



Oregon Joint Task Force on the Bridge Health Care Program: Collaborating to Design an Affordable Coverage Program for Oregonians

During the 2022 Oregon Legislative Session, USofCare and OSPIRG worked with a diverse coalition of consumers, clinicians, and advocates who supported legislative champions to pass [HB 4035](#). HB 4035 will help thousands of Oregonians access and maintain health coverage and **authorizes the creation of a task force to develop a plan to create a “Bridge Plan” which will provide coverage for Oregonians with incomes just above the Medicaid eligibility threshold, between 138% & 200% of the federal poverty level (FPL).**

- ★ USofCare and OSPIRG have been [actively engaged](#) in [public meetings](#) to inform the **structure of the Bridge Plan.**
- ★ USofCare continues to work with partners in Oregon to support a successful Bridge Plan that is designed with the flexibility to **allow for the future development of a [public health insurance option](#) to help even more Oregonians afford care in the future.**
- ★ The Oregon Health Authority (OHA) is also working with the Oregon legislature in the 2023 session to transition Oregon to a State-based Marketplace by 2026.

In September 2022, the Bridge Plan Task Force released [preliminary recommendations](#) for implementing the Bridge Plan. The recommendation for the **federal pathway for implementation creates a potential pathway to implementing a [public option](#) in the future.**

- ★ Recommendations for use of 1331 funding
 - Establish the Bridge Plan through a 1331 Basic Health Program (BHP), with a phased implementation. The OHA will continue to explore potentially **using a 1332 waiver in the future to allow Oregonians the “optionality” to enroll in the Bridge Program or subsidized marketplace coverage.**
- ★ Recommendations on how OHA can best administer the program
 - [Coordinated Care Organizations](#) (CCOs) should be required to accept enrollees, and enrollment procedures should emphasize continuity of care and provider access.
 - OHA should request **modification to the Healthcare.gov platform or a state operated platform** should be used to allow enrollment through the Marketplace.
 - OHA should align contracting and implementation processes to existing Oregon Health Plan (OHP) and timelines to minimize CCO administrative burden to operate the program.
 - Capitation rates should enable CCOs to pay providers higher levels than OHP.
 - The BHP should provide adequate reimbursement for safety net providers.
- ★ Recommendations on the best benefit design
 - The Bridge Plan should fully align with the OHP benefits, including adult dental coverage and all essential health benefits.
 - There should be **no enrollee costs**, including no monthly premiums and no out-of-pocket costs to access services.
 - The BHP should request waiver of the federal requirement to offer at least two BHP plans to eligible consumers.