

Section 1332 of the Patient Protection and Affordable Care Act (PPACA) State Innovation Waivers – Reinsurance Waiver Quarterly Report

Reporting Instructions: Use the following template to capture data for quarterly 1332 waiver grant reporting, as specified in 45 CFR 155.1324(a), and referenced in your grant specific terms and conditions (STC). Quarterly reports are due 60 days following the end of each calendar quarter.

STATE:

A. GRANTEE INFORMATION			
1. Reporting Period End Date Mar 31, 2019		2. Report Due Date May 31, 2019	
3. 1st Quarterly Report <input checked="" type="radio"/>	2nd Quarterly Report <input type="radio"/>	3rd Quarterly Report <input type="radio"/>	4. Federal Agency and Organization Element to Which Report is Submitted Consumer Information & Insurance Oversight (CCIIO)
5. Federal Grant Number Assigned by Federal Agency SIWIW180003-01-60	6a. DUNS Number 809579451		6b. EIN 93-0952020
7. Recipient Organization Name Department of Consumer and Business Services State of Oregon			
Address Line 1 350 Winter Street NE			
Address Line 2			
Address Line 3			
City Salem	State Oregon		Zip Code 97301
Zip Extension 3875		8. Grant Period Start Date 01/01/2018	
9. Grant Period End Date 12/31/2022			
10. Other Attachments (attach other documents as needed or as instructed by the awarding Federal agency)			

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B. REPORT CERTIFICATION	
11. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.	
11a. Typed or printed name and title of Authorized Certifying Official John P. Jones, Deputy Administrator of Operations	11b. Signature of Authorized Certifying Official
11c. Telephone (area code, number, and extension) (503) 947-7497	11d. E-mail address John.P.Jones@Oregon.gov
11e. Date report submitted (month/day/year) 	
C. PROGRESS OF SECTION 1332 WAIVER - General	
<p>12. Provide an update on progress made in implementing and/or operating the approved 1332 waiver. On March 13,2019, The Governor of Oregon signed into law HB2010 extending the reinsurance program through 2026. HB2010 will supersede our current law ORS 743B.800, the temporary provision for the Oregon Reinsurance Program(ORP) on January 1, 2020.</p> <p>HB2010 increases premium assessments on health benefit plans from 1.5% to 2.0%. The funds received are used to fund the state portion of the reinsurance program and supplement state funding of Medicaid (the Oregon Health Plan).</p> <p>The agency established an Inter-agency Agreement to transfer funds from the assessment to the Oregon Health Authority for Medicaid. To date we have transfered approximately \$188 million to Oregon Health Authority while building the state contribution to reinsurance fund to roughly \$50 million.</p>	
<p>13. Describe any implementation and/or operational challenges, including plans for and results of associated corrective actions. After the first quarter, only report on changes and/or updates, as appropriate.</p> <p>Grant Reporting We updated administrative roles in Grant Solutions for J.P. Jones, DFR Deputy Director of Operations now serves as the Organizational Authorized Official. Joel Payton, ORP Program Manager, will serve as the Program Director within Grant Solutions.</p> <p>Operations</p>	

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Our Claims Advisory Group, made up of agency subject matter experts for examining and auditing, will meet with the 7 health insurers who will be submitting claims. The meeting will outline the tasks expected from each insurer to ensure the validity of the claims, payment dates, auditing, parameters and Protected Health Information. Next, the we have scheduled a Risks Assessment Group to help identify any risk to the program. The group will also identify mitigations for each risk.

Policy

We will be scheduling advisory meetings to draft Administrative Rules for the implementation of HB2010. This will include proposals for attachment points, cap and coinsurance rates. We are planning to have these rules adopted by January 1, 2020.

Reporting Dates and Time-lines

Important Dates Met:

**05/14/18: Insurers Pay first quarterly assessment (2018) via HB 2391
06/28/18: Post Award Public Forum held
08/14/18: Insurers pay second quarterly assessment (2018) under HB 2391
08/23/18: Internal Advisory Group- claims processing
08/31/18: 2nd Quarterly Report Due to CMS
09/15/18: ORP submits SLCSP and total non-group premium data for 2019
10/29/18: ORP Administrative Rules filing
10/31/18: CMS notifies ORP of 2019 pass-through funding (pending)
11/14/18: Insurers pay third quarterly assessment (2018) under HB 2391
11/29/18: 3rd Quarterly Report Due to CMS
12/31/18: Health Insurers incur claims for reimbursement
01/01/19: Target date for the adoption of final ORP administrative rules
01/01/19: Prepare Draft for Annual Report to CMS
02/14/19: Insurers pay fourth quarterly assessment (2018) under HB 2391
03/01/19: 4th Quarter Report Due Due to CMS
03/30/19: Annual Report extended for actual average individual market premium rate report for CY2018
04/30/19: Annual report Due to CMS
05/15/19: Insurers pay first quarterly assessment (2019) under HB 2391
05/30/19: 5th Quarterly Report Due to CMS
05/31/19: Last day for ORP to host annual Post-Award Forum**

Future Important Dates:

**06/30/19: Insurers Submit all Paid Claims to ORP
07/15/19: Insurers report claims data for reinsurance-eligible individuals
08/01/19: DCBS audits Insurers claims for validation
08/14/19: Insurers pay second quarterly assessment (2019) under HB 2391
08/15/19: ORP submits Pass-Through Funding Report to CMS
08/29/19: 6th Quarterly Report Due to CMS
10/15/19: Insurance Commissioner sets Coinsurance rate for reimbursement**

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10/22/19: ORP Annual CMS Post Award Forum

10/31/19: The ORP reimburses insurers for 2018 eligible claims

11/14/19: Insurers pay third quarterly assessment (2019) under HB 2391

11/29/19: 7th Quarterly Report Due to CMS

01/01/20: Adopt Administrative for HB2010

02/14/20: Insurers pay fourth quarterly assessment (2019) under HB 2391

