

WHO	Community Partner Workgroup	DATE	Thursday October 13, 2022 3-5pm	
FACILITATOR	Michael Anderson-Nathe	NOTE-TAKER	Jeremiah Keisling	
WORKGROUP ATTENDEES	<input checked="" type="checkbox"/> Beth Englander <input checked="" type="checkbox"/> Elizabeth Fox <input checked="" type="checkbox"/> Natalia Anand <input checked="" type="checkbox"/> Sheila Anders	<input checked="" type="checkbox"/> Thomas Browne <input checked="" type="checkbox"/> Tara Gray <input checked="" type="checkbox"/> Jackie Leung <input type="checkbox"/> Stephanie Castano	<input checked="" type="checkbox"/> Erin Fair Taylor <input checked="" type="checkbox"/> Lavinia Goto <input type="checkbox"/> Rosetta Minthorn <input checked="" type="checkbox"/> Gladys Boutwell	<input checked="" type="checkbox"/> Lourdes Alcala <input checked="" type="checkbox"/> Anji Djubenski <input type="checkbox"/> Nashoba Temperly
OHA & ODHS ATTENDEES	<input type="checkbox"/> Maria Castro <input type="checkbox"/> Jillian Johnson <input checked="" type="checkbox"/> Hilde Hinkel	<input checked="" type="checkbox"/> Sarah Dobra <input checked="" type="checkbox"/> Jeremiah Keisling <input checked="" type="checkbox"/> Liz Weber	<input type="checkbox"/> Megan Auclair <input checked="" type="checkbox"/> Miranda Amstutz <input checked="" type="checkbox"/> Emily Burnett	<input checked="" type="checkbox"/> Chiqui Flowers <input checked="" type="checkbox"/> Micheil Wallace
Guest presenters	Rebecca Knight-Alvarez, Dawn Mautner, Mike Savara, Matthew Rasmussen, Lise Stuart, Vivian Levy, Ashley Marshall			

Mtg Goals:

1. Complete CPWG recommendations on redetermination sequencing for Child Benefits population and COVID exemption subgroup
2. Receive CPWG recommendations on programmatic, data, and communication approaches for unhoused populations

Agenda

TOPIC	TIME	LEAD	PURPOSE
1. Welcome and Introductions	10 mins	Michael	<ul style="list-style-type: none"> Name, pronouns, and any access needs they have to fully participate
2. Updates and follow up	10 mins	Sarah	<ul style="list-style-type: none"> Follow up on any items from previous meetings
3. CPWG member open space	15 mins	Michael	<ul style="list-style-type: none"> Provide time on the agenda at each meeting for members to raise topics, provide relevant updates, identify discussions they want to have, etc.
4. Redetermination sequencing for Child Benefits and COVID exemptions	20 mins	Sarah	<ul style="list-style-type: none"> Continue conversation on redetermination sequencing on Child Benefits and COVID exemption subgroup
5. Stretch break	5 min		<ul style="list-style-type: none">
6. Deep dive on unhoused populations: <ul style="list-style-type: none"> • COVID Outreach: lessons learned • Overview of data • CPWG discussion 	55 mins	Rebecca Dawn CPWG DHCS ODHS	<ul style="list-style-type: none"> • Overview of COVID vaccine outreach to unhoused populations and lessons learned • Discussion on how data can be used • Solicit CPWG recommendations for program and outreach data and possible dashboard for unhoused population

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7. Meeting close and next steps

5 mins

Michael

- Discuss future meetings and agendas

Notes

Welcome and Introductions

- CPWG members introduced themselves and answered the following prompt, “We are focusing on programmatic, outreach, and communication approaches and concerns for Limited English-Speaking Populations (LEP) at our 10/27 CPWG meeting. Are there any specific topics, questions, or concerns you want us to be prepared to speak to?”
 - Any lessons learned with working with LEP from Cover all Kids or Healthier Oregon expansion?
 - Any lessons learned from working with refugee and immigrant populations?
 - What are LEP enrollment strategies and organizational practices that have worked well. What best practices are already in place?
 - How do OHA and ODHS connect with and support farmworkers who need different ways of outreach (such as different hours, etc.) beyond language assistance.
 - A question as to workgroup can also discuss enrollment strategies for individuals who are deaf, hard of hearing or have other disabilities.
 - Answer: Workgroup can cover this during disability and accessibility discussion in future workgroup.
 - Can we talk about communicating with indigenous populations and any existing strategies or supports to support enrollment for individuals who speak indigenous languages.?
 - What populations and what areas; what areas; what supports are there already in place. If there are not any, how can CPWG help advance this?
- OHA and ODHS staff introduced themselves
- Guest speakers were asked to hold their introductions for when they were presenting

Updates and Follow Up

- Follow up to question from last meeting about whether the state can treat the returned mail as unhoused population or no address?
 - No, our system can't do that as the system we use to send mail and they system we use to track member information is not the same and doesn't interface. Unfortunately, we can't use returned mail as a proxy for unhoused and use it to influence redetermination sequencing, but we can use this information to identify individuals we need additional outreach efforts. Our plan is to combine a list of returned mail with any information on unhoused populations and provide that to our CCO and community partners to encourage them to do additional outreach efforts.
 - An additional question came up with how will the state encourage or enforce CCOs to do this additional outreach?
 - The state will not have any contractual authority to make CCOs do this outreach, but our partnership so far makes us confident that CCOs will want to do this and support maintaining people on OHP.

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- Through partnership with CCOs to update member addresses, the state will also be able to support regions where additional support might be needed to help members update addresses.
- Follow up to question from last meeting about whether the state can share information with Social Security to conduct extra outreach.
 - No. The state has explored this in the past and the Social Security Administration (SSA) does not allow bi-directional information sharing from the ONE Eligibility System to the SSA.
 - However, the ONE Eligibility System can receive information from the SSA. Eligibility workers can, when working with a member verify if SSA address and name are the same as what is in the ONE Eligibility system.
 - This verification system is also helping to ensure that legal names in the ONE Eligibility System and SSA are the same. This is particularly helpful for dual eligible Medicare-Medicaid members who have had name discrepancies in the past. With this verification system, if there is a discrepancy in names, that will have to be addressed before ONE System enrollment is complete.
- A request to discuss cultural implications and impacts regarding names (special characters, order, hyphenation, cultural understanding) and how they show up in dominant systems that may not reflect cultural norms for names or western naming convention/practices to our LEP conversation.
 - How are hyphenated names treated within the redetermination process and how can this potentially impact medical care if members' last names are not found and they are denied medical care. Can OHA and ODHS speak to how things are entered.
 - Answer: OHA uses spaces instead of hyphens so this does cause an issue at times. This will be followed up on more in writing for the workgroup.

CPWG Member Open Space

- No recommendations for new topics

Redetermination sequencing for Child Benefits and COVID exemptions

- We then focused on completing CPWG discussion and recommendations on redetermination sequencing for the final two populations: Child Benefits and COVID exemptions.
- *Child Benefits*: Current planned approach is to Front-load
 - Oregon's new approved 1115 Medicaid Waiver allows continuous OHP eligibility for children from birth up to age six. Children age 6 to age 19 will have two years continuous eligibility. This will be implemented in July 2023.
 - Redeterminations on any children birth through age 19 conducted before new rules are implemented will get a 1-year renewal and then at next renewal date, will automatically be transferred to continuous enrollment up to age 6 or to a 2-year eligibility if 6 and over. (this means that they will not need to do a new enrollment if redetermination occurs before the July 2023 date.)
 - There is exploration to offer continuous eligibility for individuals above 19, but this is not yet approved and will need State budget approval.
 - A question was raised on whether the continuous eligibility applies to the whole household or just the child?

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- If continuous eligibility for people over 19 is not approved, it would just apply to the child and adults in the household would still need to go through redeterminations each year.
- Workgroup question: For youth who have aged out of child benefit (e.g., 19 year old), but are not eligible for another plan where would they go. They would likely go to temporary Medicaid program
 - Workgroup recommendation: back-load any 19 year olds' still on the child benefit.
- **CPWG agrees this groups should be Front-Loaded with the exception that households with kids 19 or older be backloaded.**
- *Covid Exemptions*
 - CPWG provided further explanation on what this population is: these are people who reported a factor that would make them ineligible for OHP but due to the Public Health Emergency – they maintained coverage. A flag was put in their file to alert the state that this group would likely no longer be eligible once the PHE ended. In some cases, this is because the group joined a marketplace plan or got employee covered care.
 - Currently planned approach is to Front-Load
 - However, there are arguments for each type of approach.
 - If we front load them, we might have more time to help them find a new plan and transition to the Marketplace earlier, so they have more time to meet any out-of-pocket deductibles for the year
 - If we backload them, they will maintain coverage for as long as possible (this only benefits those that will not have other options)
 - If we spread them out, this might help marketplace enrollers, so they won't be overwhelmed
 - Individuals have 60 days from time of loss of coverage to find new coverage.
 - Marketplace recommendation: spread throughout except and pause Sept – Dec to get new to Marketplace enrollees a full coverage year on their private plan as much as possible + regular Marketplace open enrollment season (Nov 1 – Jan 15)
 - When would individuals start losing coverage?
 - People get 90 days to respond to a request for information. If they don't respond or are found to be ineligible, they get a 60-day loss of coverage notice. OHP only terminates coverage at the end of the month.
 - There was some discussion on if we were to use a spread-throughout approach to this group, how would be ensure it was equitable (how do we decide who gets redetermined when)?
 - **Discussion ultimately led to an agreement that this population might not work for a vote or single decision since there are so many complicating factors. Instead, the proposal was to support the state to use a variety of approaches with the goal/intention of maintaining as many people on insurance as possible**
 - **CPWG agrees to pass on the vote for this group with the understanding that the intent is more important and asks that sequencing ensure coverage principles are followed.**

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Unhoused Populations Program, Operational and Communication recommendations to support redeterminations

- Due to time shortages, the state said they would share information on existing community feedback they have already collected regarding unhoused populations with the CPWG via email. Additionally, CPWG members Tara Gray and Anji Djubenski agreed to share their experiences working with unhoused populations at the 10/27 CPWG meeting when we pick this conversation back up.
- We then heard from several OHA and ODHS guest speakers:
 - Oregon Department of Human Services: Ashley Marshall and Matt Rasmussen
 - Presented brief information on Self Sufficiency programs and youth homeless programs and opportunities or recommendations for tailoring outreach to unhoused populations
 - SNAP, Employment Related Day Care, Temporary Assistance to people experiencing Domestic Violence (TA-DVS), Temporary Assistance to Needy Families (TANF), and Youth Experiencing Homelessness Program (YEHP)
 - Additional information specific to youth experiencing homelessness:
 - 1 in 30 young people under age of 18 in a year experience homelessness in a year; 1 in 10 under age of 24.
 - Youth homelessness is not the same as adult homelessness and requires different strategies and approaches. Connectedness with youth experiencing homelessness can be very challenging and lack of trust and misinformation are very high.
 - Youth experiencing homelessness can be hard to find:
 - They are often trying to fly under the radar to avoid the foster care system or staying out of shelters
 - Some of them may be bouncing around between family and friends and may not consider themselves homeless
 - Some staff recommendations for programmatic, outreach, and communication considerations include:
 - Develop intentional youth-centered approaches to ensure medical coverage for youth experiencing homelessness.
 - Enlist young people with experience in homelessness in creating outreach materials or plans to ensure that it is youth friendly. Young people should be compensated for their time and efforts on this.
 - Support schools and other organizations serving youth in conducting outreach to young people
 - Consider engaging youth serving agencies to get their recommendations on how best to reach and serve youth experiencing homelessness
 - Community Action Programs – Mike Savara, Oregon Department of Housing and Community Services
 - Community Action Programs – works with homeless service providers across the state to administer homeless services and resources

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- Happy to come back at a future meeting to talk more about this network.
- Initial recommendation – figure out ways to support homeless service providers with assisting with outreach and redetermination....for example:
 - Find ways to allow staff at shelters to check to see if someone has active Oregon Health Plan coverage and how to do redetermination
 - Is there a way to build and fund cross-systems supports to support access to Medicaid? Maybe provide funding to homeless service providers to assist with outreach and enrollment
- HUD Continuum of Care Programs – Lise Stuart
 - There are 8 continuum of care programs across our state that are charged with coordinating regional responses to housing crisis and HUD services
 - These could be potential partners for sharing information and resources and to assist with outreach to populations experiencing homelessness.

Next Steps:

- Unfortunately, we ran out of time but agreed to continue this conversation at the 10/27 meeting
- We will also focus on Limited English-Speaking Populations (LEP).
- There will be 1 meeting in November and 1 in December