JOINT TASK FORCE ON UNIVERSAL HEALTH CARE (SB 770)

TECHNICAL ADVISORY GROUP: ELIGIBILITY, COVERED BENEFITS, AND AFFORDABILITY DRAFT PROJECT CHARTER

KEY TASKS

(PLAN ELEMENTS K, M, N)

- 1) Prepare benefit coverage criteria to guide the Board in determining which health care services are necessary for the maintenance of health, the prevention of health problems, the treatment or rehabilitation of health conditions, and long term and respite care.
- 2) Address issues related to the provision of services to nonresidents who receive services in this state and to plan participants who receive services outside this state.
- 3) Develop guidance on cost containment measures (deductibles, premiums, copayments, or other enrollee means-tested cost-sharing mechanisms), and the effect of these measures on equitable access to quality diagnosis and care.
- 4) Highlight existing health disparities related to eligibility, benefits and affordability and propose Task Force considerations for achieving health equity (e.g., ensuring benefit coverage needed by marginalized communities; proposing policies to close enrollment gaps among BIPOC and other marginalized populations).
- 5) Identify areas of greatest potential impact to consumers and develop specific questions to elicit feedback from the Consumer Advisory Committee (CAC).

ROLES & RESPONSIBILITIES

Staff will prepare meeting agendas, identify appropriate background materials, develop slide presentations (as needed), summarize key discussion and decisions, and assist in preparing draft policy proposals for consideration by the Task Force based on the group's discussions. TAG leads will assist with TAG meeting facilitation and serve as the TAG liaison, reporting back to the full Task Force at monthly meetings.

PROCESS CONSIDERATIONS & INTERDEPENDENCIES

Members are required to explore and integrate evidence-based strategies in developing proposals, as well as identify potential advantages and disadvantages for each proposal. Members should explicitly consider the interconnectedness of each TAG when developing proposals and the extent to which proposals influence and/or are influenced by other TAGs.

DELIVERABLE

A slide deck that reflects the TAG's discussion, key decision points, and proposal(s) for the Task Force to consider. Each TAG must identify consumer issues for the Consumer Advisory Committee to review and offer guidance to the full Task Force.

SUBJECT MATTER EXPERTISE

Staff will invite national and local experts with relevant knowledge about eligibility, benefits, and consumer affordability. Experts will include, but are not limited to, individuals with expertise in public and private insurance benefits, consumer out-of-pocket expenses, and health care service access.

TIMELINE & MEETING FREQUENCY

Technical Advisory Group (TAG) will start in November 2020 and run through January 2021 with approximately 4-5 meetings in total; meetings will be scheduled every 2-3 weeks. If additional

meetings are necessary, the lead will communicate any requests for further meetings or an extension to the timeline directly with the Task Force. Also, each TAG is responsible for communicating to the Task Force any proposed modifications to its scope including the assigned tasks.

MEMBERSHIP & STAFF

Lead: Glendora Claybrooks

Members: Michael Collins, Zeenia Junkeer, Ed Junkins, Sharon Stanphill

Staff: Sarah Knipper (Oregon Health Authority)

HB 3260 (2013) FINDINGS

The following excerpt from HB 3260 (2013) offers a set of values that may inform all Task Force work:

The Legislative Assembly finds that the best system for the delivery and financing of health care in this state will be the system that:

- Provides universal access to comprehensive care at the appropriate time.
- Ensures transparency and accountability.
- Enhances primary care.
- Allows the choice of health care provider.
- Respects the primacy of the patient-provider relationship.
- Provides for continuous improvement of health care quality and safety.
- Reduces administrative costs.
- Has financing that is sufficient, fair and sustainable.
- Ensures adequate compensation of health care providers.
- Incorporates community-based systems.
- Includes effective cost controls.
- Provides universal access to care even if the person is outside of Oregon.
- Provides seamless birth-to-death access to care.
- Minimizes medical errors.
- Focuses on preventative health care.
- Integrates physical, dental, vision and mental health care.
- Includes long term care.
- Provides equitable access to health care, according to a person's needs.
- Is affordable for individuals, families, businesses and society.