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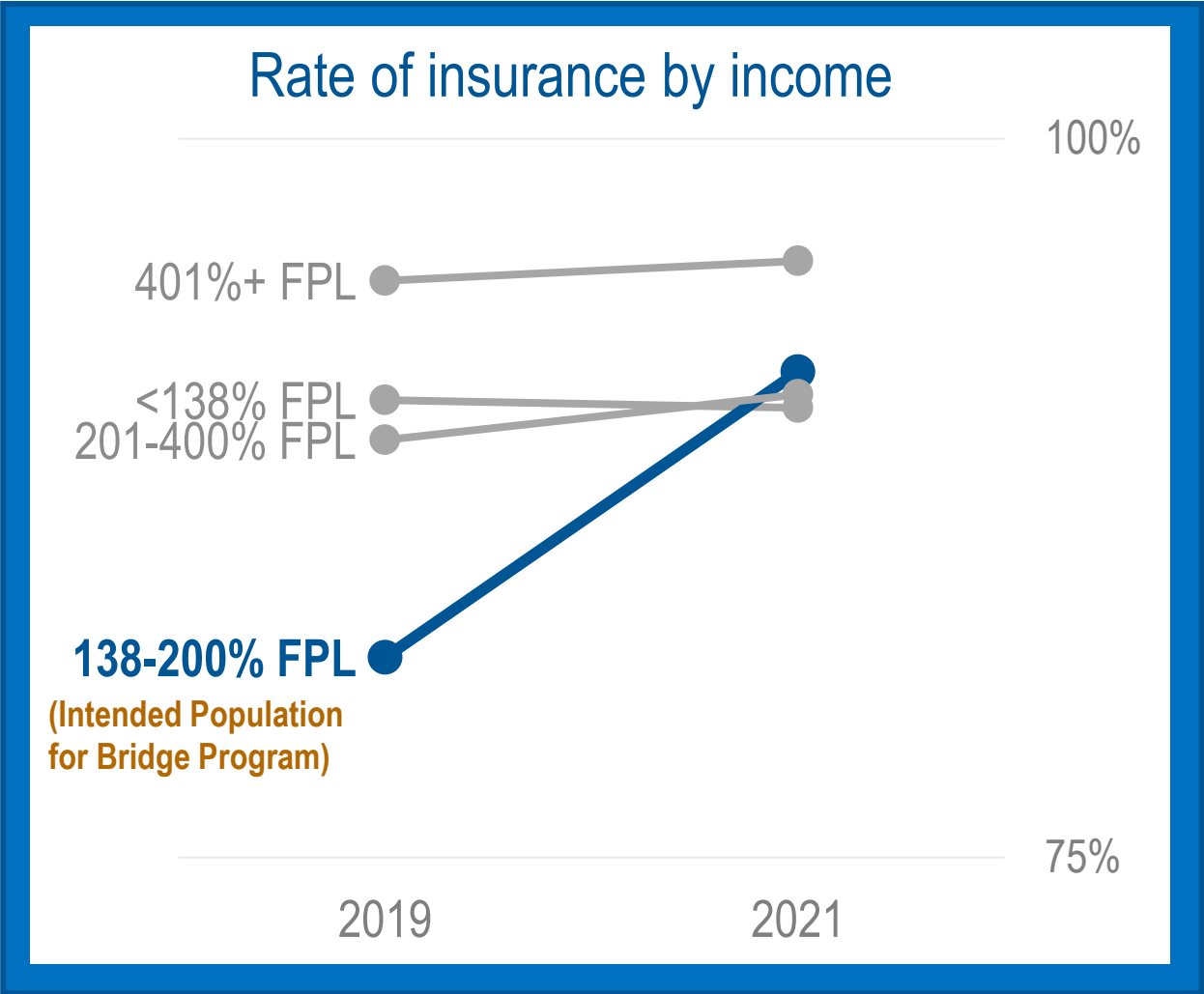
# Basic Health Program Blueprint

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April 4, 2023

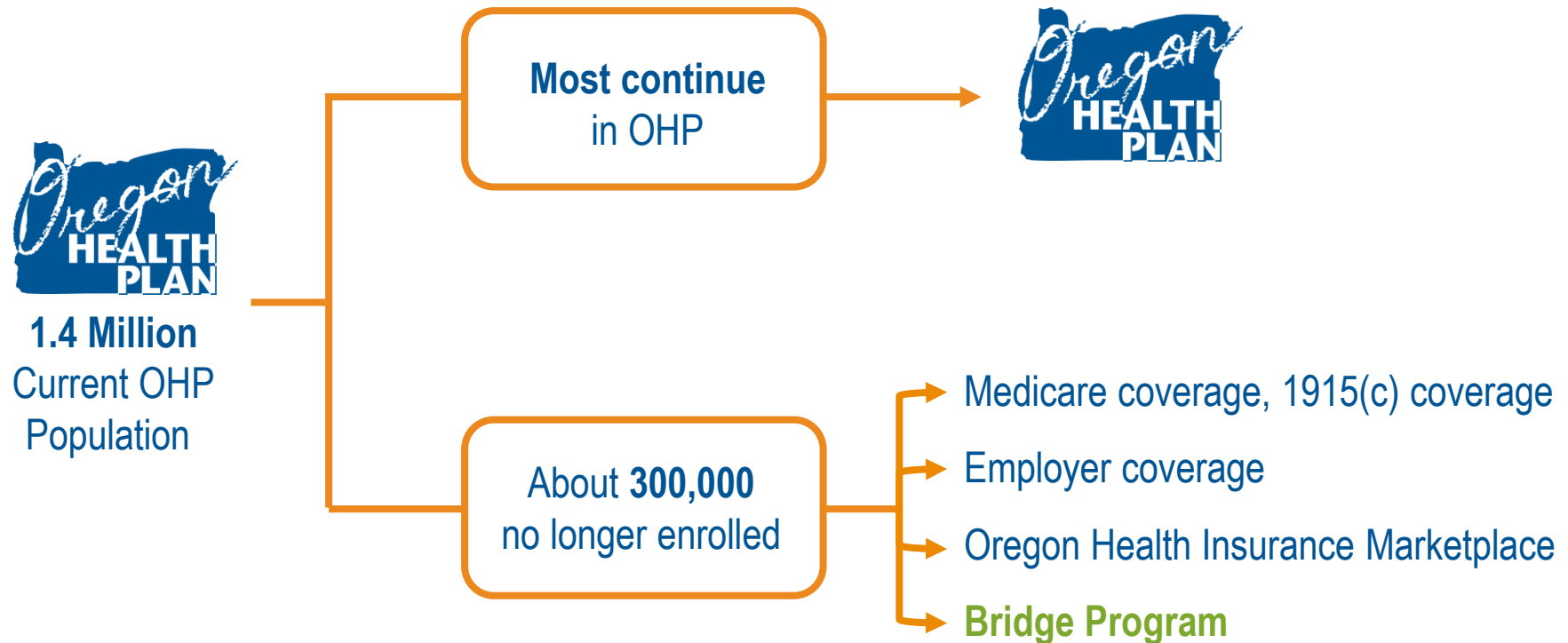


# Low-income adults gained coverage during the PHE as fewer people became uninsured due to loss of OHP



Family size	138% FPL	200% FPL
1	\$20,120	\$29,160
2	\$27,214	\$39,440
3	\$34,307	\$49,720
4	\$41,400	\$60,000

# Pathways to coverage following redeterminations

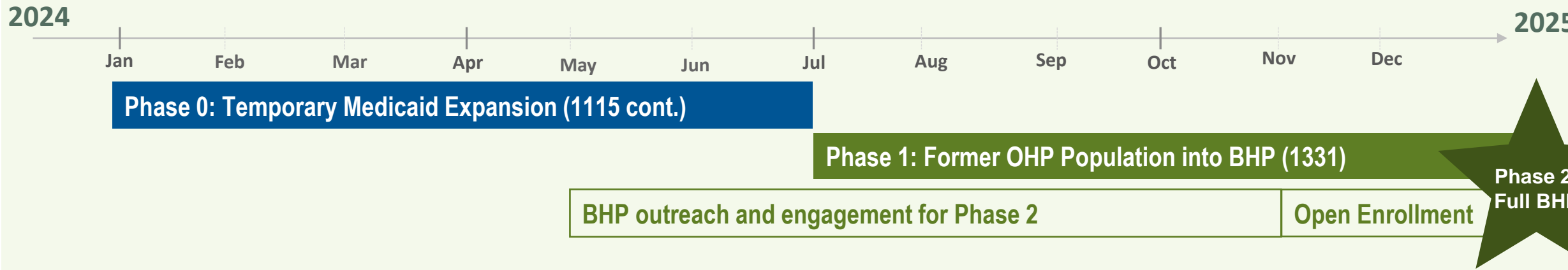
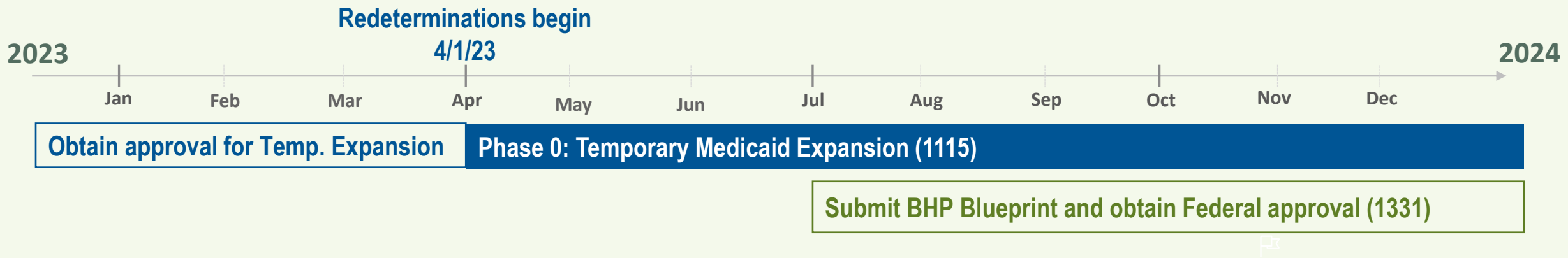


# Bridge Program goals

- Preserve coverage gains
- Maximize federal funding
- Administered by CCOs
- CCO OHP service package
- No enrollee costs
- Capitation rates that enable higher-than OHP provider payment
- Explore strategies to minimize premium increases and coverage loss for consumers >200% FPL who remain on the Marketplace



# DRAFT Timeline: Temporary Medicaid Expansion and Basic Health Program



**BHP enrollees will be a combination of people previously uninsured, coming from the ACA individual market, or coming from Medicaid following the end of the PHE.**

### People Moving From Uninsured

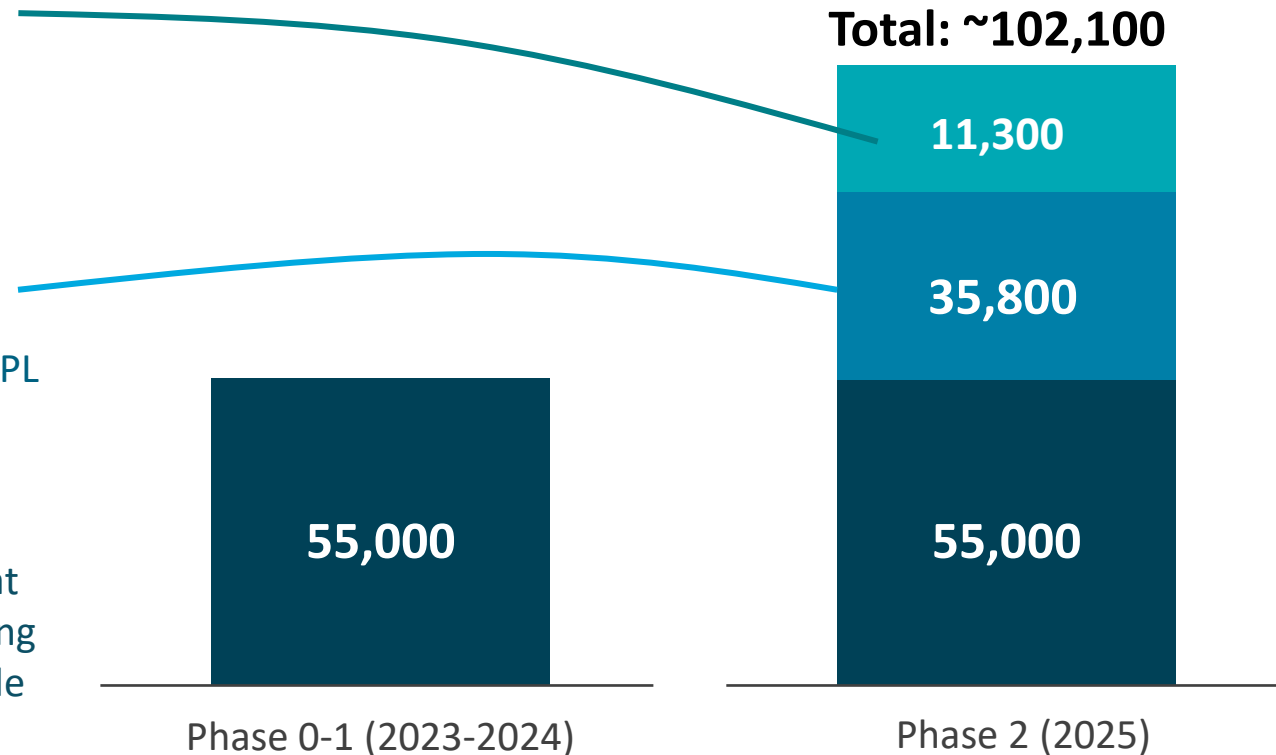
- Based on the uninsured population in 2021, OW estimated BHP enrollment among the uninsured using microsimulation modeling, projected for 2025.

### People Moving From ACA Individual Market

- Includes people currently covered in the Marketplace with income between 138-200% FPL in 2021, projected to 2025.

### People Moving From Medicaid

- Includes the population from 138-200% FPL that are expected to lose Medicaid eligibility following end of the PHE, who would otherwise be eligible for the Marketplace.

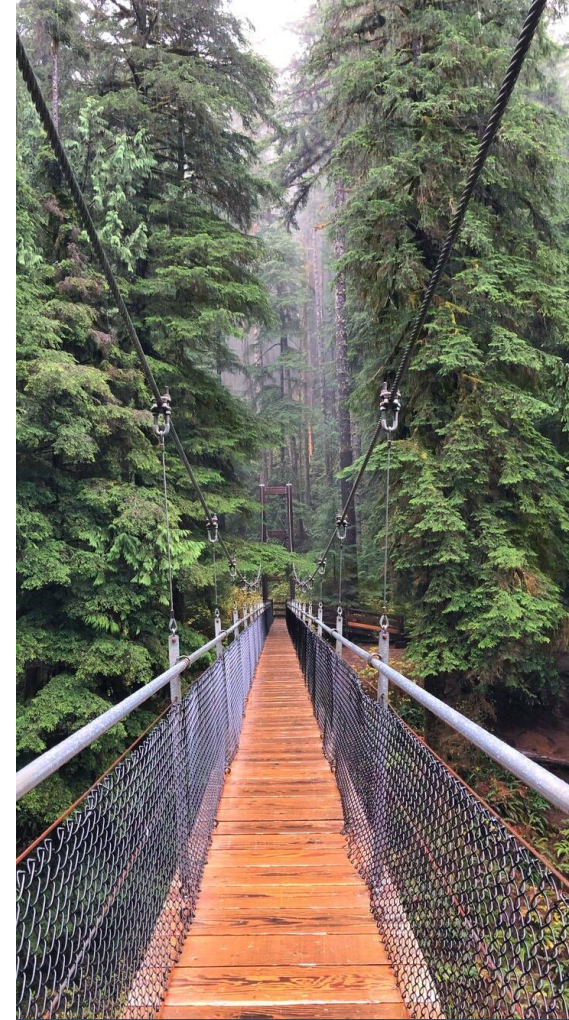


# What is a Section 1331 Basic Health Program?

- A **Basic Health Program (BHP)** covers individuals up to 200% FPL who would otherwise be eligible for Marketplace coverage
- States with BHPs receive **federal funding** equal to 95% of tax credits and cost sharing reductions that would have otherwise gone to BHP enrollees
- To establish a BHP, states must apply by submitting a **BHP Blueprint**
- The Blueprint documents:
  - BHP design choices
  - Description of the operations and management of the program
  - Compliance with federal rules

# BHP Blueprint sections

1. State background information
2. Public input
3. Trust fund
4. Eligibility and enrollment
5. Standard health plan contracting
6. Premiums and cost-sharing
7. Operational assessment
8. Standard health plan





# BHP Blueprint substance and existing direction

- **BHP design choices** – shaped by Bridge Health Care Program Task Force recommendations and HB 4035 (2022)
- **Compliance with federal rules** – guided by Minnesota application
- **Operations and management of the program** – alignment with existing OHP processes and structures

## Basic Health Program Blueprint

### Introduction

Section 1331(a) of the Affordable Care Act directs the Secretary to establish a Basic Health Program (BHP) that provides a new option for states to offer health coverage for individuals with family incomes between 133 and 200 percent of the federal poverty level (FPL) and for individuals from 0-200 percent FPL who are lawfully present in the United States but do not qualify for Medicaid due to their immigration status. This coverage is in lieu of Marketplace coverage.

States choosing to operate a BHP must submit this BHP Blueprint as an official request for certification of the program.

## Section 1: Basic Health Program-State Background Information

State Name: New York Program Name (if different than Basic Health Program): Essential Plan

### BHP Blueprint Designated State Contact:

Name	Title	Telephone number	E-mail
Julith Arnold	Director, Division of Eligibility and Marketplace Integration	518-474-0180	<a href="mailto:Julith.Arnold@health.ny.gov">Julith.Arnold@health.ny.gov</a>

### Requested Interim Certification Date (if applicable) (mm/dd/yyyy):

Requested Full Certification Date (mm/dd/yyyy): April 1, 2015; Revision 1 requested for January 1, 2016; Revision 2 requested for December 31, 2016; Revision 3 requested January 1, 2017  
 Requested Program Effective Date (mm/dd/yyyy): April 1, 2015; Revision 1 requested for January 1, 2016; Revision 2 requested for December 31, 2016; Revision 3 requested January 1, 2017

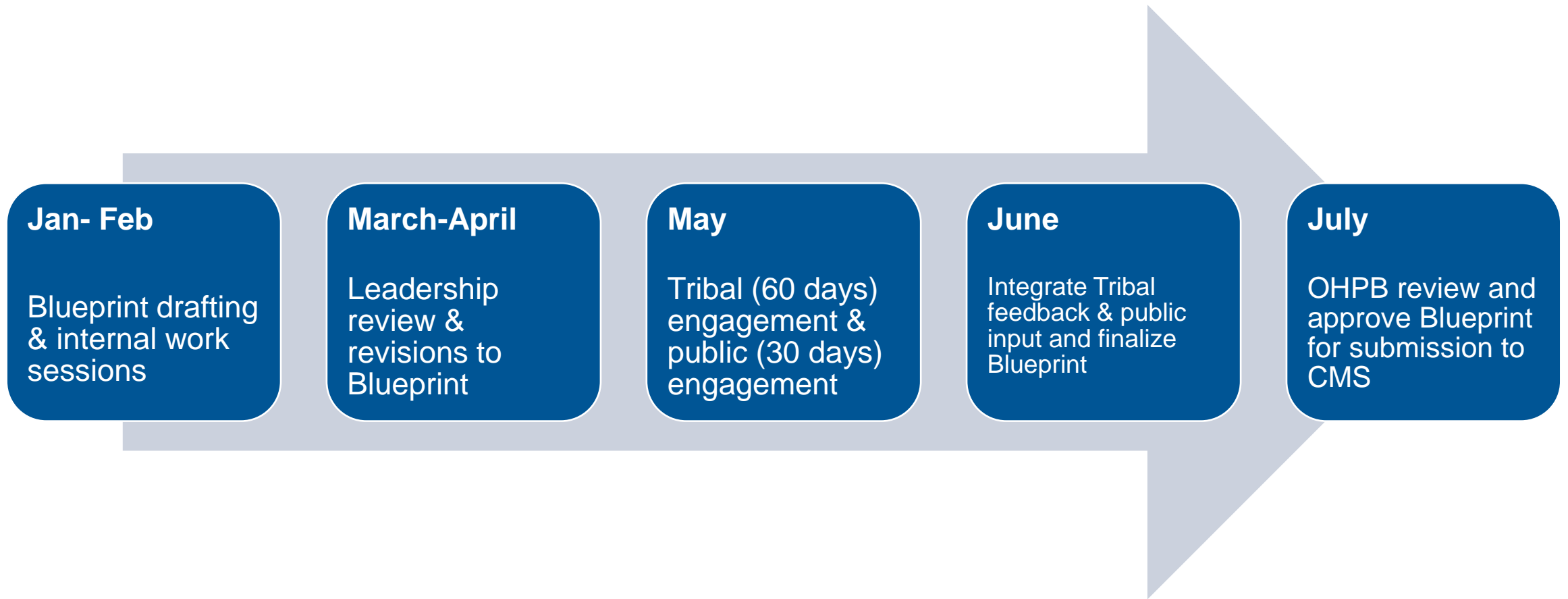
Administrative agency responsible for BHP ("BHP Administering Agency"): New York State Department of Health. Note: The NY marketplace, Medicaid and CHIP programs are also under the New York State Department of Health.

### BHP State Administrative Officers:

#### Program Administration: (Management, Policy, Oversight)

Position:	Title:	Location (Agency):	Responsible for:
Dr. Zucker	Commissioner of Health	Albany, NY	Program Oversight
Jason Hilgerson	Medical Director	Albany, NY	Management Oversight, Policy

# Basic Health Program Blueprint draft 2023 timeline



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**Thank You**

The logo for the Oregon Health Authority. It features the word "Oregon" in a smaller, orange, serif font positioned above the word "Health". "Health" is written in a large, blue, serif font. Below "Health", the word "Authority" is written in a smaller, orange, serif font. The entire logo is centered within a light blue, rounded rectangular background.

Oregon  
**Health**  
Authority