



October 31, 2022

Bridge Plan Task Force Members

RE: 11/1/22 Joint Task Force on the Bridge Health Care Program Meeting  
900 Court Street NE, Room 453  
Salem, OR 97301

Dear Members of the Bridge Plan Task Force:

Thank you for the opportunity to provide comments ahead of the Bridge Plan Task Force's (BPTF) planned November 1, 2022 public meeting. United States of Care (USofCare) appreciates the opportunity to weigh in and share our perspective based on our experience in Oregon and other states pursuing our [mission](#) to ensure people have access to high-quality, affordable health care regardless of health status, social need, or income.

In May 2022, USofCare released its [United Solutions for Care](#), a one-of-a-kind set of twelve concrete and achievable solutions to help build a fairer health care system. These twelve solutions are derived from four goals to address what is lacking in people's health care. Two of these goals for the health care system are that people should have coverage that is both [dependable](#) and [affordable](#). **We applaud the BPTF as it constructs a Bridge Plan that centers these two goals, ensuring that people with incomes between 138% and 200% of the federal poverty level (FPL) have comprehensive, accessible health care through the Bridge Plan.**

The results from the BPTF-commissioned microsimulation by Manatt Health and Oliver Wyman include a number of encouraging takeaways. Thanks to the expanded advanced premium tax credits (APTCs) extended under the American Rescue Plan Act (ARPA) in 2021, the overall enrollment of the population on the marketplace remains relatively stable once people with incomes below 200% FPL are removed for the Bridge Plan. Unfortunately, that masks not-insignificant changes people enrolled in these plans may face when the Bridge Plan goes into effect. **As average premiums for silver plans on the marketplace are expected to decrease, average subsidies tied to these plans will also decrease for all people enrolled in the marketplace, meaning people have less "purchasing power."** USofCare is concerned that this will push people to choose plans that have higher cost-sharing and out-of-pocket costs, putting them at increased financial risk.

The microsimulation suggests that the Bridge Plan's introduction will cause [more than 7,000 people](#) currently enrolled in gold plans to shift to silver or even bronze plans as their premiums increase. While their [premiums could drop](#), their [deductible](#) could rise thousands of dollars, subjecting them to more unpredictable and higher amounts of cost-sharing. **While the BPTF's primary task has been to create a comprehensive Bridge Plan for people**

**with incomes under 200% FPL, it is also charged with developing mitigation strategies for impacts on the individual market.** The microsimulation notes the unequal impacts by age and income of the Bridge Plan on the individual market, which the BPTF should pay special attention to in further developing recommendations. **We continue to urge the BPTF to continue to consider mitigation strategies for people not eligible for the Bridge Plan – people with incomes above 200% FPL – to prevent any increased cost-sharing this population may face.** This could include recommendations for Oregon to take [action](#) against issuer gaming with regards to “induced demand factors,” similar to the [protections](#) put in place by Colorado’s Division of Insurance in 2021.

We thank the BPTF for its tireless work to improve the coverage and affordability options for low-income and all Oregonians and we appreciate the opportunity to submit these comments. Should you have any questions regarding these comments, please don’t hesitate to contact Kelsey Wulfkuhle at [kwulfkuhle@usofcare.org](mailto:kwulfkuhle@usofcare.org) or Eric Waskowicz at [ewaskowicz@usofcare.org](mailto:ewaskowicz@usofcare.org).

Sincerely,

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