

Vital signs

Uncertainty about the fate of the Affordable Care Act spells confusion for Oregon Health Plan patients and providers, and leaves the state facing tough budget decisions

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The Oregon Health Plan is reputed to be one of the most innovative and ambitious Medicaid programs in the nation.

The program provides health care for 1 million people, or nearly 25 percent of Oregon's population – anyone who makes below roughly \$16,000 a year or is disabled or elderly.

Oregon Health Plan patients receive their care through coordinated care organizations, or CCOs, which were created in 2012 to coordinate the physical, mental and dental health care of Oregon Health Plan patients. If a patient goes to the doctor and shows signs of anxiety, the doctor can connect the patient with mental health care in the same building. Electronic health records ensure that a doctor or a dentist or an emergency room nurse can see which medications a patient is on. Through emphasis on preventive and primary health care, medical staff helps patients stay healthy and out of the emergency room.

Oregon has received billions of dollars from the federal government to help fund the state's 16 CCOs, partially because the coordinated-care model is expected to cut health care costs while improving people's health.

According to the state, that is already happening: Since 2012, Oregon's CCOs have already saved \$1.4 billion in health care costs. Emergency room use has been cut by a third, and preventive health care – such as doctor's visits, immunizations and teeth cleanings – have all increased dramatically.

That progress now hangs in the balance with the likely repeal of the Affordable Care Act.

Repealing the ACA became the biggest campaign promise made by President Donald Trump and the Republican caucus, and a vote is expected fairly quickly. The ramifications of a repeal are still unknown.

The structure of Oregon's CCOs is not threatened. A new federal waiver allowing them to continue operating was approved in mid-January and is in effect until January 2022.

What is at stake is how much federal funding will be available to fund the Oregon Health Plan, whether the plan will continue to provide health care for its one million members – including 350,000 Oregonians now on the plan due to the expansion of Medicaid – and how destabilizing any change to the Affordable Care Act will be for provider networks and health care programs.

With the Affordable Care Act's fate unknown, Oregon is preparing to take on more of the responsibility of providing health care for the state's most vulnerable residents through legislation and tax proposals.

One of the biggest challenges state

government – including the Oregon Health Authority, which oversees the Oregon Health Plan – and health care providers face is uncertainty.

The providers

What it means to repeal the ACA is unclear, said Janet Meyer, the executive director of HealthShare of Oregon, a CCO that serves the Portland metropolitan area. "It's a very complicated set of policies and regulations and programs. There's a lot of confusion."

It's not clear if the entire health care law will be repealed or if popular parts of it – including allowing children to remain on their parents' plan to age 26 and the prohibition on denying health insurance to people who have a pre-existing health condition – will be kept in place.

It's also not clear what will replace the law. Despite the fact that the Republican-controlled House of Representatives has voted dozens of times in recent years to repeal or change the ACA, leaders in the Republican Party have not released draft legislation to replace it.

The uncertainty prompted Oregon Health & Science University President Joe Robertson to announce in mid-January that OHSU would significantly reduce hiring, almost tantamount to a hiring freeze, until it became clearer what the state's budget and federal funding for Medicaid and other health programs would be.

Rob Soans is a physician assistant who has practiced primary care for 20 years at Manzanita Urgent, Primary and Specialty Care, a clinic in Nehalem, Oregon.

One can tell from the clinic's name that Soans, on any given day, sees the gamut of health conditions in the rural, impoverished community.

On a recent Saturday, Soans performed 11 house calls in 14 hours. One elderly woman had lost her glasses, so she could not see the numbers on the syringes she uses to give herself insulin. Soans gave her a pair of reading glasses he had bought at Costco.

He told another woman, a 29-year-old who brought her 2-year-old child with her to the clinic, that she has cancer. He got phone calls and texts throughout the day from patients.

In addition to children immunizations, routine checkups, and helping people manage chronic conditions, people suffering from heart problems, burns, broken limbs, the flu and other urgent ailments walk through the door.

"I serve everybody who walks in the door," Soans said.

Like other medical providers, he is frustrated by

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