
Community and Partner Workgroup (CPWG)

Meeting 5
July 28, 2022

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Agenda

Welcome and introductions

Updates and Follow up

CPWG Member open space

Debrief and discussion on communications plan and specific populations of focus

Discussion on redetermination priority populations and sequencing

Meeting close and next steps

Introductions

Starting with CPWG members then state staff

Please share your:

- Name
- Pronouns you use
- Any needs you might have to help you participate fully

Updates and Follow Up

Updates and follow up on issues raised

CPWG Member Open Space

Open time for members to raise questions, present topics they want this group to look into, or provide input.

Communications Plan debrief and discussion

Communications plan

Reviewed communications plan during last meeting

Questions: What were you most excited to see about the plan?

What do you think will work well?

What did you expect to see that wasn't there?

What issues do you see that we need to consider?

Priority Populations and Redetermination Sequencing

Renewal Approaches to support continued access to services

Approaches to support continued access to services



Front-load redeterminations

Groups likely to remain eligible and need fewer interventions and verifications to maintain eligibility.



Back-load redeterminations

Groups that we want to provide maximum protections after the Public Health Emergency ends *and* people likely eligible for the new temporary Medicaid program.



Spread throughout the redetermination process

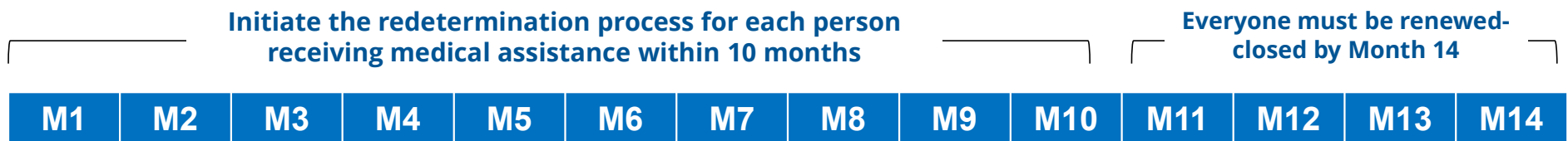
Groups that may need more support, either to remain enrolled in OHP or move to a different type of coverage.



- Practical considerations:
 - Months with fewer staff & agency and community resources (Nov, Dec, Jan)
 - Marketplace enrollment

Workgroup recommendation questions and considerations

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



Population groups that can have one of the three approaches taken with them (8 groups)

CPWG has opportunities to recommend approaches to prioritize **WHEN** these populations go through redeterminations & additional communications and programmatic support we should implement.



OHP Plus and Long-Term Care Services 1

At least one individual receiving OHP Plus and Long-Term Care Services whose income is over the regular OHP limits – they're eligible at a higher income threshold because of their Long-Term Care Service needs.



OHP Plus and Long-Term Care Services 2

At least one individual who is eligible for OHP Plus and is also receiving Long Term Care Services.



Pregnancy and newborn

At least one individual receiving program benefits indicating that they are pregnant or within the postpartum eligibility period, or indicating that they're a child under the age of 1 year



Parent Caretaker:

At least one individual receiving program benefits which indicate they are a parent or caretaker relative of a child in their home

Population groups that can have one of the three approaches taken with them (8 groups)

CPWG has opportunities to recommend approaches to prioritize **WHEN** these populations go through redeterminations & additional communications and programmatic support we should implement.



Child Benefits

At least one individual receiving Medicaid under the age of 19



Supplemental Security Income benefits

At least one individual receiving Supplemental Security Income benefits



Medicaid Savings Plan

at least one individual not receiving Oregon Health Plan coverage, but receiving assistance paying for their Medicare premiums



Others

Any case with no individuals captured by the groups listed above



Recommendations SCOPE: CPWG can make communications and programmatic recommendations about additional populations, however additional populations cannot be added to redeterminations timeline

Populations with additional considerations

CPWG has opportunities make additional recommendations about WHEN these populations go through redeterminations and HOW we can prioritize someone to ensure we meet their unique needs

- **Bridge Plan:** at least one individual likely to be eligible for the Bridge Plan; they meet all non-financial eligibility criteria, with income below 200% FPL
- **COVID Exemptions:** at least one individual who is identified as receiving a financial or non-financial COVID exemption, indicating that they've maintained eligibility solely due to PHE protections.
- **Presumptive Disability Population:** at least one individual who is receiving presumptive disability benefits and have not provided verification of disability, but have remained open due to the PHE
- **American Indian/ Alaska Native:** at least one individual who is identified as American Indian/Alaska Native
- **Houseless Population:** at least one individual address, which is identified as 'No Permanent address
- **SNAP:** at least one individual who is receiving both medical and SNAP benefits
- **Non-English Language:** at least one individual who indicates that their primary language is something other than English
- **Others:** individuals not captured by the groups listed above

Stretch break

- Let's take a 5-minute break – make sure to mute your microphones



Population Sequencing: OHP Plus and Long-Term Care Services 1

At least one individual receiving OHP Plus and Long-Term Care Services whose income is over the regular OHP limits – they're eligible at a higher income threshold because of their Long-Term Care Service needs.

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?

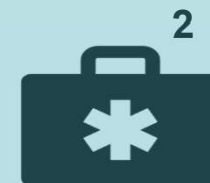


OHP Plus and Long-Term Care Services 1

Population Sequencing: OHP Plus and Long-Term Care Services 2

At least one individual receiving OHP Plus and Long-Term Care Services whose income is over the regular OHP limits – they're eligible at a higher income threshold because of their Long-Term Care Service needs.

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



OHP Plus and Long-Term Care Services 2

Population Sequencing: Pregnancy and newborn

At least one individual receiving program benefits indicating that they are pregnant or within the postpartum eligibility period, or indicating that they're a child under the age of 1 year

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



Pregnancy and
newborn

Population Sequencing: Parent Caretaker

At least one individual receiving program benefits which indicate they are a parent or caretaker relative of a child in their home. Generally, under 55% of the FPL. If lose eligibility they move into adult program

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



Parent Caretaker

Population Sequencing: Child Benefits

At least one individual under the age of 19. This is the Medicaid child with income under 138% of Federal Poverty Level; this is not Children's Health Insurance Plan (CHIP where child eligibility is up to 305%); SNAP likely companion

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



Child Benefits

Population Sequencing: Supplemental Security Income Benefits

At least one individual receiving Supplemental Security Income benefits

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



Supplemental Security
Income Benefits

Population Sequencing: Medicare Savings Plan

Medicare Savings Plan: at least one individual not receiving Oregon Health Plan coverage but receiving assistance paying for their Medicare premiums. State pays portion or entire Medicaid premium

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



Medicare Savings Plan

Population Sequencing: Other

Any cases with individuals not part of the listed groups

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



Other

Population Sequencing Subgroup: Unhoused

Any cases with individuals not part of the listed groups

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?

Unhoused

Population Sequencing

Subpopulations:

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?



Post-Public Health Emergency Eligibility Renewals Planning

Vivian Levey



Throughout the Pandemic, OHP Members Have Maintained Their Health Coverage

Family First Coronavirus Response Act

- Provides continuous Medicaid coverage for the duration of the federal public health emergency (PHE).
- Removes administrative barriers to Medicaid enrollment.

When the PHE ends, states will have 14 months to redetermine eligibility for all 1.4 million people on the Oregon Health Plan.

Oregon must **initiate the redetermination process for each person receiving medical assistance within 10 months** to allow the entire process to be completed by the end of the 14-month period.

The Goal: Preserve Benefits

1

Ensure **all people and families eligible for benefits offered through the ONE system receive and continue to receive services in a timely manner** without interruption

2

Give those **no longer eligible for benefits clear direction and coordination** of additional resources

3

Give those who assist people receiving benefits **clear information about how they can help**



27

What We Know

- The Department of Health and Human Services (HHS) officially extended the PHE by 90 days on July 15, 2022.
- The soonest the PHE is set to expire is October 15, 2022.
- States will be given 60 days advance notice prior to the end of the PHE confirming that the expiration will occur on that date.

Phased Renewals by Population

OHP members grouped into populations:

- Front-load easier cases (i.e., complete information) to process quickly once renewals begin
- Back-load or spread out higher risk cases to allow more time for outreach

Examples of higher risk populations:

- People with long-term services and supports in residential care facilities
- People with no permanent address
- People who have indicated 'spoken or written language other than English'

System and process changes to support people

Self-service option through the ONE Portal

- Update to the ONE Applicant Portal allows members to make non-eligibility related updates without having to formally report a change and trigger a redetermination on member's eligibility

Partnering with CCOs to gather contact information updates directly

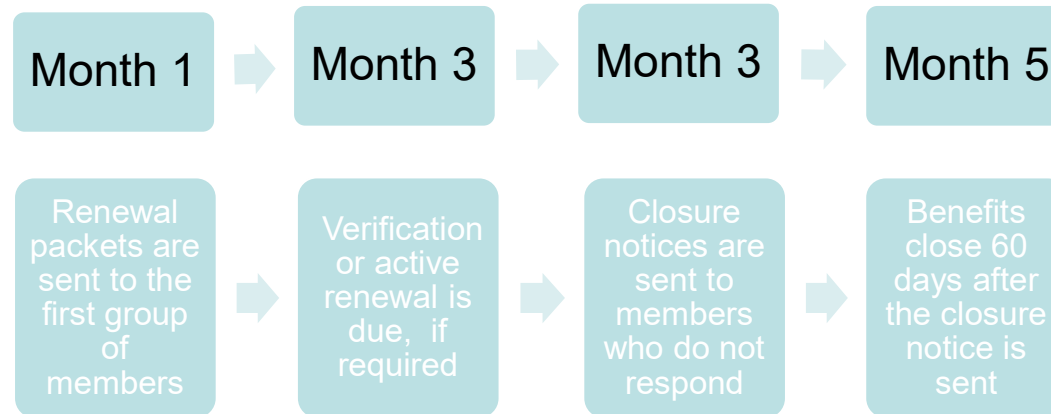
- Pending waiver for approval. May begin receiving updates directly from CCOs in August

Extra time to respond to renewals

- During the PHE Unwinding, per HB 4035, members will have 90 days to provide any information required to complete their renewals

Member Experience During PHE Unwinding

Redeterminations will begin the month after the PHE ends



Questions



32

Upcoming Meeting dates

Optional work session: **Thursday, August 11th 4:00-5:00pm**

Topic: discuss provider toolkit and early notice letter

Mtg 6: **Thursday, August 18th, 3-5pm**

Topics: Discussion on communications plan recommendations

Mtg 2: **Thursday, September 15th, 3-5pm**

Topics: TBD

*October 13th, 3-5pm

**Meeting cadence for September on has yet to be decided.

Thank you!

Feel free to reach out if you have any questions or need any support.