Cover Oregon: Oregon’s Health Insurance Marketplace

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Health Insurance Health Care
The Triple Aim

① Improved Health
② Lower Cost
③ Better Experience of Care
Traditional Approach to Balancing Budgets

• Cut reimbursement
• Cut services
• Cut people
OR: Changing How Care is Delivered

- Reduce waste
- Accountable for health outcomes
- Create more local accountability
- Align financial incentives
- Create fiscal sustainability
- Reduce disparities
- Better coordination of care
Oregon Health Plan

- 50% of babies born in Oregon
- 16% of Oregonians
- 85% of Oregon providers
- 11% percent of total state budget
- 40% are people of color
COVER OREGON

- Oregon’s Health Insurance Exchange
- Created in 2011 by Oregon Legislature
- Formed as public corporation
- Key piece of Affordable Care Act
COVER OREGON’S MISSION

Improving the health of all Oregonians by providing health coverage options, increasing access to information, and fostering quality and value in the health care system
NEW PARADIGM

• No one can be denied, no lifetime limits
• Carriers must spend 80% of premiums on care
• Health plans held accountable for quality
• Essential health benefits:
  ▪ Ambulatory patient services
  ▪ Emergency services
  ▪ Hospitalization
  ▪ Maternity and newborn care
  ▪ Mental health and substance use disorder services, including behavioral health treatment
  ▪ Prescription drugs
  ▪ Rehabilitative and habilitative services and devices
  ▪ Laboratory services
  ▪ Preventive and wellness services, and chronic disease management
  ▪ Pediatric services, including oral and vision care
ONE HOUSE ONE DOOR

Individuals and Families

Small Employers

Network of Community Partners and Agents/Brokers
<table>
<thead>
<tr>
<th>Metal Tier Choice</th>
<th>Carrier A</th>
<th>Carrier B</th>
<th>Carrier C</th>
<th>Carrier D</th>
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<td>Platinum</td>
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<td>$420</td>
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<tr>
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States with Organizations That Have Received Federal Loans to Establish a CO-OP

SOURCE Department of Health and Human Services, “New Loan Program Helps Create Customer-Driven Non-Profit Health Insurers,” Updated December 21, 2012. NOTE One CO-OP has applied to operate in Iowa and Nebraska, while two CO-OPs have applied to operate in Oregon.
* Indiana and Tennessee have considered expanding with variation.
Health Insurance Marketplace by State
<table>
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<tr>
<th>ANTACIDS</th>
<th>DENTAL NEEDS</th>
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<tr>
<td>LAXATIVES</td>
<td>MOUTHWASH</td>
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<tr>
<td>INCONTINENCE</td>
<td>HEALTH CARE</td>
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