Memo

From: Tina Edlund

cc:

Date: September 2, 2014

Re: Project Status Update

I'm writing to give you an update on the Transition Project and some adjustments that are being made to the project plan for November Medicaid enrollment. I want to keep everyone up to speed both on the status of the project and also what I will be monitoring to ensure I have timely information and can make future adjustments to the project as needed.

The Qualified Health Plan (QHP) to the Federally Facilitated Marketplace (FFM) project is on track. Below are some of the recent developments:

- Testing for the new public-facing application and enrollment landing page that has been discussed at Cover Oregon board meetings is on track. It will direct people to healthcare.gov after consumers answer some screening questions. The URL for this page will be OregonHealthCare.gov. It is going through testing and will be live prior to open enrollment.
- 15 carriers are participating in the Oregon Exchange Marketplace with approximately 140 medical plans and 26 dental certified plans for sale on the FFM.
- 10 carriers have on-boarded to FFM successfully, five are in progress. On-boarded carriers are beginning testing with FFM

The OHP/Medicaid Transition Project is on track with some adjustments that I believe are an improvement for the consumer and for the project.

One identified risk for the project was the need for Oracle to provide new production environments for development work. In anticipation of this risk increasing after Oracle's lawsuit against the state and the state lawsuit against Oracle were filed, I began discussions with CMS about a mitigation plan that allows us to keep moving forward without a dependency on the Oracle system. Those discussions continued last week and we have an agreement as part of our ongoing partnership to provide the best service to Medicaid clients.

The agreed-upon plan takes Oracle out of the equation and allows us to provide a better experience for Medicaid applicants in November. It will also provide a reduced risk path towards a fully functional Oregon Medicaid portal next year.

Here is the mitigation plan:

- Include Medicaid enrollment through healthcare.gov as one of the options from the application and enrollment landing page. This will stay in place until we have a fully automated self-service portal available next year at OHA.
- Add Medicaid screening questions to the application and enrollment landing page (OregonHealthCare.gov) which will connect people to the best place to apply for Medicaid coverage. We estimate that there will be approximately 25,000 monthly new Medicaid applications and that the majority will find healthcare.gov to be the best option. Pregnant women, people with disabilities and others will be best served directly by OHA and the screening questions will help them determine that.
- Starting November 15, direct all current Medicaid enrollees who need to reapply for a renewal to the application and enrollment landing page so they can use the screening questions to find the best application option. Until then, OHA will also continue the expedited process for redeterminations already underway. For more information about that you can go to OHP.Oregon.Gov
- Establish a process where CMS will send OHA a data file with new Medicaid enrollments that will be uploaded directly into OHA's MMIS system. Once they are enrolled, customer service for Medicaid clients remains at OHA.
- Continue current schedule for system testing of eligibility rules engine and back office processes so we can be sure to leverage that work as a foundation for the next phase of the project.
- Move off of the Oracle Managed Cloud Services for production to the state data center as soon as feasible.

We are updating the transition project to reflect both the mitigation and the fully automated Medicaid website at OHA next year. An additional effect of the adjusted project plan is that redeterminations will be fully integrated into Phase 2 of the project.

As you know, the weekly status reports from the Transition Project and the vendor, the quality assurance reports and other documents are posted online. I have also briefed our quality assurance vendor, who will be incorporating this reduced-risk path into their monthly quality control and quarterly assurance reports. Even with these mitigations, this continues to be a large project with tight timelines, and new risks are likely to emerge. This close monitoring allows us to make necessary adjustments as we go along.

Please do not hesitate to contact me with any questions you may have.