Wentz Jackson Consulting Appendix

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Strategic Message Guide for Universal Health Plan Governance Board

PURPOSE OF THIS GUIDE

The purpose of this message guide is to help the Universal Health Plan Governance Board communicate clearly, consistently, and effectively with health care consumers and other stakeholders about its work, as directed by the Oregon Legislature. The messages are designed to be clear and concise in order to increase **understanding, trust, and engagement**.

The message guide supports the 2025 work being done for a **transparent and inclusive process** to inform the Board's development of a draft plan with options leading to universal health care in Oregon.

CORE MESSAGES

If you have time to say one thing, say this, aka "Elevator Speech"

> Everyone should be able to get care when they need it—no matter where they live, what job they have, or how much they earn. But Oregon's health care system isn't working. Costs keep rising. In 2023, 1 in 8 Oregon households said medical bills had eaten up all or most of their savings. People are delaying treatment, providers are overwhelmed, and small businesses are struggling to afford coverage.
>
> That's why the Legislature created the Universal Health Plan Governance Board. The Board will design options for a publicly funded universal health plan to provide care for everyone. This is a multi-year, public process rooted in community input and guided by the values Oregonians affirmed in 2022, when voters made access to affordable care a constitutional right. With rising costs and shrinking coverage, this work has never been more urgent.

If you have a little more time

> Everyone should be able to get care when they need it—no matter where they live, what job they have, or how much they earn. But Oregon's health care system isn't working, for patients, providers, employers, or communities. Costs keep rising, coverage is inconsistent, and 1 in 8 Oregon households say medical bills hav eaten up all or most of their savings. People are delaying treatment, rationing medication, or using up their savings just to stay healthy. Providers are stretched thin. Employers, especially small businesses, face impossible choices as premiums continue to climb.

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That's why the Legislature created the **Universal Health Plan Governance Board**—to lead a multi-year public process to design options for a publicly funded universal health plan for Oregon. Building on our long tradition of health care reform, we're exploring new ways to protect access and provide meaningful relief for families, workers, and businesses.
This work is informed by years of **ongoing community input** and guided by the values Oregonians affirmed in 2022, when voters made access to affordable health care a constitutional right.

We will be presenting options for the 2027 Legislature to consider. As federal actions reduce coverage, increase costs, and destabilize the system—especially in rural Oregon—this effort is more urgent than ever.

QUICK POINTS

Summary of what the Board is doing and where it will lead. Through a public, multi-year process, the Universal Health Plan Governance Board is exploring a better way to ensure access to health care—so everyone in Oregon can get the care they need, without worrying about cost or coverage. That includes options on how to fund the system, what it would cover, and how it could work statewide to make care more affordable and fair for everyone. The final decision on whether and how to act on the Board's recommendations rests with the Legislature, and the Board is working on developing options for consideration by lawmakers in 2027.

GOALS Quick Points:

- Everyone can get - and afford - the care they need, when they need it.
- Making sure care is available, affordable, and works for everyone.
- Care you can count on. Costs you can handle. A system that treats people right.
- Easy to get. Affordable to pay for. Fair to everyone.
- Health care that's there for you—no matter who you are or where you live.
- Making care simpler to get, easier to afford, and fair for every Oregonian.
- Everyone gets the same high-quality care—without barriers or big bills.

OUTCOMES Quick Points:

- The Board's job is to make sure lawmakers have real, workable choices—not just ideas, but a plan that can actually be put into action.
- Oregonians voted to make health care a right. We're working on what that looks like in practice.
- We're building from the ground up—with input from people across the state and a strong focus on what's practical, legal, and financially doable.
- This process is transparent, deliberate, and grounded in the values Oregonians share: everyone should be able to get the care they need.

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LONGER MESSAGES ON WHAT, WHY, AND HOW THE BOARD IS DOING THIS WORK

1. What the Board Is doing

The Universal Health Plan Governance Board was created by the Legislature to design a detailed plan for how Oregon could set up a publicly funded health care system. This work builds on years of public process from the Universal Health Plan Task Force.

The Board's job is to develop recommendations that are practical, legal, and financially sound so that state lawmakers have real and actionable options to consider in the 2027 legislative session. That includes how the system would be funded, who would be eligible, how it would be governed, and how it could be implemented at scale.

The Board's work is guided by technical analysis, legal review, economic modeling, and input from the public and health system stakeholders.

2. Why the work is important

Oregon's current health care system is failing too many people. Costs keep rising, and many can't afford the care they need. 1 in 8 Oregon households said medical bills had eaten up all or most of their savings. 1 in 7 **people delay or avoid care due to cost**, and in rural southwest Oregon, that number rises to **1 in 5**.

Small businesses are also feeling the strain. As premiums continue to rise each year, many are forced to choose between offering health coverage and staying afloat, adding pressure in an already fragile economy.

Providers are under serious strain too. Oregon faces a **growing health care workforce crisis** with too few nurses, doctors, and frontline staff to meet demand. That means **longer wait times**, **reduced access to care**, and increasing burnout for those trying to hold the system together. Meanwhile, **federal actions are cutting coverage** for low-income individuals, raising costs for states and families, and **destabilizing the health care safety net**, especially in rural communities.

In 2022, Oregonians voted to make access to affordable health care a constitutional right. The Board is now carrying out that mandate by developing options for a system that works better—for families, workers, employers, providers, and communities.

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3. What comes next

The Board is now in the design phase, building detailed proposals for how a universal system could function in Oregon—how it would be paid for, who would manage it, and how to transition from the current system.

In 2025-2026 there will be engagement with health care users, businesses, providers, insurance providers, and other groups to make sure the plan reflects Oregon's diverse needs and values.

The Board will deliver plan options at the end of 2026 to the Oregon Legislature for consideration in the 2027 legislative session. The Board's goal is to give the Legislature a well-developed, fully informed set of choices for moving Oregon toward a universal health care system.

OTHER TALKING POINTS

Use in remarks or publications to flesh out key points on cost, access, equity, and how we can do better

1. Problem/solution options for general audiences, health care consumers, providers, employers and other stakeholders

Too often, access to care in Oregon depends on a person's income, insurance status, race, ZIP code, or immigration status. These gaps lead to worse outcomes for communities of color, rural residents, and people with lower incomes. The Universal Health Plan Governance Board is exploring options for a publicly funded system that would treat health care as a **basic right—not a privilege tied to a job or income level**. By covering everyone and removing financial barriers, a universal plan could help close persistent gaps in access, outcomes, and experience across Oregon's communities.

1 in 8 Oregon households say medical bills have eaten up all or most of their savings. The high cost of care is forcing people to delay care or go into debt. Oregon is responding by looking at options to present to the Legislature for a universal health plan that will simplify coverage, lower costs, and give families peace of mind.

A mom shouldn't have to skip her own cancer screening to pay for her child's asthma meds. A small-town business shouldn't drop coverage just to keep the doors open. But that's the reality for too many Oregonians. As costs soar and federal protections fade, Oregon is leading the way. We are designing a universal health plan so no one has to choose between their health and their future. Because health care shouldn't depend on luck, income, or ZIP code.

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Too many Oregonians are skipping care, drowning in medical bills, or watching their small businesses struggle with rising premiums. As federal changes make health care more expensive and harder to access, Oregon is stepping up. We are designing options for a universal health plan so families can stay healthy without going broke, businesses can grow without sacrificing coverage, and every community can count on access to care when it's needed most.

Our current health care system is complicated, inefficient, and expensive. It puts paperwork before people. The Board is taking a thoughtful, public approach to replace that system with one that is **simpler, publicly funded, and designed to deliver high-quality care to everyone**, without financial barriers or red tape. The Board will be presenting plan options that will be under consideration in the 2027 legislative session.

2. Messages for rural Oregon, businesses, providers

In every part of Oregon, people are **skipping appointments or rationing medication** because they can't afford the care they need. **In rural southwest Oregon, 1 in 5 residents delays care due to cost**, the highest rate in the state. The Board has been tasked with looking at options for a universal health plan that ensures access for everyone, not just those who can pay.

Small businesses are being crushed by health insurance costs. They're forced to cut coverage, freeze wages, or drop benefits entirely. Oregon's universal health plan aims to reduce those costs and **level the playing field**—so employers can focus on growing their businesses and employees can get the care they need.

Oregon's current system isn't working—for patients or providers. Rising costs, workforce shortages, and coverage gaps are making it harder to deliver care. The Universal Health Plan Governance Board is exploring practical options for a publicly funded system that reduces red tape, improves access, and supports a more stable, sustainable environment for those on the front lines of care.

3. Reminder – people in Oregon want action

Oregonians voted on a constitutional amendment in 2022 to make affordable health care a right. Now, the state is following through. A statewide board is leading a multi-year, public process to design a universal health plan to present to the Legislature that reflects our shared values—**affordability, access, equity, and long-term stability**.

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4. What's next

The Board is in the middle of a multi-year public process to design a universal health plan that covers everyone and lowers costs. The Board will develop detailed recommendations on how the system would be governed, funded, and implemented. **Before anything is finalized, there will be statewide engagement with health care consumers, providers, payers, businesses large and small, and other stakeholders to ensure the proposal reflects the needs of people across Oregon**. Plan options will be delivered at the end of 2026 for consideration in the 2027 legislative session.

DO'S AND DON'TS

DO:	• Start with shared values for affordable, available health care for everyone • Use everyday, conversational language • Ground the issue in real people's lives • Repeat core messages consistently across platforms
DON'T:	• Speculate on what the final plan details will be • Lead with complex policy details • Focus on what's broken without offering hope • Argue using data alone. People connect emotionally first • Amplify opponents' talking points by repeating them

FREQUENTLY ASKED QUESTIONS (Q&A SECTION)

Q. Is this single payer?

A. That hasn't been determined, but could be an option.

Q. Isn't this just more government bureaucracy?

A. Our current system is full of red tape and paperwork—just ask anyone who's fought with insurance companies. We are looking at options for a universal system to simplify things and put doctors and patients, not insurers, in charge of care decisions.

Q. How are you going to pay for it?

A. A key metric we are following is that overall, health care must cost less under this proposal. The Board is looking at several options for public financing.

Q. How much will it cost?

A. The finance committee is doing that analysis now, and we should have the final cost by the end of the year.

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Q. How long could it take to set up universal health care in Oregon?

A. That depends on what the Legislature chooses to do—and how the plan is structured. But we do know this: for it to work well, it needs to be thoughtfully designed, have broad public support, and make the health care system better for the people who use it. This isn't about rushing a fix, it's about building something that works for the long term. That means careful planning, real engagement with providers, patients, and employers, and time to align systems, funding, and federal partnerships.

Q. How do the cuts to Medicaid from the federal budget bill affect the work of the Board?

A. HR 1 has changed the landscape dramatically. Medicaid cuts and reduced federal subsidies for people who buy their own coverage will change the calculations around the number of uninsured in Oregon. The Board will be closely monitoring the implementation of HR 1 and will engage with health care providers and insurance plans to understand the impact. The finance committee will consider these changes as it finalizes the first comprehensive financial analysis of universal health care for Oregon. We must be flexible in meeting this unprecedented moment while also maintaining the vision of affordable and accessible health care for everyone in Oregon.

Q. ***Post-pandemic and post HR 1, the landscape has changed dramatically since 2019. How is the Board adjusting to that?***

A. The Board's work today is dealing with new realities not anticipated by the Universal Health Care Task Force: we had a multi-year global pandemic that upended the health system. Hundreds of thousands of Oregonians are facing coverage losses after HR 1. Other federal funding for health is being held back, and the future of Medicaid waivers is unclear. The Board's goal is to present a workable plan that adjusts to these new realities while meeting the vision for affordable and accessible health care for all Oregonians.

OREGON UNIVERSAL HEALTH PLAN – KEY MILESTONES TIMELINE

2019	• The Oregon Legislature passes **Senate Bill 770**, establishing the **Joint Task Force on Universal Health Care**. • The Task Force is charged with developing recommendations for a publicly funded health care system.
2020–2022	• The Task Force holds **public meetings, technical workgroups, and listening sessions** statewide.

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	• Work focuses on financing, governance, federal waivers, and access.
SEPTEMBER 2022	• The Task Force publishes its **final recommendations**, outlining a universal, publicly funded plan for Oregon. • Recommendations include a single-payer model, comprehensive benefits, and equity-centered design.
NOVEMBER 2022	• Oregon voters pass **Measure 111**, amending the state constitution to declare that **"every resident of Oregon has a right to cost-effective, clinically appropriate, and affordable health care."**
2023	• The Legislature passes **Senate Bill 1089**, establishing the **Universal Health Plan Governance Board** to create plan options.

2024–2026	• The Board conducts a **multi-year public process**, including statewide engagement, technical analysis, and input from key stakeholders:
	  ○ Health care consumers
	  ○ Providers
	  ○ Employers
	  ○ Payers
	  ○ Tribal representatives
	  ○ State and federal policy experts

DECEMBER 2026	• The Board will deliver **plan options** to the Oregon Legislature for formal consideration.
2027 LEGISLATIVE SESSION	• Lawmakers will review and consider the Board's recommendations to determine the future of universal health care in Oregon.

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Universal Health Plan
Governance Board

What's next for universal health care in Oregon



Everyone should be able to get care when they need it – no matter where they live, what job they have, or how much they earn. But Oregon's health care system isn't working.

Costs keep rising. In 2023, **1 in 8 households** reported that medical bills wiped out all or most of their savings. People are delaying treatment. Providers are overwhelmed. Small businesses are struggling to afford coverage.

Oregon is taking action

The Oregon Legislature created the **Universal Health Plan Governance Board to design a plan that ensures everyone in Oregon has access to care – without financial barriers, red tape, or gaps in coverage**.

This is a **multiyear, public process** guided by community input and Oregon values.

In 2022, voters made affordable health care a constitutional right. Now the state is working to make that promise real.

What the board is doing

- Designing models for a **publicly funded health plan to cover everyone who lives in Oregon**
- Planning how it would be run, how to pay for it, and how it would work statewide
- Getting input from people living in Oregon – health care users, providers, employers, insurers, tribes, and community leaders
- Delivering final recommendations to the Legislature for consideration in 2027

Why it matters

- 1 in 5 rural Oregonians delay or avoid care because of cost.
- Small businesses are being crushed by rising premiums.
- Providers are burned out, and rural health systems are under threat.

A better system is possible – one that guarantees care for all and lowers costs for everyone.

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What comes next

2025 to 2026:
Community engagement, financial modeling, legal analysis, and plan development that takes in to account the shifting landscape and health care cuts from federal actions.

By December 2025:
The board delivers a status update to the Legislature.

September 2026:
The board delivers draft plan options to the Legislature.

2027 legislative session:
Lawmakers review and decide Oregon's path to universal health care.

Stay connected

The Universal Health Plan Governance Board has four committees that hold public meetings on Zoom to develop the plan and meet statutory requirements:

- **Community Engagement and Communications Committee:** Leads engagement with groups across Oregon, including outreach to businesses, health systems, health care users, tribes, and others.
- **Finance and Revenue Committee:** Provides analysis and recommendations on the cost of universal health care in Oregon and funding options.
- **Operations Committee:** Provides analysis and recommendations on how to implement universal health care in Oregon, including options for a public corporation to administer it and plans for a transition phase.
- **Plan Design and Expenditures Committee:** Provides analysis and recommendations on options for who would be covered under universal health care, what the benefits would be, how providers would be paid, how to stabilize the workforce, and other elements.

For how to watch and provide comment to the committees, go to oregon.gov/uhpgb. To contact the board, call **503-378-4100** or email uhpgb.info@dcbs.oregon.gov.

Let's build a health care system that works for everyone – **universal, affordable, and fair.**

A new urgency to act

Federal policy changes could cause thousands of Oregonians to lose coverage. Without state-level reform:

- **Coverage gaps will widen**, especially for rural and low-income residents.
- **Cuts in coverage will drive up overall costs**, as more people delay needed care until their conditions become more serious and expensive to treat.
- **Health systems will be further strained**, with hospitals, clinics, and providers facing higher uncompensated care costs and greater pressure on capacity.
- **Health care costs will continue to rise faster than income**, worsening affordability for families and employers.

A publicly funded plan that covers everyone could:

- **Protect people from losing coverage** during federal cuts and cost increases.
- **Reduce administrative waste**, freeing billions for direct patient care.
- **Lower overall system costs** while maintaining or improving quality.
- **Ensure equitable access** to timely care in every community.

Timeline

- **2025-2026** – Actuarial and funding modeling, legal analysis, draft plan model development, and interest group engagement.
- **End of 2025** – Update on the board's preliminary work on plan models, including the status of financing and governance proposals, presented to the Legislature.
- **September 2026** – Final report and recommendations delivered to Legislature.
- **2027 session** – Lawmakers review plan options and decide what's next for Oregon's move toward health care for everyone.

Stay connected

The Universal Health Care Governance Board has four committees that hold public meetings on Zoom to develop the plan and meet statutory requirements:

- Community Engagement and Communications
- Finance and Revenue
- Operations
- Plan Design and Expenditures

For a full description of the committees and information on how to watch and provide comment, go to oregon.gov/uhpgb.

To sign up for board email and text updates, go to http://dcbspage.org/FFH7V.

Email: uhpgb.info@dcbs.oregon.gov

Phone: **503-378-4100**



What's next for universal health care in Oregon

Everyone should be able to get care when they need it – no matter where they live, what job they have, or how much they earn.

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Universal Health Plan Governance Board

Today, Oregon's health care system is under severe strain:

- **Spending growth:** Per-person health spending in Oregon has risen nearly 40 percent since 2015, now topping $9,000 per year – outpacing wages, inflation, the state's health care cost growth target, and the economy overall.[1]
- **Financial insecurity:** In 2023, 1 in 8 households reported that medical bills wiped out most or all of their savings.[1]
- **Barriers to care:** 15 percent of Oregonians delay or skip needed care due to cost; in several rural counties, the figure rises to 20 percent.[1]
- **Provider stress:** Workforce shortages and burnout are widespread.[2]
- **Reduced access:** Health care users are facing delays in getting care, birth centers are shutting down in rural Oregon, and rural hospitals are at risk.[3, 4]
- **Employer strain:** Small businesses are squeezed between rising premiums and the need to retain staff – often forced to reduce benefits or absorb higher costs at the expense of wages and investment.[5]

Oregon is taking action

Since the creation of the Oregon Health Plan in the 1990s, Oregon has long led the nation in health reforms rooted in the belief that health care is a fundamental right. In 2019, the Oregon Legislature passed Senate Bill 770, creating the Universal Health Care Task Force to study a publicly funded system for all residents. In 2022, voters approved a constitutional amendment making affordable health care a right.

In 2023, the Legislature formed the Universal Health Plan Governance Board to build on the task force's work and design a plan to make that vision real. The board's mandate is to:

- **Design** publicly funded, statewide health plan options that guarantee coverage for all Oregon residents.
- **Recommend** how the plan should be governed, financed, implemented, and evaluated.
- **Address** federal and state legal requirements, including Medicaid waivers, Employee Retirement Income Security Act considerations, and alignment with existing state health reforms.
- **Identify** strategies for cost control, quality improvement, and equitable access that reflect Oregon's long-standing commitment to fairness, inclusion, and sustainability.

As the board works toward delivering plan options in 2026, it must do so in the context of a **dramatically changed health care landscape** – one shaped by **reduced federal funding for Medicaid**, new eligibility restrictions, and the profound **post-pandemic upheaval** affecting providers, workforce stability, patient access, and the financial viability of hospitals and clinics. These realities make the board's charge both more challenging and urgent.

The board's work includes

- **Plan design:** Determining eligibility (all residents versus subsets), covered benefits (comprehensive medical, dental, vision, behavioral health, and long-term care), and provider payment models (global budgets, capitation, and fee-for-service hybrids).
- **Financing models:** Evaluating revenue sources (payroll or income-based taxes, employer contributions, and federal funds redirection), cost-containment mechanisms, and economic impact modeling.
- **Governance structure:** Exploring options for a public corporation or independent state agency with fiduciary responsibility, transparency requirements, and stakeholder representation.
- **Implementation strategy:** Phased rollout, transition from existing systems, IT and data infrastructure, and workforce stabilization measures.
- **Engagement:** Conducting outreach to affected communities, including historically marginalized populations, health care users, tribes, businesses, providers, and insurers.





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3 "Oregon hospitals on the brink," Hospital Association of Oregon, 2024 hospital utilization and financial analysis. https://oregonhospitals.org/wp-content/uploads/2025/04/2025.04.25_Report_Oregon-Hospitals-on-the-Brink_FINAL.pdf

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5 "Rising health care prices burden Oregon employers and residents, 2017-2021," Health Care Cost Institute. https://s3.amazonaws.com/cms.ipressroom.com/172/files/20244/Health+care+spending+in+Oregon.pdf