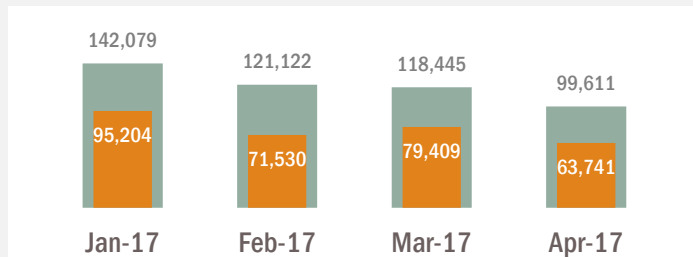


Monthly Member Services Dashboard

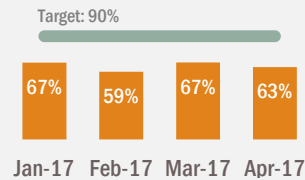
OHP Call Center Monthly Averages (all OHP lines)

Total daily calls received and answered.

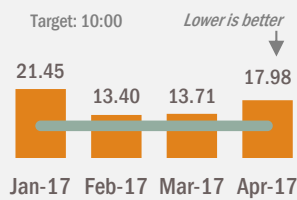


Call volume has declined consistently since January. This is due to the end of the open enrollment period and the completion of converted case renewals.

The percentage of calls answered increased into March....

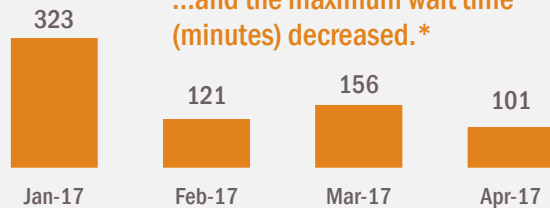


...the average wait time (minutes) increased...

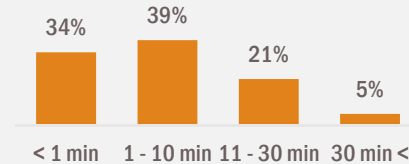


The maximum wait time declined in April, and shows a significant improvement over maximum wait time in January. Only 5% of calls to the OHA Call Center waited for more than 30 minutes.

...and the maximum wait time (minutes) decreased.*



More than 70% of calls in April were answered in 10 minutes or less.*



* does not include calls to vendor call centers

ONE Application Process

| | Processed and determined | Awaiting center processing | Awaiting client response to be processed |
|--------|--------------------------|----------------------------|--|
| Jan-17 | 43,598 | 24,385 | 14,191 |
| Feb-17 | 37,931 | 28,998 | 14,548 |
| Mar-17 | 35,570 | 28,830 | 12,785 |
| Apr-17 | 29,541 | 19,788 | 16,435 |

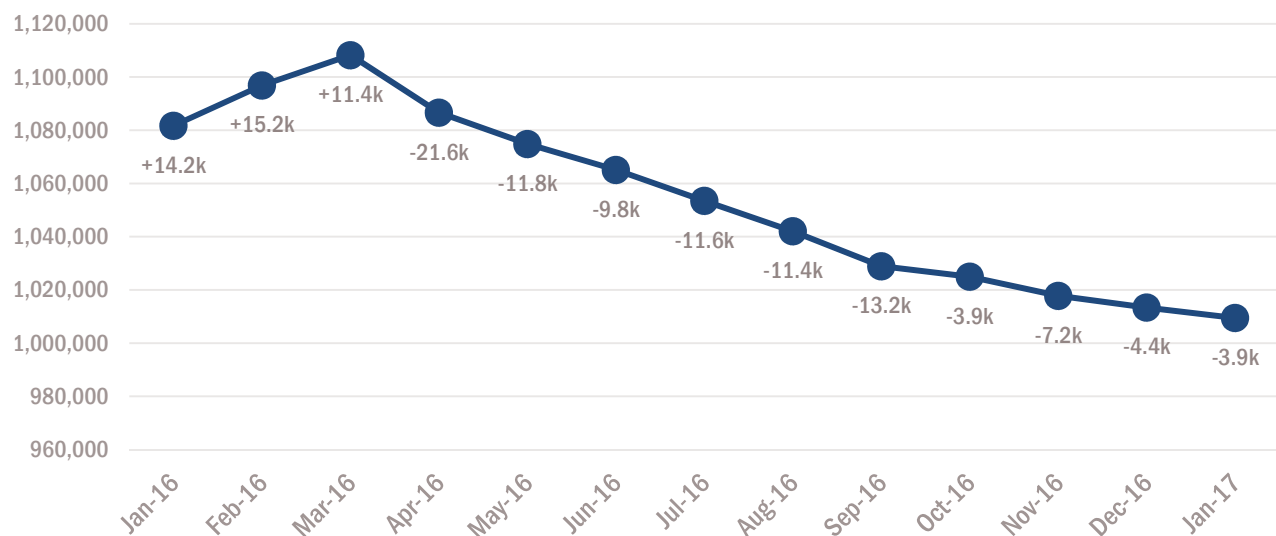
The application backlog - the number of applications that are awaiting an eligibility determination - has improved in April. There were fewer incoming applications as open enrollment ended and renewal volume stabilized.

Monthly Member Services Dashboard

Total Oregon Health Plan Enrollment

Medicaid enrollment declined 9% between March 2016 through January 2017 – or about 99,000 Oregonians. From the failure of Cover Oregon until March 2016, Oregon delayed many annual renewals while it built a new eligibility system. OHA launched the new ONE System for eligibility in March 2016 and began a laborious process requiring all OHP members to submit new paper applications to ensure accurate data was entered into the new system. OHA completed its first renewal cycle in March 2017, having enrolled more than 733,695 (or 72% of the total population) into the ONE System. DHS continued to process renewals for individuals in the Child Welfare Program and Aging and People with Disabilities Program through a separate process.

**excludes Citizen-Alien Waived Emergency Medical (CAWEM), Breast and Cervical Cancer Treatment Program (BCCTP) and Qualified Medicare Beneficiary (QMB)*



This chart marks enrollment actuals finalized 90 days after the month ends to allow for retro-eligibility enrollments. Individuals may gain or lose OHP coverage within the month.



Source: Integrated Client Services Data Warehouse, 5/2/17.