

HOUSE COMMITTEE ON HUMAN RESOURCES

January 24, 1997 Hearing Room H-170

1:00 PM Tapes 3-5

MEMBERS PRESENT:

Rep. Patricia Milne, Chair

Rep. Jackie Taylor, Vice-Chair

Rep. Richard Devlin

Rep. Steve Harper

Rep. Jeff Kruse

Rep. Jane Lokan

Rep. Kitty Piercy

MEMBER EXCUSED:

STAFF PRESENT:

Lori A. Long, Administrator

Diane M. Quinones, Administrative Support

MEASURE/ISSUES HEARD:

INFORMATIONAL MEETING

Overview of the Oregon Health Plan

These minutes are in compliance with Senate and House Rules. Only text enclosed in quotation marks reports a speaker's exact words. For complete contents, please refer to the tapes.

Tape/#	Speaker	Comments
TAPE 3, A		
005	Chair Milne	Calls the meeting to order at 1:04 p.m. Introduces Troy Anderson, intern to Chair Milne. Opens the informational meeting.
<u>INFORMATIONAL</u>		

<u>MEETING</u>		
<u>Overview of the Oregon Health Plan</u>		
020	Barney Speight	Acting Oregon Health Plan Administrator, submits and presents written information outlining the Oregon Health Plan (OHP) (EXHIBITS A, B). * discusses voluntary and private sector components of the OHP
035	Hersh Crawford	Director, Office of Medical Assistance Programs, submits and presents written information outlining the Oregon Health Plan (EXHIBIT C). * comments on Medicaid expansion and reform
050	Speight	Continues presentation.
107	Chair Milne	Asks if the Health Resources Commission (HRC) is still intact.
110	Speight	Responds affirmatively. * HRC still exists as a nine member body. * HRC has a voluntary task force that reviews scientific literature and testimony. * HRC examines technology used in the medical community.
130	Speight	Continues presentation.
168	Rep. Piercy	Asks if patients are followed through the system from the time they enter until the health care interventions have been put in place and they go on with daily living.
178	Speight	* Explains that follow up is done more for academic research to look at the effectiveness of certain health interventions over a ten or twenty year period. * Personalized tracking is done at the clinical level.
200	Rep. Piercy	Asks if studies are conducted to determine how appropriate health care is provided on the basis of gender or ethnicity.
212	Speight	* Most of the private sector surveys that occur at the health plan level do look at differences of performance along the lines of gender, and to a lesser extent along the lines of ethnicity.
220	Crawford	The Office of Medical Assistance Programs does a number of quality assurance studies. * client satisfaction surveys

		* external quality review surveys
238	Speight	Continues presentation.
265	Speight	Continues presentation with comments on the Oregon Medical Insurance Pool (OMIP).
300	Rep. Lokan	Asks if OMIP is open to anyone or if income is a factor.
305	Speight	* not income related * must have not been able to receive other coverage because of a pre-existing condition
310	Rep. Kruse	Asks if there are costs that are being spread across the entire health industry. * Costs are spread by increased premiums of private sector policy holders.
318	Speight	There is about 3.1 million dollars per year of costs that are spread across 2 million insured or re-insured lives.
325	Rep. Kruse	Asks if there are projected figures of future increases.
333	Speight	Knows of no proposed increases.
340	Chair Milne	Asks about enrolled members in OMIP referred to on page 8, EXHIBIT A .
345	Speight	People will enroll in OMIP and then drop their coverage for a number of reasons.
353	Rep. Harper	Asks the Chair for the courtesy to introduce his daughter, Katie.
356	Chair Milne	Responds affirmatively.
358	Rep. Harper	Introduces his daughter, Katie.
363	Chair Milne	Asks if there is an effort to help people move back into another program.
370	Speight	OMIP and the OMIP governing board receive many questions about clients wanting to move into other health insurance programs.
395	Chair Milne	* Comments on the importance of tracking this information. * A focus of the committee must be finding ways to help people move into different health insurance programs that are less costly.
418	Speight	The best solution for OMIP participants is employment that offers group coverage.
	Chair	Asks about ages of participants and whether tracking measures

425	Milne	on clientele are in place.
430	Speight	Cites information from the third quarter, fiscal year 1995-96. * average age was 51 years * 61percent were female and 39 percent were male * will make a list available of the top 25 health conditions
460	Chair Milne	Asks if there are health conditions that can be eliminated with alterations in lifestyle.
465	Speight	With this population the conditions being treated are more chronic.
TAPE 4, A		
040	Speight	Continues presentation. * Insurance Pool Governing Board (IPGB)
075	Rep. Devlin	Asks if an employee with IPGB coverage, coverage that doesn't have an insurance mandate, can get needed care through the OMIP plan.
079	Speight	Responds negatively.
085	Rep. Devlin	Asks if a dependent of said employee can be serviced through OMIP if their condition is not within the coverage of an IPGB plan.
095	Speight	The service that they required would be self paid.
100	Speight	Continues presentation.
150	Speight	Continues presentation.
200	Speight	Continues presentation.
225	Speight	Continues presentation.
285	Rep. Piercy	Asks about the availability of statistics on women covered under this plan.
290	Speight	Will follow up on request for statistics.
295	Rep. Piercy	Asks for statistics based on ethnicity to be included.
297	Speight	Will provide committee with requested statistics.
303	Rep. Kruse	Asks for cut off line lists and information that has to do with ranking clients eligibility.
320	Speight	Agrees to deliver requested information.
328	Rep. Harper	Asks questions about information provided on page one, EXHIBIT B.
340	Speight	Responds.
347	Rep.	Asks for the number of people that are represented by the 28

	Harper	percent figure in last bullet of page one, EXHIBIT B.
358	Speight	The 28 percent figure represents approximately 150,000.
375	Rep. Devlin	Asks about people who decline coverage.
380	Speight	Will provide committee with requested information.
390	Rep. Devlin	Asks if there are low wage employers who at one time provided partial coverage to their employees then discontinued that practice assuming that the employee could go to the OHP.
395	Speight	Not aware of studies that refer to Rep. Devlin's question.
TAPE 3,B		
012	Rep. Devlin	Asks for clarification on what age constitutes a child.
015	Speight	* 17 years of age and younger
019	Rep. Taylor	Asks about OMIP outreach.
023	Speight	Carriers know about this coverage and provide information to their clients.
030	Rep. Harper	Asks for information on the line that must be drawn for providing coverage.
037	Crawford	The lines that Rep. Harper is referring to are used mainly in the Medicaid portion of the OHP.
048	Chair Milne	Comments on the interest of the committee to get all Oregonians insured while maintaining concern over the cost that this will entail.
052	Chair Milne	Asks about health coverage for 18 year olds who are employed and uninsured.
060	Speight	Responds with comments regarding 'head of household' issues.
070	Rep. Lokan	Asks how college students fit in the information provided in EXHIBIT B.
073	Speight	Will provide committee with requested information.
115	Rep. Piercy	Asks about an insurance program that is aimed at children.
120	Speight	Currently the Medicaid Program covers children under the age of 6. * The Oregon Health Counsel is looking into creating incentives for children's coverage. * age-rated health care
154	Crawford	Presents overview information of the Medicaid portion of the OHP.

208	Rep. Devlin	Asks about coverage for refugees or people seeking asylum.
210	Crawford	There are some exceptions that exist for certain refugees and people seeking asylum.
220	Rep. Lokan	Asks about an existing residency requirement.
224	Crawford	* One must be an Oregon resident. * For American citizens, no required time frame exists to establish residency in Oregon.
240	Rep. Lokan	Asks about the possibility of people moving to Oregon to gain access to the Oregon Health Plan.
243	Crawford	Has not seen people coming into Oregon for health insurance.
250	Chair Milne	Asks about the necessary documents needed for an alien to prove having met the 5 year residency requirement.
255	Crawford	* These people will have an immigration card.
275	Rep. Taylor	Voices concern for the children of these families.
292	Crawford	Responds with information on illegal aliens. * Emergency services are available. * Prenatal care is excluded from emergency care.
300	Rep. Piercy	Asks if there is some kind of tracking to determine what not covering these people will cost Oregon.
304	Crawford	There is information on the effects of not providing prenatal care.
310	Crawford	Continues presentation.
353	Chair Milne	Asks for comments on how the state is collecting premiums.
360	Crawford	* collection through billing * 75 percent of people required to pay premium are paying * average premium around \$14.00
380	Rep. Piercy	* Asks how many higher education students moved off the OHP because of their student status. * Asks how many students pulled away from school in order to maintain health care.
389	Crawford	No information of this nature is available.
TAPE 4, B		
003	Crawford	Continues presentation.

095	Crawford	Continues presentation.
105	Rep. Lokan	Asks how "Mental Health" is defined in the Oregon Health Plan.
108	Crawford	Mental health services are determined by the Health Services Commission.
130	Rep. Taylor	Asks about the decrease in plans available.
135	Crawford	* plans have consolidated. * plans have dropped
152	Rep. Taylor	Asks about the number of health plans available under OHP in different counties.
158	Crawford	Not all of the plans are available in all of the counties.
162	Rep. Piercy	Asks why two counties have health plans that are not fully capitated.
168	Crawford	* small numbers of providers * providers deciding not to participate in managed care
170	Crawford	Continues presentation.
240	Crawford	Continues presentation.
300	Crawford	Continues presentation.
314	Rep. Piercy	Asks about who is being surveyed.
318	Crawford	* participants are selected randomly
325	Rep. Piercy	Comments that health care needs are different for different populations.
332	Crawford	Studies do exist on women's health issues.
345	Rep. Taylor	Asks how the older, previous enrollees, are monitored. Asks if previous enrollees noticed a lack in their coverage because of the influx of new members.
370	Crawford	The biggest change that previous members would have noticed is that benefits increased.
390	Rep. Piercy	Asks about charity care.
TAPE 5, A		
003	Crawford	* people receiving emergency services without the ability to pay
035	Chair Milne	Comments on the need for clarity between what constitutes charity care and what constitutes emergency room visits and the importance of educating the public of these differences.

050	Crawford	Concurs with Chair Milne's comments. Continues presentation.
083	Rep. Devlin	Wants to be informed about federal changes in funding for OHP.
100	Crawford	Will send information on the Demonstration Waiver under which the Oregon Health Plan operates.
111	Chair Milne	* Reminds the committee about the schedule for Monday, January 27, 1997. * Adjourns the meeting at 3:03 p.m.

Submitted By, Reviewed By,

Diane M. Quinones, Lori A. Long,

Administrative Support Administrator

EXHIBIT SUMMARY

A - Oregon Health Plan Overview, Speight, 12 pp

B - Facts Sheet on Health Care Coverage, Speight, 6 pp

C - Oregon Health Plan, Crawford, 15 pp