



2024 Forum on Rural Population Health & Health Equity

1115 Medicaid Waiver: Opportunities for Addressing Social Determinants of Health In Rural Oregon

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2024 Forum on Rural Population Health & Health Equity

- Audio has been muted for all participants upon entry
- Moderators will assist with Q+A at the end of the presentation
- Presentation slides will be posted at ohsu.edu/orhforum
- Sessions will be recorded and available to attendees
- Please take the session surveys!

Agenda

- 1 Overview of Oregon's 1115 Medicaid Waiver's Health Related Social Needs Services
- 2 | HRSN Service Eligibility and Operationalizing access through self-attestation
- Investment in community partners through Community Capacity Building Funds
- 4 Discussion

Overview of Oregon's 1115 Medicaid Waiver and Health Related Social Needs Services



What is a Medicaid Waiver?

- Waivers are an opportunity for states to test and implement new innovations using Medicaid funding.
- In **1994 Oregon received approval** to implement Medicaid waivers to make the Oregon Health Plan (OHP) more flexible, provide additional services, and increase the number of individuals covered.
- States must renew their Medicaid waivers with the Federal government every five years.
- The current 1115 Medicaid Waiver period is **October 1, 2022 through September 30, 2027.**

Oregon 1115 Waiver Goals



GOALS

- Address and advance health equity
- Create a more equitable, culturally- and linguistically-responsive health care system
- Ensure people can maintain their health coverage
- Improve health outcomes by addressing health-related social needs
- Ensure smart, flexible spending for health-related social needs (HSRN) and health equity

Healthier Oregon OHP members are included in 1115 waiver benefits!

Oregon 1115 Waiver Changes



CHANGES

- Extended OHP eligibility for young children, youth, and adults
- Continuous OHP eligibility and enrollment for children up to age six*†
- Two years of continuous enrollment for OHP members ages six and older*†
- Health-related social need services, including housing, nutrition, climate and outreach and engagement services*
- Coverage for young adults with special health care needs up to age 26*

What are Health-Related Social Needs?

Health-Related Social Needs (HRSN): The **social and economic needs that impact an individual's ability** to maintain their health and well-being. For example, affordable housing and utilities, access to diverse, healthy foods, and support accessing benefit programs.

Oregon's HRSN services:





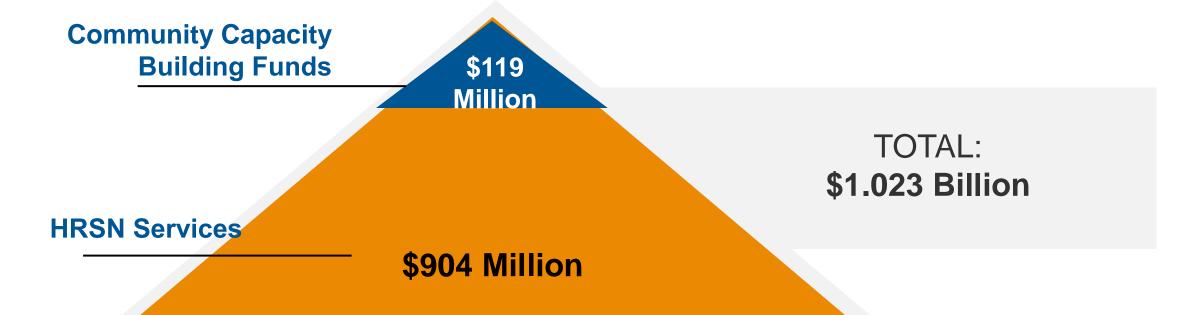




HRSN-Specific Funding Components

\$119 million available as **grants for infrastructure and capacity building** to HRSN providers (e.g., community-based organizations, social service agencies, tribal providers, others).

\$904 million available for **HRSN services** to eligible individuals



HRSN Goals

Address and advance health equity

- Prioritizing the particular covered populations
- Attend to social determinants of health
- Tribes lead design and implementation for tribal communities, with dedicated investment process
- Partner with and invest in community-based organizations
- Many paths to accessing services

Improve health outcomes

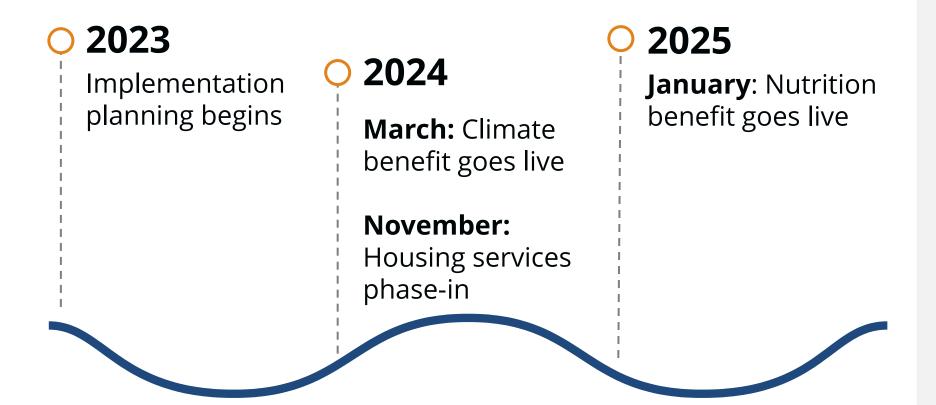
- Increase access to basic needs
- Facilitate sustained engagement in health care services
- Provide connection to other local, state, and federal benefits, supports, and services
- Meaningfully contribute the Governor's priorities

Increase efficiency and quality of care

- Strengthen links among OHA, other state agencies, CCOs, & community-based organizations, including housing and nutrition providers
- Complement existing programs, align with existing processes, and connect broader social services network.

HRSN Service Implementation Timeline

HRSN services will start in phases beginning in 2024.



To Be Determined:

 Additional phased implementation of HRSN services and transition populations



Climate

 These supports include air conditioners for heat risks, air filtration devices to protect against wildfire smoke, portable heaters, mini refrigeration units for medications, and portable power supplies to operate medical devices like ventilators for power outages.





Housing

- Eligible members could be connected to housing supports or have their housing expenses covered by OHP
- The supports focus on members who are at risk of homeless (according to HUD's definition) who need support maintaining their current housing





Nutrition

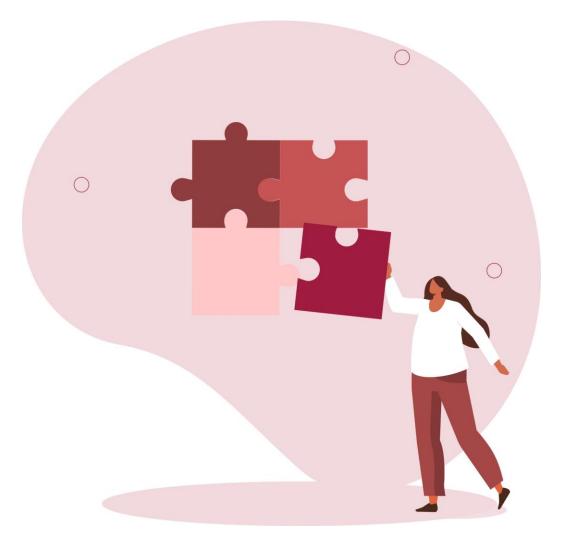
 These supports include medically-tailored meals for specific health conditions, funds to buy groceries or hot meals, funds to buy produce, and nutrition education.





Outreach & Engagement

 These supports include outreach and linkages to other Medicaid or non-Medicaid benefits, for OHP members in eligible HRSN populations that are presumed eligible for HRSN services



HRSN service eligibility and operationalizing access through self-attestation



HRSN Service Eligibility



In order to be eligible an individual must meet all three of the following:

- **✓ OHP Member**
- HRSN Services Covered Population
- Meet clinical and social need criteria
- Cannot be receiving the same service through state-, local-, or federally-funded programs

Self Attestation and Good Faith Validation for Service Eligibility

- - **HRSN Services Covered Population**
- Meet clinical need criteria
- **Meet social need** criteria

- Self attestation: low barrier access
- Good faith validation effort: CCO/OHA review own records, conversation with individual
- Clinical criteria: designed to be inclusive

HRSN Services Covered Populations

- Individuals who are homeless or at risk of homelessness, per HUD's definition
- Young Adults with Special Health Care Needs (YSHCN) (starting in 2025)
- Adults and youth discharged from certain mental health and substance use disorder facilities
- Adults and youth released from incarceration
- Youth involved with child welfare
- Individuals transitioning to dual Medicaid and Medicare status

Prioritize people who are in life transitions or hardships that impact connection with healthcare services



Social Need Criteria

Climate Devices

 Resides in home/primary residence and for whom a climate device is a clinically appropriate component of health services treatment or prevention.

Housing Services

- Is homeless or at risk of becoming homeless, as defined by the U.S.
 Department of Housing and Urban Development; or
- Requires a clinically appropriate home modification/remediation service.

Nutrition Services

 Meets the USDA definition of low food security.

Housing, Nutrition, Outreach & Engagement Clinical Criteria

- Pregnant/Postpartum
- Children less than 6 years of age
- Adults 65 years or older
- Needs Assistance with activities of daily living (ADLs), instrumental activities of daily living (iADLs), or eligible for long-term services and supports (LTSS)

- Behavioral Health Need
- Complex Physical Health Need
- Young Adult with Special Health care Need (YSHCN)
- Developmental or Intellectual Disability
- Repeated Emergency Department
 Use and Crisis Encounters
- Interpersonal Violence Experience

Climate Device Clinical Criteria



A health condition that is worsened by heat may qualify for an **air conditioner**.



A health condition that is worsened by cold may qualify for a **portable heater**.

- A health condition that is worsened by compromised air quality may qualify for an air filtration device.
- Individuals at risk of power outages and rely on medical devices like ventilators may qualify for a **portable power supply.**
- Individuals at risk of power outages and rely on medication requiring temperature control may qualify for a mini fridge.

Health Related Services (HRS) vs. Health Related Social Need (HRSN) Services

HRS

- Available to <u>CCO</u> Members; Members can request services from CCO
- Services available since 2012
- Services <u>not covered</u> under OHP
- Paid for by Coordinated Care Organizations (CCOs)
- Examples: Cell phones, preschool programs, grocery store gift cards, temporary hotel, wheelchair ramp, etc.

HRSN

- Available to both <u>CCO and Open Card</u> Members; Members must meet HRSN eligibility criteria
- Services starting 2024
- Services <u>covered</u> under the OHP
- Paid for with the state OHP budget
- Examples: Housing, nutrition, climaterelated support, and outreach & engagement

Intended to improve care delivery and overall member and community health and well-being

Community Capacity Building Funds (CCBF)



Community Capacity Building Funds

What are Community Capacity Building Funds (CCBF)?

- CCBF will support entities that will become HRSN service providers to develop what they need to be able to participate in the Medicaid delivery system and deliver HRSN services to qualified OHP members
- Coordinated care organizations (CCOs) will administer these funds to eligible community partners during set funding windows in 2024 and 2025*
 - CCOs will be required to report to the state on key elements, which will inform subsequent years of CCBF
- Tribal Governments will receive a set aside amount of this funding to be administered through a different process

Overarching Goals for CCBF



Engage community partners to help design the funding program



Support oversight of the program to deliver these funds



Reserve these funds for Tribal Governments



Prioritize these funds for HRSN providers



Ensure funds are spread across the state



Design a simple and user-friendly application and budget process to apply



Promote access to these funds amongst HRSN providers that are not current Medicaid-billing providers



Promote access to these funds for providers who serve the HRSN covered Populations and priority populations

Eligible Groups for CCBF

- Community-based organizations (CBOs)
- Social-service agencies
- Housing agencies and providers
- Food and nutrition service providers
- Case management providers

- Traditional health workers
- Child welfare providers
- City, county, and local government agencies
- "Network Manager" entities that help support key administrative functions (e.g., network development, invoicing)

Allowable Uses of CCBF

The Centers for Medicare & Medicaid Services (CMS) has specified allowable uses of CCBF



Technology

(e.g., new billing systems)



Development of business or operational practices

(e.g., designing new workflows)



Workforce development

(e.g., support for recruiting)

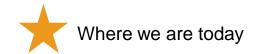


Outreach, education, and convening

(e.g., launching a new learning collaborative)

CCBF Funding Timelines

Activity	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Launch of CCBF grant program												
CCOs promote CCBF grant program to eligible HRSN providers												
Eligible organizations fill out applications and submit to CCOs			Open 3/1		Due 5/31							
CCOs review applications and submit requests for CCBF awards to OHA. CCOs may submit by 6/17 or by 8/1						By 6/17 (batch 1)		OR by 8/1 (batch 2)				
CCOs provide funding notifications to awarded organizations: Funding notifications may go out by Aug 1 or by Sept 15								8/1: Funding notification 1	9/15: Funding notification 2			
CCOs disburse funding to awarded organizations by 8/31 or by 10/16								8/31		10/16		
Providers can begin using CCBF as soon as funds are received												



OHA CCBF Website

https://www.oregon.gov/oha/HSD/Medicaid-Policy/Pages/CCBF.aspx

Resources include

- Approved OHA HRSN Infrastructure protocol for CCBF
- CCBF specific email address: <u>CCBF.info@oha.oregon.gov</u>
- CCO CCBF Point of Contacts and webpage links
- CCBF Application template
- CCBF Resources, including
 - Plain language, 2pg CCBF summary*
 - Customizable CCBF flyers
 - FAQ for variety of audiences*





Discussion



Stay Connected!

For any questions related to today's presentation, please contact us: 1115waiver.renewal@odhsoha.oregon.gov

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





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