



MEMORANDUM

DATE: March 28, 2018
TO: David Simnitt, Interim Medicaid Director and Jeremy Vandehey, Director of Health Policy and Analytics, Oregon Health Authority
FROM: Oregon Medicaid Advisory Committee
RE: End of Year Report, **2017**

For almost three decades, Oregon's Medicaid Advisory Committee (MAC), a federally-mandated body,¹ has participated in policy development, advising, and assessment of Oregon's administration of its Medicaid program, the Oregon Health Plan (OHP). The Committee has a successful history of Medicaid policy development that spans:

- Policy framework for the original OHP 1115 waiver in 1993 and subsequent waiver renewals
- Expansion of health insurance coverage for children through [HealthyKids](#) (2006)
- Provision of [comprehensive benefits](#) for Oregon's ACA expansion population (2012)
- Reducing and mitigating [churn](#) in a post-ACA coverage landscape (2014)
- Comprehensive financial analysis of [12-month continuous eligibility](#) for income-eligible adults in Medicaid (2015)
- Improving OHA assessment/monitoring of [access to oral health services](#) in Medicaid (2016)

The MAC continues to serve a unique role by assembling a multi-faceted, publicly-convened group of stakeholders, including coordinated care organizations (CCOs), providers, advocates, and Medicaid members, to advise the state Medicaid agency on the administration of OHP. The Committee is guided by a set of long-standing principles designed to promote consumer engagement, health equity, coverage affordability, care continuity, and financial sustainability for Oregon's Medicaid program.

In early 2017, Oregon's Medicaid Demonstration [Waiver](#) renewal request (2017-2022) was approved by the Centers for Medicare and Medicaid Services (CMS). The MAC supports the ways in which the waiver builds on transformation, including a focus on: 1) physical, behavioral, and oral health care; social determinants of health and health equity; and advancing the use of value-based payment and health-related services. Additionally, in 2017 Oregon expanded Oregon Health Plan coverage to all Oregon children regardless of immigration status, a change the MAC had originally called for in designing the Healthy Kids program in 2006. 2017 also marked the MAC's first annual retreat, during which the committee re-affirmed its charter and clarified its role in providing policy recommendations to DHS and OHA from a member and community lens.

¹ In accordance with [42 CFR 431.12](#) and ORS [414.221-225](#).

Notable accomplishments by the committee in 2017

Monitoring and guiding OHA's response to federal Medicaid policy

Throughout 2016, the U.S. Congress entertained several proposals to repeal or otherwise change aspects of the Affordable Care Act, including many with direct or indirect impacts on state Medicaid programs. OHA health policy analysts kept the MAC updated on developments and the MAC responded by providing agency guidance and support in the following ways:

- Developed [Guiding Principles for Oregon's Medicaid program](#) to assist the state in responding to potential changes in Medicaid financing, structure, and increased flexibility.
- Provided OHA with a [letter of support](#) to OHA to emphasize critical need for extension of federal funding for the Children's Health Insurance Program; Community Health Centers; Medicaid Disproportionate Share Hospital Payment; Maternal, Infant, and Early Childhood Home Visiting Programs; and the National Health Service Corps.

Social Determinants of Health and Health-related Services strategy

The social determinants of health are the social, economic, political, and environmental conditions in which people are born, grow, work, live, and age, such as transportation, housing, and access to healthy food. In partnership with OHA, the MAC identified the need to develop additional guidance and recommendations for addressing the Social Determinants of Health (SDOH) in Oregon CCOs, including the use of health-related services. The committee strongly supports expanding CCO investments in and accountability for addressing the social determinants of health, and hopes its policy recommendations will aid the state as it considers policy options for the future of CCOs.

The committee's key deliverables include: 1) shared definition of SDOH for Oregon CCOs; 2) justification for CCO/health system prioritization of SDOH; 3) recommendations on the role and key strategies CCOs can use to address SDOH in their communities; and 4) guide for CCOs to use health-related services to address housing. While the work will be completed in 2018, the MAC made the following progress in 2017:

- Gathered stakeholder input through guest presentations and a [CCO and partner survey](#)
- Developed a draft definition of SDOH working with OHA's Office of Equity and Inclusion and OHA internal Social Determinants of Health Workgroup

In 2018, the MAC will gather additional stakeholder feedback on its draft definition and recommendations, and develop its guide on health-related services and housing. The MAC looks forward to sharing its recommendations with OHA leadership and the Oregon Health Policy Board in May 2018, and the guide will be available by July 2018.

Learning from OHP members

To support the MAC’s work advising on Medicaid policy using a member lens, the committee hosts a member story every few months to better understand the member experience with the Oregon Health Plan. In 2017, the MAC heard from committee member Ross Ryan about his challenges accessing transportation, both medical and non-medical, and how this contributes to his health. The committee also heard from member Tami Martin, who shared about the role of Medicaid in supporting her son who lives with developmental disabilities and the positive impact of Medicaid expansion on her life. In addition, the MAC hears several times a year from OHA Ombuds program manager Ellen Pinney about challenges experienced by members.

Additional monitoring and advisory to OHA and DHS

The MAC provided additional policy advisory to OHA and DHS in the following ways:

- Hosted the state’s Medicaid 1115 Waiver Post Award Forum to raise awareness about the renewed waiver and gather community input.
- Informed OHA decisions on oral health access data and metrics to be included in regular monitoring and public reports.
- Continued to monitor OHA and DHS progress toward improvements in eligibility and enrollment systems, including the integrated eligibility project.

Committee engagement and planning

In 2017, the MAC revisited its unique role in the state in providing guidance and leadership on emerging Medicaid policy issues using a member and community lens. The MAC is the only committee in the state broadly focused on the Medicaid program. During the year, five new members joined the MAC, bringing expertise in health equity, reproductive health, natural medicine, oral health, and children with special health care needs.

The MAC received presentations on a variety of topics to support and aid its work:

<ul style="list-style-type: none"> ❖ Federal health policy proposals ❖ Oregon’s 1115 Medicaid waiver demonstration renewal ❖ OHP eligibility and enrollment, including Integrated Eligibility Project ❖ OHP member experience stories and Ombuds program reports ❖ OHPB Action Plan for Health 2017-2019 Refresh ❖ Health-Related Services ❖ CCO 2.0 ❖ Oregon State Plan process and amendments ❖ Oral health in Oregon CCOs metrics report 	<ul style="list-style-type: none"> ❖ Stakeholder presentations on Social Determinants of Health in Oregon CCOs <ul style="list-style-type: none"> ○ All Care ○ Health Share of Oregon ○ Jackson Care Connect ○ Lane Early Learning Alliance ○ Next Door, Inc. ○ Oregon Primary Care Association ○ Columbia Gorge Health Council ○ Rogue Community Health Center ○ Trillium Community Health Plan ○ SO Health-E Regional Health Equity Coalition
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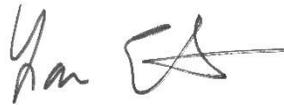
As the state enters the next five years of its Medicaid waiver and the second stage of the CCO model (CCO 2.0), and in the event of federal policy changes that may impact the state, the MAC is poised to continue providing guidance and policy development support to OHA and DHS to improve Medicaid for members and communities.

We hope this report provides insight into the MAC’s work, and the policy and other opportunities to improve the Oregon Health Plan for the over one million members and their families.

Sincerely,



Jeremiah Rigsby
Co-Chair, Medicaid Advisory Committee



Laura Etherton
Co-Chair, Medicaid Advisory Committee

Medicaid Advisory Committee Members

Jeremiah Rigsby, Co-Chair, Director, Public Policy & Regulatory Affairs, CareOregon

Laura Etherton, Co-Chair, Policy Director, Oregon Primary Care Association

Tamara Bakewell, Project Coordinator for Oregon Center for Children and Youth with Special Health Needs (OCCYSHN)

Glendora Claybrooks NCMA, MHA, GCPM, OHP member; CAC Member, Health Share

Regina Dehen, ND, MAcOM, Chief Medical Officer and Dean of Clinics for the National University of Natural Medicine

Robert DiPrete, public member, Former MAC Director, retired Deputy Administrator, OHPR

Miguel Angel Herrada, Health Equity and Diversity Strategist for Pacific Source

Leslee Huggins, DMD, Pediatric Dentist, dual-trained in the specialties of Pediatric Dentistry and Orthodontics

Anna Lansky, MPA Assistant Director, Division of Developmental Disability Services, DHS, Ex-Officio Member

Marcia Hille, Executive Director, Sequoia Mental Health Services

Maria Rodriguez, MD, MPH OB/GYN, OHSU

Ross Ryan, OHP member, consumer advocate

David Simnitt, Interim Medicaid Director, OHA, Ex-Officio Member