansion (TME). Approximately 22,000 people moved from the TME to OHP Bridge on July 1. People will continue to move from OHP Plus in coming years if their income has increased at time of renewal.

#### People previously <u>Uninsured</u> can now enroll

Beginning July 1, OHP Bridge is open for new applicants who may not have had coverage previously.

#### People are moving from <u>Marketplace</u> plans

People currently covered in the Marketplace with income between 138-200% FPL can also move to OHP Bridge beginning July 1. People must update their application or apply directly through the ONE system; movement from the Marketplace will not be automatic and is expected to happen gradually.

## **Partner Training**

- OHP Bridge partner training is available **on-demand** at:
  - English <u>orhim.info/BridgeTraining</u>
  - Spanish <u>orhim.info/CapPuente</u>
- If you have not already done so, we strongly encourage you to take this prior to Open Enrollment beginning on November 1

#### **Immigration Changes: OHP Bridge and Marketplace**

On November 1, more individuals will be eligible for OHP Bridge and the Oregon Health Insurance Marketplace:

- People with Deferred Action for Childhood Arrivals (DACA) status
- People with pending applications for asylum
- And a few types of employment authorization that did not previously qualify

Healthier Oregon continues to offer coverage regardless of immigration status.

#### **Immigration Changes: OHP Bridge and Marketplace**

**Important note:** we are waiting on court decisions and this change may be delayed, blocked, halted in certain states, or even undone after launching in November.

- Upcoming hearing on **October 15 is the earliest we may know.**
- The Centers for Medicare and Medicaid Services (CMS) and <u>Oregon's plan is</u> to go forward and launch in November unless we hear otherwise.

Be on the lookout for updates, including training.

- We will provide an update on what is happening by October 30.
- <u>Track updates here</u>

#### Will Marketplace enrollees be required to move to OHP Bridge?

- People with Marketplace plans can keep their plan for up to two more years (2025 and 2026) if:
  - They agree to auto-enroll for the next plan year
  - And do not make any updates to their application.
- Updates include the following:
  - Changing contact information
  - Family size
  - Income
  - Etc.

#### Will Marketplace enrollees be required to move to OHP Bridge?

People enrolled in Marketplace plans who have experienced changes MUST update their application.

- Updates must be reported even if they cause people to move to OHP Bridge
  - If they do not update their application, they may lose eligibility for financial help or have to repay financial help they receive.
- Marketplace will not terminate coverage for anyone referred to the state for OHP Bridge.
  - Clients who are found eligible for OHP Bridge will need to contact the Marketplace to cancel their Marketplace plan.

#### **ONE system benefit start date error**

- Start date for <u>OHP Bridge Basic</u> <u>Health Program</u> is displayed incorrectly in the ONE Online dashboard.
  - ONE Online is showing OHP Plus start dates rather than the correct <u>future start date</u>.
- A fix is scheduled for October.
- This **does not** affect notices, which correctly display start dates.

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# Enrollment timelines for OHP Bridge – Basic Health Program (BHP) members

Individuals eligible for OHP Bridge – BHP are required to be enrolled into a CCO. The start date of their benefits will coincide with the effective date of their CCO enrollment:

• If determined eligible on or before the 15th of the month, OHP Bridge – BHP will begin on the first of the next month.

For example, the eligibility decision is made before November 15, BHP will begin December 1.

• If determined eligible on the 16th through the last day of the month, OHP Bridge – BHP eligibility will begin the first of the month following the next month.

# For example, the eligibility decision is made on November 16, BHP will begin January 1.

To learn more about coverage start timelines, see the toolkit at ohp.oregon.gov/bridge

# When will coverage start for OHP Bridge – Basic Health Program?



Individuals determined eligible before or on the 15th of the month will be enrolled on the first of the next month.

Individuals determined eligible on the 16th of the month or later will be enrolled on the first of the following month.

The timeline below shows an example of coverage dates for an individual who would be determined eligible in the month of October. Actual coverage dates will vary based on timing.

OCTOBER							
S	М	т	w	т	F	S	
	1	2	3	4	5	6	
7	8	9	10	11	12	13	
14	15	16	17	18	19	20	
21	22	23	24	25	26	27	
28	29	30	31				

NOVEMBER							
S	м	т	W	т	F	s	
				1	2	3	
4	5	6	7	8	9	10	
11	12	13	14	15	16	27	
18	19	20	21	22	23	24	
25	26	27	28	29	30		
11 18	12 19	13 20	14 21	15 22	16 23	27	

D	DECEMBER							
S	М	т	w	т	F	S		
1	2	3	4	5	6	7		
8	9	10	11	12	13	14		
15	16	17	18	19	20	21		
22	23	24	25	26	27	28		
29	30							

OHP Bridge – BHP start date is based on the day the individual is **determined eligible**, not the date the application was submitted timeliness can help!

# When will coverage start for OHP Bridge – Basic Medicaid?



OHP Bridge – Basic Medicaid follows the same start date and retroactive coverage rules as OHP Plus.

Coverage will start on the first day of the first month someone is eligible. This will often go back to the first of the month in which the application was submitted.

People who have unpaid medical bills in the past three months can request retroactive coverage.

The timeline below shows an example of coverage dates for an individual who applied any time in the month of October. Actual coverage dates will vary based on when someone applies.

JULY AUGUST		OCTOBER		
SMTWTFS	SMTWTFS	SMTWTFS		
1 2 3	1 2 3 4 5 6 7	1 2 3 4 5		
4 5 6 7 8 9 10	8 9 10 11 12 13 14	6 7 8 9 10 11 12		
11 12 13 14 15 16 27	15 16 17 18 19 20 21	13 14 15 16 17 18 19		
18 19 20 21 22 23 24	22 23 24 25 26 27 28	20 21 22 23 24 25 26		
25 26 27 28 29 30	29 30	27 28 29 30 31		
	S   M   T   W   T   F   S     1   2   3     4   5   6   7   8   9   10     11   12   13   14   15   16   27     18   19   20   21   22   23   24	S M T W T F S   1 1 2 3   4 5 6 7 8 9 10   11 12 13 14 15 16 27   18 19 20 21 23 24 24 25 26 27		

This graphic explains enrollment timelines for OHP Bridge – Basic Medicaid. This program is available to individuals who are American Indian or Alaska Native. For other members please refer to the OHP Bridge – Basic Health Program timeline graphic.

## **New OHP Bridge Materials**

- Additional outreach materials available in early October:
  - Flyers and Rack Cards in 14 languages
  - Social Posts in 7 languages
- Materials will be available on OHA Bridge webpage

 Limited English and Spanish print run of flyers available now <u>by request</u>, please contact your Regional Outreach Coordinator before the end of October!



# **OHP Bridge Advisory Committee (OBAC)**

OHA will launch an OHP Bridge Advisory Committee (OBAC) in the fall

- Purpose: To provide recommendations for the program and guide Trust Fund management, member outreach and communication; create a venue for reporting on federal negotiations and considering revisions to the BRG benefit.
- The OBAC is not a decision-making body
- The OBAC will include the following representation:
  - **Two** OHP Bridge Members
  - **One** Healthcare Provider from a Metro Area
  - **One** Healthcare Provider from a rural area or FQHC
  - **Two** representatives of Healthcare Organizations

- **Two** Consumer Advocacy representatives
- **One** health equity specialist
- **One** consumer navigator/assister
- **One** Tribal member representative

## **The OBAC: further information**

- OHA Announced the OBAC members earlier this week
- Additional information regarding the OBAC can be found at the OHP Bridge Website under the OHP Bridge Advisory Committee, or by visiting these links:

OBAC English webpage:

https://www.oregon.gov/oha/hsd/ohp/pages/obac.aspx

OBAC Spanish webpage:

https://www.oregon.gov/oha/hsd/ohp/pages/obac-es.aspx

# **Question Response**

## **Assister/Community Partner Inquiries**

- Assisters and community partners can submit questions to the OHP Bridge team in three primary ways:
  - through their Community Partner Outreach Program (CPOP) ROCs
  - via the OHP Bridge Email (<u>OHPBridge@oha.Oregon.gov</u>)
  - <u>Via the Oregon Health Update registration form</u>
  - Attending these monthly office hours.
- Answers will be provided during the office hours each month.
- Written responses will be sent out to the original inquirer following the office hours.

## **Question: How to Apply**

#### Question:

I have a client over 65 in the income range for bridge—how can they apply?

#### Answer:

Your question begins with a person who is 65 or older – OHP Bridge is for people age 19 or older and under age 65.

There is no specific application to apply for only OHP Bridge. When you apply for medical using either the paper Application for Oregon Health Plan Benefits, the ONE Online Portal, or over the phone, the individual will be considered for all medical programs, including those programs for people 65 and older.

### **Question: Income Verification**

#### Question, continued:

I have a client over 65 in the income range for bridge—how can they apply, and what income verification is needed for social security income and a family trust?

#### Answer, continued:

We do not always need the person to provide verification, due to our verification rules and because the ONE system attempts to check other electronic sources to obtain this verification. If we need verification, the applicant will receive a notice with what is needed. This notice includes examples of what can be provided for each type of income we need verification for. Examples could include a social security award letter, or submitting tax documents from the trust, or a written statement/other documents verifying the amount, source, and frequency.

### **Question: Income Ranges**

#### Question:

Are OHP Bridge's 138-200% FPL income limits inclusive or exclusive of 138 and 200? Similarly, I see that OHP/Medicaid serves folks "up to" 138 FPL, but is that 138 inclusive? The trouble I run into is figuring out if someone is exactly at 138 FPL, which program they would be eligible for, or would they be eligible for both?

#### Answer:

Members with monthly income up to or exactly at 138% FPL (rounded up to the nearest dollar), and no higher, would potentially be eligible for OHP Plus. If they're the slightest amount over 138% fpl, they'd potentially be eligible for OHP Bridge. If they're the slightest bit over 200% fpl annually, for instance someone at 200.1% FPL, they would not be eligible for OHP Bridge—Basic Health Program.



# Share your feedback with us!

Share your questions, comments and concerns about the end of the COVID-19 Public Health Emergency.

Our goal is to funnel all feedback to a single location where we can *prioritize and resolve urgent equity issues* while also tracking trends to enact changes across state systems.

Partners can share feedback with us at: feedback@odhsoha.oregon.gov

Or directly through our <a>Feedback Webform</a>







