

Universal Health Plan Governance Board

Objectives, Tasks and Deliverables
April 2024 – September 2026

Phase 1: Establish Universal Health Plan Governance Board Foundation

Objective: To establish a working foundation and administrative structure of the Universal Health Plan Governance Board that adheres to the values and principles outlined in SB 1089 and considers the recommendations of the Task Force on Universal Health Care, including the recommendation to establish a single payer health care financing system.

Timeline: April – August 2024

Tasks:

- Build understanding of single-payer efforts in other states
- Orientation to health coverage and cost containment efforts currently underway in Oregon
- Review values and principles in SB 1089 and discuss need for additional values and/or principles
- Build understanding of Joint Task Force Recommendations
- Short-term workgroup to review and recommend to the board any additional principles

Deliverables: [SB 1089 Section 2(3) a, b, and d]

- Board approved work plan
- Board approved charters for four committees of the board – Finance, Plan Design and Expenditures, Operations and Community Engagement
- Outreach, application and review process for non-board members to serve on the four committees
- Joint Task Force Final Report recommendations presentation to the Board

Phase 2: Proposal Development

Workstream #1 – Community Engagement

Objective: To listen and engage with interested parties and communities throughout Oregon before, during and after the proposal development process. Specifically listen to large and small employers, health care providers at all levels, community based

organizations (CBOs), federally recognized tribes in Oregon, and existing boards, commissions, and councils concerned with health care and health insurance. Engage with regional organizations to identify strategies to reduce the complexities and administrative burdens on participants in the health care workforce and to otherwise address workforce challenges.

Timeline: July 2024 – March 2026

Tasks:

- Establish a Community Engagement Committee
- Review Joint Task Force Final Report's appendices on community engagement, understand existing feedback that communities have given and identify gaps in engagement including, but not limited to, behavioral health consumers and providers
- Identify strategies to engage with communities and stakeholders using existing structures and meetings
- Engage with key partners including: federally recognized tribes in Oregon, businesses, Providers, Clinics, CCOs, community-based organizations (CBOs), disability-led organizations and insurance carriers
- Develop plan for general public outreach to engage throughout the Finance and Operations committees
- Engage with small and large businesses particularly in the development of the revenue and finance development of the Universal Health Plan
- Present feedback received through community engagement efforts to the Governance Board committees and board to inform decisions

Deliverables: [Section 2(3) f, g, h]

- Community engagement outreach plans for business, health care industry and health care consumers throughout Oregon
- At a minimum, present workstream recommendations to relevant community partners following each workstream to get feedback on recommendations prior to board review

Workstream #2 – Communications

Objective: To develop plain language materials, and materials in additional languages to communicate the progress and final Universal Health Plan. Develop messages, talking points and one-pagers in support of the transition to a Universal Health Plan.

Timeline: September 2024 – March 2026

Tasks:

- Identify communication materials needed and develop strategies for using the materials
- Identify the best messages to communicate the value of a Universal Health Plan

Deliverables:

- Develop a communications plan, including a messaging strategy, that includes materials – PowerPoint, talking points, and one-pagers – developed at major benchmarks of the project available for outreach and community engagement
- A minimum of ten presentations of the comprehensive plan to finance and administer a Universal Health Plan open to communities throughout Oregon to hear the final work prior to submission to the legislature
- Create a dissemination plan to the final report to ensure full public knowledge

Workstream #3: Financing the Universal Health Plan

Objective: Design a unified financing structure for the Universal Health Plan, including creating a Universal Health Plan Trust Fund in the State Treasury with sufficient reserves. Study and address the impacts of the Universal Health plan with respect to specific types of employers and households and consider funding mechanisms within context of prospective of Employee Retirement Income Security Act (ERISA) challenges.

Timeline: July 2024 – August 2025

Tasks:

- Establish Finance and Revenue Committee
- Review and understand current health spending in Oregon
- Develop an annual Universal Health Plan cost target that can be supported with new revenue and existing health spending
- Review revenue options to pay for universal health plan as outlined in the Joint Task Force Report
- Describe the impact of revenue or taxes on large and small businesses and households
- Identify required startup costs and plan reserves and develop strategies for building the needed reserves

Deliverables: [SB 1089 Section 2(3) i and j]

- Unified financing strategy for the Universal Health Plan that may include an income tax, a payroll tax, or other options that take into considerations ERISA and has support from large and small employers
- Analysis of the impact of Universal Health Plan on Oregon's economy

Workstream #4 – Plan Design and Expenditures

Objective: Review any needed changes from the Joint Task Force recommendations to benefits, eligibility and provider reimbursement plan design to stay within cost estimates and revenue projections determined by the Finance Committee.

Timeline: September 2024 – November 2025

Tasks:

- Review benefit plan outlined in the recommendations of the Joint Task Force Report
- Update expenditure estimates on the plan designed by the Joint Task Force
- Evaluate benefit plan and provider reimbursement plan relative to cost targets outlined by the Finance and Revenue Committee
- Review and discuss options for cost containment in a Universal Health Plan
- Identify strategies to address quality of care for consumers
- Discuss workforce needs and develop recommendations to meet health care provider and other workforce needs in the Universal Health Plan

Deliverables: [SB 1089 Section 2(3) d, k]

- Final recommendations on Universal Health Plan benefits, eligibility, provider reimbursements, cost containment strategies
- Financial modeling and actuarial analysis of various plan options that include expenditures and savings

Workstream #5 – Operations

Objective: Design the Universal Health Plan administrative structure based on recommendations from the Plan Design and Expenditures committee, and approved by the Board. Identify the statutory authority and information technology infrastructure needed for plan operations and identify potential interim strategies and/or legislation needed to transition to Universal Health Plan. Engage with the Governor's Office, the Oregon Health

Authority and federal authorities to ascertain and describe the necessary waivers. Identify strategy for obtaining necessary federal waivers.

Timeline: September 2024 – December 2025

Tasks:

- Establish Operations Committee
- Review other public corporations in Oregon and understand administrative structures
- Identify information technology needs and systems that can accommodate needs

Deliverables:[SB 1089 Section 2(3) e, l, m]

- Recommendations on administrative structure
- Recommendations on statutory authority and information technology needs for plan operations including, but not limited to, claims processing and payments
- Plan to create a Trust Fund in the State Treasury
- Plan to create an independent public corporation to run the Universal Health Plan
- Identify federal waivers needed to implement plan
- Create federal waiver guidance document on necessary steps to engage CMS on federal waivers

Workstream #6 – Transition and Implementation Plan

Objective: Identify implementation strategies for moving from the current fragmented, multi-payer, employer-based, health system into a Universal Health Plan system. Develop a readiness assessment of key partners and state agencies. Engage with regional organizations to identify strategies to reduce the complexities and administrative burdens on participants in the health care workforce and to otherwise address workforce challenges.

Timeline: March 2025 – December 2025

Tasks:

- Identify transition steps needed to move from status quo into the Universal Health Plan system
- Develop and conduct a readiness assessment of key partners and state agencies including the Department of Human Services and the Oregon Health Authority

- Review existing reports on health care workforce challenges and identify strategies to mitigate those transition into a Universal Health Plan

Deliverables:[SB 1089 Section 2(3) c, j, g, h]

- Report on readiness assessment and plan for needed next steps for key partners and state agency to transition to a Universal Health Plan
- Develop implementation strategies including addressing workforce challenges
- Interim strategy and legislative recommendations for building the Universal Health Plan in Oregon
- Create a transition timeline and steps needed from status quo for agencies, employers and health care providers to transition into the Universal Health Plan

Phase 3: Final Report Development

Objective: Produce a comprehensive plan to finance and administer a Universal Health Plan and a final report with recommendations from the Universal Health Plan Governance Board.

Timeline: January 2026 – September 2026

Tasks:

- Compile finance, plan design, operations and transitions recommendations into a comprehensive plan to finance, administer and transition to a Universal Health Plan
- Produce first draft of report
- Board review and provide feedback on draft report
- Incorporate feedback and finalize report

Deliverable:[SB 1089 Section 2 (4)]

- Final Universal Health Plan Governance Board Report that includes the comprehensive plan to finance and administer a universal health plan

SB 1089 Deliverables:

- (a) Consider, at a minimum, the values in SB 1089
- (b) Consider, at a minimum, the principles in SB 1089
- (c) Assess the readiness of key health care and public institutions to carry out the plan and collaborate with state agencies including the Oregon Health Authority and the Department of Human Services
- (d) Consider the recommendations of the Joint Task Force on Universal Health Care in including the recommendations to establish a single payer health care financing system
- (e) Identify statutory authorities and information technology infrastructure needed for overall plan operations;
- (f) Evaluate how to work with the nine federally recognized Indian tribes in Oregon and existing boards, commissions and councils concerned with health care and health insurance;
- (g) Work collaboratively with partners across the complexities of the health care system, including hospitals, health care providers, insurers and coordinated care organizations, to build a sustainable health care financing system that delivers care equitably;
- (h) Engage with regional organizations to identify strategies to reduce the complexities and administrative burdens on participants in the health care workforce and to otherwise address workforce challenges;
- (i) Study and address the impacts of the Universal Health Plan with respect to specific types of employers;
- (j) Design the administrative and financing structure for the Universal Health Plan;
- (k) Engage with the Governor's office, the Oregon Health Authority and federal authorities to ascertain and describe, if not yet in federal or state law, necessary federal waivers or other options to secure federal and state funding and to implement the Universal Health Plan;
- (l) Include a plan to create a Universal Health Plan Trust Fund in the State Treasury, separate and distinct from the General Fund, consisting of moneys from all sources, public and private, that are allocated to or deposited to the Universal Health Plan Trust Fund for the purpose of financing the planning for and the administration and operation of the Universal Health Plan by the Universal Health Plan Governance Board, with any moneys in the Universal Health Plan Trust Fund at the end of the biennium being retained in the Universal Health Plan Trust Fund;
- (m) Include a plan to create an independent public corporation