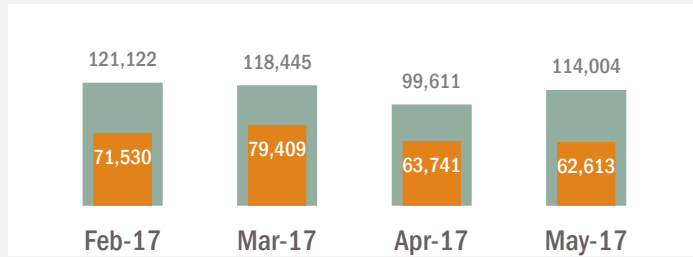


June 15, 2017 Member Services Dashboard

OHP Call Center Monthly Averages (all OHP lines)

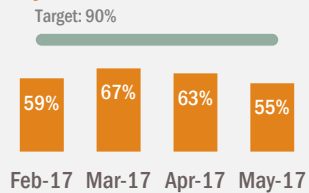
Total daily calls received and answered.



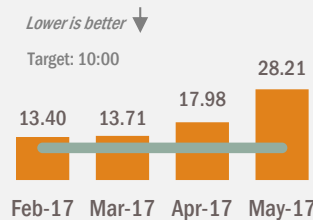
The annual renewal cycle started in April 2017, causing call volumes to increase.

It also impacts average and maximum wait times, with 22% of calls to the OHA Call Center waiting for more than 30 minutes.

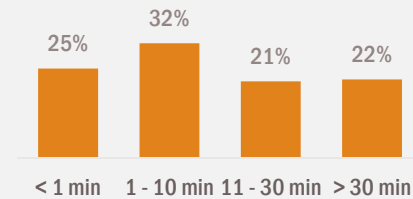
The percentage of calls answered decreased into May...



...the average wait time (minutes) increased...



57% of calls in May were answered in 10 minutes or less.*



* does not include calls to vendor call centers

...and the maximum wait time (minutes) increased.*



ONE Application Process

	Processed and determined	Awaiting center processing	Awaiting client response to be processed
Feb-17	37,931	28,998	14,548
Mar-17	35,570	28,830	12,785
Apr-17	29,541	19,788	16,435
May-17	28,891	12,360	14,642

The application backlog - the number of applications older than 45 days that are awaiting an eligibility determination - was completed in May.

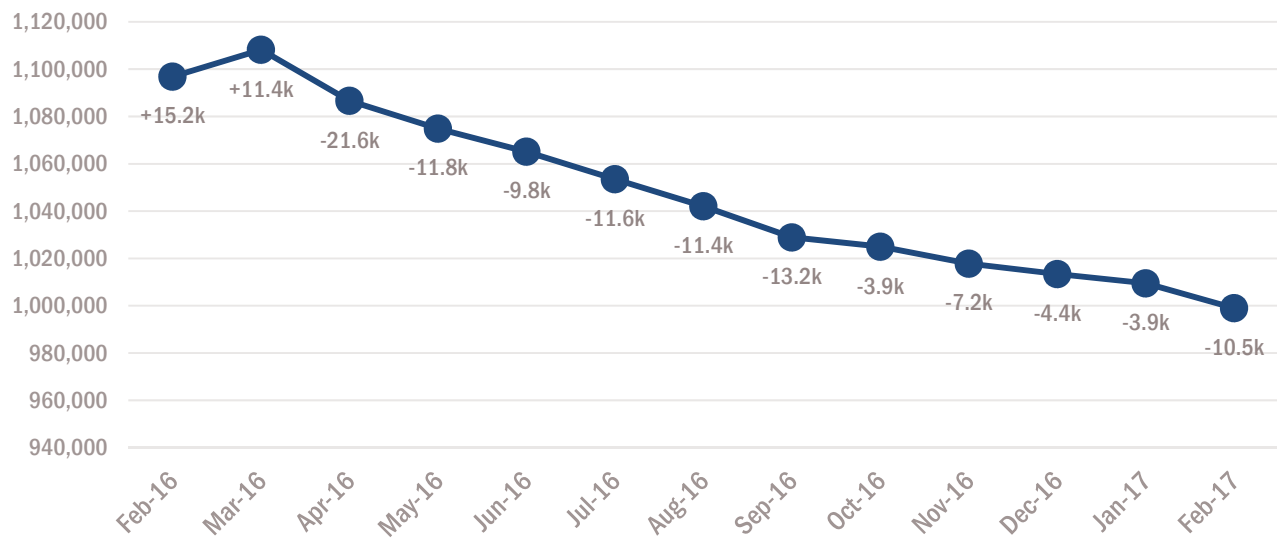
Applications for annual renewal increased significantly beginning in April.

June 15, 2017 Member Services Dashboard

Total Oregon Health Plan Enrollment

Medicaid enrollment declined 10% between March 2016 through February 2017 – or about 109,000 Oregonians. From the failure of Cover Oregon until March 2016, Oregon delayed many annual renewals while it built a new eligibility system. OHA launched the new ONE System for eligibility in March 2016 and began a laborious process requiring all OHP members to submit new paper applications to ensure accurate data was entered into the new system. OHA completed its first renewal cycle in March 2017, enrolling more than 733,695 (or 72% of the total population) into the ONE System. DHS continued to process renewals for individuals in the Child Welfare Program and Aging and People with Disabilities Program through a separate process.

**excludes Citizen-Alien Waived Emergency Medical (CAWEM), Breast and Cervical Cancer Treatment Program (BCCTP) and Qualified Medicare Beneficiary (QMB)*



This chart marks enrollment actuals finalized 90 days after the month ends to allow for retro-eligibility enrollments. Individuals may gain or lose OHP coverage within the month.



Source: DSSURS, 6/2/17.