



Community Advisory Council (CAC) Meeting
Minutes

March 7, 2024, 5:30 pm

In person meeting available at Advanced Health

Virtual attendees Click here to join the meeting (Microsoft Teams)

Call: 1-971-323-0640 (toll free); Conference ID: 457 909 342#

Time	Agenda Item	Action	Discussion Leader
12:00 pm	Welcome		Sam Baugh
	Council Business <ul style="list-style-type: none">• Roll call Katrinka McReynolds, Anna-Marie Slate, Kathy Abbott, Katie Gonzalez, Avery Horton, Shannon Hunter, Jeanifer Imbruglia, Coreen Lee, David Rupkalvis, Sara Stephens, Stefanie Vaughn, Daniel Wells, Laura Fitouri, Guests: Brandon Burson, Colene Hickman, Danita Tracy Carter, Kera Hood, Lisa Fischkorn, Sam Baugh, Mellissah Hendrickson, Zachari O'Neill, Krystal Walden, Kristy<ul style="list-style-type: none">• Vote Results 12 of 21 votes were received. 10 to 1 David was voted in as chair. Vote of 7 to 5 for Anna Marie to be vice chair.<ul style="list-style-type: none">• Feb 1, 2024, minutesChanges and Corrections invited. Members had to wait 8 months for an appointment and the minutes stated 8 weeks in error.Motion to approve the minutes made by Anna Marie seconded by Kathy Abbott.<ul style="list-style-type: none">• Approve AgendaMotion to approve the agenda made by Anna Marie and seconded by Kathy Abbott<ul style="list-style-type: none">• Suggestion Box https://forms.office.com/r/B9NTwd9Mte• Recommendations tracker.	Approval	David Rupkalvis
	Open Floor/feedback loop voting CAC Representatives- <ul style="list-style-type: none">• Consumer Representatives<ul style="list-style-type: none">○ Problems and Areas/Opportunities for Improvement <p>CAC member had issue with reimbursement time. She was expecting a specific amount and was showing a discrepancy of</p>	Discussion / Action	

over \$200 from what she was reimbursed. I am required to call ahead with all the information then have it signed by the provider and turn it in for reimbursement. My suggestion is that we should get notified of the reimbursement so that we can see what ride was reimbursed for what amount. We have no way to balance our reimbursements and make sure they are correct. These reimbursements come through Bay City Brokerage.

Concern about the charter. There is a term time limit in our charter, and we have several CAC members that are past that time limit. The time limit is 3 two-year terms. Once you have served for 6 years you will take a break. As CAC members we do need to try to recruit new members. The Charter will be up for review this year.

CAC member reporting issue with a vitamin that may help her condition but is not FDA approved. Waterfall may be able to cover the Vitamin.

How many consumer members knew about flex funds? Only half in the room. Flex funds can be requested by members. There is a form on our website that you can fill out. You can also contact customer service to fill out the automated form. There is a section in our member handbook about flex funding as well.

Perhaps you can send it out by email or PDF to the providers so that the providers can help educate their patients.

Recommendation to place Did you Know flyers about additional benefits at providers offices to look at while you wait.

One of the CAC members saw Advanced Health on the news to announce the HRSN climate roll out.

Recommendation to have customer service be able to help educate members who are calling.

CAC member reported that all his prescriptions were denied. Anyone having issues with denials should call customer service. They may be able to help navigate the reason it was denied and possible solutions.

CAC member that is a case worker at the Devereaux center has a client that needs a wound vac for over two weeks and has not been able to get it approved. Advanced Health has sent some employees out to try to help get approval, but the process is still taking longer than it should.

- **Community Partner Representatives**

Waterfall is doing a colon cancer screening clinic. Anyone 45 years and older should be tested. We will be sending out

	letters to advertise and the costs are being covered by Advanced Health.		
	OHA update		Sent by email
	Social Determinants of Health Presentation attached to minutes.	Discussion	David Rupkalvis
	CHIP planning session (Data Walk) Please join us on March 21 st at the North Bend library from 1PM-3PM for a data walk and begin the work for our new Community Health Improvement Plan. Invitation will be attached to the minutes.		Sam
	Charter training – Duties of the CAC The duties of the council include: 1. Finding and supporting preventive care practices by Advanced Health. 2. Oversees Advanced Health to develop and draft a Community Health Assessment (CHA) 3. Adopt a Community Health Improvement Plan (CHIP) based on the CHA. 4. Yearly publish a CHIP progress Report 5. Have a role in looking at Social Determinants of Health and Equity (SDOH-E). Keeping the cost under the Supporting Health for All through RE-investment (SHARE) Initiative. 6. The CAC Helps decide how Health Related Services (HRS) invests in the community. 7. Offer helpful information to Advanced Health. 8. Help Advanced health with special projects as asked. Three opposed. One abstained from bringing the issue regarding not approving a medication that is not FDA approved before the board. Added to the recommendation's tracker.		Sam
	Open Floor – Public comment This sat is free movies at the Egyptian. 2PM is the pursuit of happiness. There will be giveaways.		David Rupkalvis
	Adjourn	Action	David Rupkalvis
Next Meeting	Thursday, April 4, 2024 12PM		

OHA Update – March 2024 – Advanced Health Coos County Community Advisory Council

New climate-related resources available to some OHP members

Oregon Health Plan (OHP/Medicaid) members with a medical need and who are facing certain life changes may now qualify for [new climate-related benefits](#).

These benefits include devices that promote healthy temperatures and clean air such as air conditioners, heaters and air filters, as well as mini refrigeration units for storing medications. Portable power supplies to operate medical equipment (i.e., ventilators during power outages) may also be available as a new benefit.

Eligible members are experiencing life transitions and often face social injustices, including but not limited to those currently or previously involved in the child welfare system, homeless or at risk of becoming homeless, or released from incarceration within the last year.

“People with lower incomes and chronic conditions are among those most likely to experience heat exhaustion, heat stroke or complications of other health conditions related to extreme climate events,” said Dave Baden, deputy director of OHA. “By connecting wrap-around health benefits to traditional Medicaid coverage, Oregon is recognizing that non-medical factors influence health outcomes. Access to these services will reduce health disparities and offer life-saving resources to people in Oregon.”

The new climate-related benefits are part of Oregon’s federally funded expansion of OHP coverage to include [health-related social needs](#) (HRSN) services, which can help maintain health and well-being but aren’t traditionally thought of as medical services.

OHP members interested in receiving climate devices should [contact their coordinated care organization](#) (CCO) to learn more.

[Read for more](#)

Health Evidence Review Commission Listening Session for Oregon Health Plan Members

The [Health Evidence Review Commission](#) (HERC) staff will hold a listening session for ideas and concerns related to coverage of health services on the Prioritized List on **March 21, 2024, 10:00-11:30 am**

Our priority for this meeting is to hear from Oregon Health Plan (OHP) members and their caregivers and providers.

- To suggest a topic for discussion, please register by Noon Pacific time on March 11, 2024 at: <https://www.surveymonkey.com/r/March24LS>
 - Staff may contact you to discuss your suggested topic
-
- To attend as a “listen-only” participant, please self-register for the webinar at: https://www.zoomgov.com/webinar/register/WN_qbvDisUXSLis9I-2JQC-Qg
 - Please mark your calendars

Staff will be available to hear your concerns or suggested topics for HERC consideration and answer questions. HERC members will not be present, and no decisions or policy changes will be approved at this time.

Questions? Please email HERC.Info@oha.oregon.gov

Español

El personal de la [Comisión de Revisión de Evidencia de Salud](#) (HERC, por sus siglas en inglés) tendrá una sesión de escucha de ideas e inquietudes relacionadas con la cobertura de los servicios de salud de la Lista de Prioridades el 21 marzo, 10:00-11:30 A.M.

Nuestra prioridad para esta reunión es escuchar a los miembros del Plan de Salud de Oregón (OHP, por sus siglas en inglés) y a sus cuidadores y proveedores.

- Para sugerir un tema de debate, regístrese antes del mediodía (hora del Pacífico) del 11 de marzo de 2024 en:
<https://www.surveymonkey.com/r/Mar24LS-Spanish>

- El personal se pondrá en contacto con usted para hablar sobre el tema propuesto
- **Para asistir como participante "sólo oyente", inscríbase en el seminario web en: https://www.zoomgov.com/webinar/register/WN_qbvDisUXLis9I-2JQC-Qg**
 - Anótelo en su calendario

El personal estará disponible para escuchar sus preocupaciones o temas sugeridos para que sean considerados por la HERC y responder preguntas. Los miembros de la HERC no estarán presentes y no se aprobará ninguna decisión o cambio de política en ese momento.

¿Tiene preguntas? Envíe un correo electrónico a HERC.Info@oha.oregon.gov (se habla español)

CDC recommends another COVID-19 vaccine dose for people 65+

Oregonians ages 65 and older are now advised to get an additional dose of the 2023–2024 updated COVID-19 vaccine released last fall, as recommended by the Centers for Disease Control and Prevention (CDC).

“Vaccine-induced immunity can wane over time, but a second dose restores that protection, which can help keep people in this particularly vulnerable group from being hospitalized or even dying,” said Dr. Paul Cieslak, medical director for communicable diseases and immunizations at OHA. The additional dose of the 2023–2024 vaccine should be given at least four months after the first dose.



People who are immunocompromised are already eligible for additional doses of the 2023–2024 updated COVID-19 vaccine, at least two months after their most recent dose.

While the state has seen a steady decline in COVID-19-related hospitalizations and percentage of positive COVID-19 tests since late December, the virus is still circulating briskly across Oregon. OHA continues to recommend anyone who has not received the 2023–2024 updated COVID-19 vaccine to get it as soon as they can, as vaccination remains the best way for people to protect themselves against the virus.

Additionally, the CDC recently updated its isolation guidelines to prevent the spread of respiratory viruses, including COVID-19, which align with Oregon’s guidelines.

[Read for more](#)

Telehealth service to receive COVID-19 medication ending soon

The Color Health telehealth service in Oregon to receive low- or no-cost COVID-19 antiviral medication such as Paxlovid is ending after **March 31**. Additionally, the last day to receive this medication through Color Health's home delivery option is tomorrow, March 8. After that and through March 31, the only option will be pharmacy pickup.

Outside of [Color Health](#), there are a few ways for eligible people to get COVID-19 antiviral medication.

<https://lnks.gd/I/eyJhbGciOiJIUzI1NiJ9eyJidWxsZXRpbl9saW5rX2IkIjoxMTksInVyaSI6ImJwMjpjbGljaylsInVybCI6Imh0dHBzOi8vcGF4bG92aWQuaWFzc2IzdC5jb20vP3V0bV9tZWRpW09ZW1haWwmdXRtx3NvdXJjZT1nb3ZkZWxpdmVyeSlsImJ1bGxldGluX2IkIjoiMjAyNDAzMDCuOTEONzI3NjEifQ.AtCNKpJonnLmhaaX8kkzDwuCI66FPPiSaYjXG61dA8/s/2986471437/br/238457289402-I> target=""_blank"" style='position:absolute;margin-left:65.05pt;margin-top:0;width:116.25pt;height:166.5pt;z-index:251665408;visibility:visible;mso-wrap-style:square;mso-width-percent:0;mso-height-percent:0;mso-wrap-distance-left:5.25pt;mso-wrap-distance-top:0;mso-wrap-distance-right:5.25pt;mso-wrap-distance-bottom:0;mso-position-horizontal:right;mso-position-horizontal-relative:text;mso-position-vertical:absolute;mso-position-vertical-relative:line;mso-width-percent:0;mso-height-percent:0;mso-width-relative:page;mso-height-relative:page' o:allowoverlap="f" o:button="t">>

- If you are uninsured or have Medicare or Medicaid (OHP), *and* you have a prescription for Paxlovid, you can receive Paxlovid at no cost through Pfizer's patient assistance program, PAXCESS, regardless of income, insurance or immigration status. Overnight home delivery of Paxlovid is possible upon request. Enroll online for PAXCESS [here](#). Call **877-219-7225** to learn more.
- If you have private insurance and become sick, contact your health care provider or go to an in-network urgent care facility to get a prescription. Most private insurance plans will cover COVID-19 antiviral medication with possible co-pays. Those with private insurance can also enroll in the [PAXCESS](#) co-pay program for help paying for Paxlovid.
- Check with your pharmacy to see if they will prescribe Paxlovid directly to you, without a doctor's prescription. State-licensed pharmacists may prescribe Paxlovid to people [under certain conditions](#).

COVID-19 antiviral medication cannot be prescribed in advance, *in case* someone gets sick. It must also be taken within five days of symptom onset. Learn more about COVID-19 treatments, including Paxlovid, [here](#). For questions related to COVID-19 treatment options, contact the Oregon Immunization Program Help Desk, Monday through Friday, 9 a.m. to 4 p.m., at 1-800-980-9431 or alertiis@odhsoha.oregon.gov.



Register for the Upcoming 1115 Medicaid Waiver All Come and Para Todos Webinars

[¡Oprima aquí para la invitación en Español!](#)

Wednesday, March 20, 2024

10:00 AM - 11:00 AM PST (All Come)

2:00 PM – 3:00 PM PST (Para Todos)

[ALL COME](#)
[Register Here](#)

[PARA TODOS](#)
[Regístrese Aquí](#)

Audience:

Community Partners, Coordinated Care Organizations, Health and Human Services Providers, Medical Providers, Local Government, Members, and more!

Please Note: These sessions will be recorded and will be accessible post-webinar.

Resources

Community Capacity Building Funds Two-Pager:

<https://www.oregon.gov/oha/HSD/Medicaid-Policy/Documents/CCBF-Two-Pager.pdf>



Frequently Asked Questions (FAQ) – CCBF:

<https://www.oregon.gov/oha/HSD/Medicaid-Policy/Documents/CCBF-FAQ.pdf>

Stay Connected

For additional updates and information, check our website:

www.oregon.gov/1115waiverrenewal

Subscribe to updates that will be sent out in the coming months:

<https://public.govdelivery.com/accounts/ORHA/signup/37696>

FAQ:

<https://www.oregon.gov/oha/HSD/Medicaid-Policy/Documents/2022-2027-Waiver-FAQ.pdf>

Email us:

1115Waiver.Renewal@odhs.oregon.gov



programs and services. Some examples of the free help we can provide include sign language and spok
s, please [contact us](#).

OHP Bridge — Draft Rules and Community Input

Oregon Health Authority (OHA) would like your help building Oregon's upcoming expansion of health care coverage, Oregon Health Plan (OHP)

Bridge. OHP Bridge:

- Is a new category of OHP benefits that will cover more adults with higher incomes, launching in July 2024.
- Will offer OHP coverage through coordinated care organizations, with no enrollee costs.
- Will serve adults aged 19-64 in Oregon who have incomes between 138 and 200 percent of the Federal Poverty Level, have eligible immigration status, and do not have access to another form of affordable coverage.

OHA is currently drafting rules for OHP Bridge and is now accepting community input for the draft rules.

Public review and comments

The public and community partners are invited to give written feedback on the draft OHP Bridge Rules through April 21, 2024. Community input is due **April 21, 2024, 11:59 p.m. Pacific Time**.

How to send written feedback:

- By email to ohpbridge@oha.oregon.gov
- By regular mail to the address below:

Health Policy and Analytics OHP Bridge Team
Attn: Jordin Heath
421 SW Oak St, Suite 875
Portland, OR 97204

Formal comment period for draft rules

You can also provide feedback during the formal comment period for the draft rules:

- From **April 1 through April 21, 2024**, for Chapter 410 (Medical Assistance Program) rules, and
- From **March 1 through April 18, 2024**, for Chapter 309 (Behavioral Health Services) rules.

Notices of Proposed Rulemaking

These contain the draft rules, as well as information about the formal comment period and hearings.

Notice of Proposed Rulemaking for Chapter 410 rules

Notice of Proposed Rulemaking for Chapter 309 rules

Public hearing information:

For those who prefer to provide verbal public comment, OHA will also host virtual public hearings for the Chapter 410 and Chapter 309 rules.

The hearing for Chapter 309 rules is **March 18, 2024, from 1 to 2:30 p.m. Pacific Time.**

Join ZoomGov Meeting for the Chapter 309 rules (Meeting ID: 161 252 2091, Passcode: 798116)

The hearing for Chapter 410 rules is **April 15, 2024, from 1 to 2 p.m. Pacific Time.**

Join the Microsoft Teams meeting for the Chapter 410 rules (Phone number: 971-277-2343 Conference ID: 673593129)

Document accessibility:

For individuals with disabilities or individuals who speak a language other than English, OHA can provide information in alternate formats such as translations, large print or braille. Contact the Community Partner Outreach Program at community.outreach@oha.oregon.gov or by calling 1-833-647-3678. We accept all relay calls or you can dial 711.

Questions or comments?

Please email ohpbridge@oha.oregon.gov.

Help ensure families access the new Oregon Kids Credit.

Learn more about the new Oregon Kids Credit, EITC, the Oregon EIC, and the Working Family Household and Dependent Care Credit at and [free tax filing help](#) at the Oregon Department of Revenue “[tax benefits for families](#)” webpage including support from CASH Oregon at Metropolitan Family Services, <https://cashoregon.org/>. Here are tools to support outreach:

- [Printable flyers in 17 languages](#);
-

OHA partners with 44 community organizations to continue expanding public health efforts across Oregon

PORTLAND, Ore. — Oregon Health Authority’s (OHA) Public Health Division has awarded funding to 44 new community-based organizations (CBOs) to support public health equity-based work in their communities.

In 2023, the Oregon Legislature approved about \$16.95 million to support the CBO grants. The funding will also support training and technical assistance. The new grant recipients will join the existing 150 organizations currently funded by OHA Public Health Equity grants.

The OHA Public Health Division recognizes the essential role that CBOs, including faith-based organizations and community groups, play in guiding and supporting culturally and linguistically responsive public health work, in partnership with local and state public health agencies. The new funding opportunity aims to keep health equity and community priorities at the forefront of public health work.

The selection process of grantees in this second cohort prioritized specific geographic locations and priority populations to increase the reach of funds across the state. As a result, grant awardees represent organizations located in rural communities; urban communities with service gaps; organizations that address the public health concerns and priorities of people who live with disabilities; and organizations serving communities at the

intersection of multiple priority populations.

CBOs applied for and were awarded funds to develop work that best addresses the needs of the community within one or more of the following program areas:

- Climate adaptation.
- Communicable disease prevention.
- Public health emergency preparedness.

The Public Health Division works in partnership with CBOs on long-term public health efforts. CBOs will focus on work aligned with their communities' priorities in one or more of the following categories of funding:

- Health education and communication.
- Identifying and assessing community priorities.
- Supporting prevention activities.
- Policy development.

Dolly England, the Public Health Division's Community Engagement Program manager, said the 44 CBOs receiving grants offered impressive approaches to ending health inequities in Oregon.

"It's clear these CBOs know their communities well, and where the greatest needs exist," England said. "We look forward to working closely with them to ensure everyone in the communities they serve has equitable access to essential public health services."

For more information about the OHA Public Health Division or to see a full list of the Public Health Equity grant awardees, please visit OHA's CBO funding web page [here](#).

Oregon among top states keeping people covered; announces timeline for remaining renewals

More than one million people are keeping their Oregon Health Plan benefits due to Oregon's efforts to expand coverage options

SALEM, Ore. — With more than 85 percent of the state's 1.5 million renewals complete, 5 out of 6 Oregonians are keeping their Oregon Health Plan (OHP) or other Medicaid benefits.

Oregon's 85 percent renewal rate continues to be the [second highest in a national comparison of state renewal rates by KFF](#), a nonpartisan health policy organization. [KFF analysis](#) also shows Oregon also has saved more people from unnecessary renewal paperwork than any other state via the automated renewal process. Oregon's high renewal rates are also due to proactive efforts by the state to keep people covered, such as structuring the renewal schedule, extended response timelines, and the [upcoming OHP Bridge program](#) for adults with higher incomes.

During the COVID-19 Public Health Emergency (PHE), the federal government allowed states to keep people on Medicaid benefits. This ended when the pandemic emergency ended, and since April 2023 Oregon has been making sure everyone on OHP is still eligible.

At this point in the PHE unwinding process, Oregon has sent the initially planned 10 waves of renewal letters. About 6 percent of members are still responding to those initial waves. The remaining renewals, about 8 percent of the total, will occur over the summer.

Members who have not received a renewal yet should:

- Keep their address and contact information up to date.
- Check their mail or online ONE account for their renewal letter.
- Do what the renewal letter asks as soon as possible.

Anyone concerned they missed their letter should get help with their renewal via one of the ways to find help listed below.

Although most people are keeping coverage, approximately 200,000 people will lose or have reduced OHP benefits and need to consider other coverage options.

- People who do not have coverage through an employer or Medicare may be able to enroll through the Oregon Health Insurance Marketplace and get financial help. Most people who enroll through [HealthCare.gov](#) qualify for this help.
- The Oregon Health Insurance Marketplace is sending information to people who are no longer eligible for OHP benefits, advising of potential coverage options through the Marketplace.
- People who have recently lost OHP benefits can enroll anytime until July 31, 2024, or within 60 days of their benefits ending.
- For more information and ways to get help signing up for Marketplace, Medicare, or employer coverage, see "What to do if OHP is ending" below.

Extended unwinding schedule

On February 13, the federal government approved Oregon's plan for the remaining roughly 107,000 renewals.

Many of these renewals were affected by a federal request for more than 30 states to review automated renewal processes, or restorations of some [Oregon Supplemental Income Program Medical \(OSIPM\)](#) benefits. A May 2024 update to Oregon's automated

renewal process will enable Oregon to use the new process for the remaining renewals.

Renewal letters will be sent to members in four waves between June and September. Members will still receive 90 days to respond, and 60 days' advance notice before any termination or reduction in benefits. This means the final responses would be due in December 2024, and the final closures will happen in February 2025.

In the meantime, data about these renewals does not appear in the [Medical Redeterminations Dashboard](#). For consistency, data below continues to use the December total number of members affected by unwinding.

February OHP renewal data

As of Feb. 17, 2024, 1,241,196 people have completed the renewal process. This represents 85.3 percent of all OHP and Medicaid members.

- 1,029,357 people (83.6 percent) were renewed and kept their benefits.
- 187,789 people (15.1 percent) were found ineligible.
- 15,076 people (1.2 percent) had a reduction in their benefits. Most of these members lost full OHP but were able to continue Medicare Savings Programs that help pay their Medicare costs.

Find help renewing your benefits

1. Learn more about how to [renew your Oregon Health Plan](#) medical coverage.
2. Call the ONE Customer Service Center at 800-699-9075. All relay calls are accepted, and help is available in multiple languages. Wait times are lowest between 7 and 8 a.m.
3. Visit or call a local Oregon Department of Human Services office. People can find their local office at <https://www.oregon.gov/odhs/Pages/office-finder.aspx>.
4. Visit a community partner for free in-person help. To find one near you visit OregonHealthCare.gov/GetHelp(English) or orhim.info/ayuda(Spanish).

The large number of OHP renewals, along with renewals of long-term services and supports, may cause greater wait times, delays, and possible interruptions to people's OHP benefits. The fastest way members can provide an update is by going to [benefits.oregon.gov](#) and logging into their ONE online account.

What to do if your OHP is ending:

- First, **review the case summary** in your letter to make sure the information used to make the decision was correct. If that information has changed, notify the state. You can call the ONE Customer Service Center at 800-699-9075 (toll-free, all relay calls accepted) or find other options to connect at [benefits.oregon.gov](#) If the information on file for you is correct and you disagree with the decision, you can request a hearing. [Learn more about hearings.](#)

- **Explore options through an employer.** If you, your spouse, or a parent are working, you may be eligible for health coverage through that employer. Talk to your manager or Human Resources department to see if you qualify. You will have a special enrollment period to enroll mid-year due to loss of OHP benefits.
- **If you have or are eligible for Medicare:** For help understanding and choosing the right Medicare options, go to OregonHealthCare.gov/GetHelp to find an insurance agent or a counselor at the Senior Health Insurance Benefits Assistance Program (SHIBA). You can also call SHIBA at 800-722-4134.

If you need to sign up for Medicare for the first time, contact the Social Security Administration (SSA) at 800-772-1213 to enroll by phone or find a local office. You can also enroll in Medicare online at ssa.gov/medicare/sign-up.

- **Nearly 80 percent of Oregonians qualify for financial help through the Oregon Health Insurance Marketplace.** Visit OregonHealthCare.gov/WindowShop to answer a few quick questions, find out how much you can save and find out how much coverage may cost you. You can also call the Marketplace Transition Help Center at 833-699-6850 (toll-free, all relay calls accepted).
- **Need free local help finding other coverage?** Visit <https://OregonHealthCare.gov/GetHelp> to find professional help near you.

The Oregon Health Authority (OHA) and Oregon Department of Human Services (ODHS) are committed to transparency and will continue to send monthly information about medical coverage among Oregonians as the agencies continue to track the programs. Check our [ONE Eligibility Operations Dashboards](#) for more frequent updates on medical renewal data and wait times for callers to the ONE Customer Service

