

Oregon's 1115 Medicaid Waiver

ODHS SSP Partner Meeting

December 14, 2023



Today's Agenda

1 | Oregon 1115 Waiver Overview and Changes

Review 1115 Waiver background, history, and goals

2 | Health-Related Social Need Services

Overview of HRSN services, timing, and member eligibility

3 | Community Capacity Building Funds

Review community capacity building funds goals, eligibility, and allowable uses

4 | Q & A

Ask your remaining questions

Oregon's 1115 Medicaid Waiver



What is a Waiver?

- Each state has their own Medicaid plan that must follow a **standard set of rules determined by the federal government**.
- States can ask the **federal government for permission to change** their Medicaid rules.
- Waivers are an opportunity for states to **test and implement new innovations** using Medicaid funding.
- States **must renew their Medicaid waivers** with the Centers for Medicare and Medicaid Services (CMS) every five years. CMS can accept or reject proposals.

History of Oregon Waivers

- 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.
- Oregon's most recent 1115 Medicaid Waiver was **approved for October 1, 2022 through September 30, 2027**.
 - It includes **health related social needs (HRSN)** services available as a covered benefit in OHP.
 - Some waiver updates are still pending negotiation.

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!

Health-Related Social Need Services



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.



HRSN services that will be provided:

- Housing support
- Nutrition support
- Climate-related support
- Outreach & Engagement

HRSN Services - Funding

There are two types of funding available through this waiver for health-related social needs.

\$904 million available to provide **HRSN services** to eligible individuals through reimbursement to providers of:



—
**Housing
Supports**



—
**Nutrition
Supports**



—
**Climate
Supports**



—
**Outreach &
Engagement**

HRSN Grant Funding

\$119 million approved for grants for infrastructure and capacity building called **Community Capacity Building Funds** to HRSN providers.

More on this later in the presentation.



Implementation Timeline

HRSN services will start in phases beginning in 2024

○ **2023**
Implementation planning begins

○ **2024**
March: Climate benefit goes live
November: Housing services phase-in

○ **2025**
Nutrition benefit goes live

To Be Determined:

- Phased implementation of all HRSN services for all transition populations

Member Eligibility



To qualify for a HRSN service, an individual must:

- Meet the eligibility criteria for **one or more of the covered populations.**
- Meet service **clinical and social risk criteria** to be medically necessary.*



Important Notes

- To be eligible, individuals cannot be receiving the same service through state-, local-, or federally-funded programs.
- There may be additional eligibility criteria for specific HRSN services.

*** Please note:** Specifics for clinical and social risk factor criteria are still in development

HRSN Service Covered & Priority Populations

HRSN Services Covered Populations:

- Young Adults with Special Health Care Needs (YSCHN) (starting in 2025)
- Adults and youth discharged from an Institution for Mental Disease
- Adults and youth released from incarceration
- Youth involved with child welfare
- Individuals transitioning to Dual Status
- Individuals who are homeless or at risk of homelessness



Proposed Priority Populations:

- American Indian, Alaska Native, Indigenous communities
- Asian communities
- Black, African American, African communities
- Latino/a/x communities
- Pacific Islander communities
- Eastern European communities
- People with disabilities
- LGBTQIA2S+ communities
- Immigrant and refugee communities
- Rural communities
- Faith communities
- Houseless communities
- People with behavioral health conditions

Clinical and Social Risk Factor Criteria



Clinical risk factors: Individuals must be experiencing at least one of the following:

- 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 Disability
- Repeated Emergency Department Use and Crisis Encounters
- Interpersonal Violence Experience



Social risk factor: Individuals must have at least one need related to housing, nutrition, or climate.

Community Capacity Building Funds



Community Capacity Building Funds

What are Community Capacity Building Funds (CCBF)?

- Oregon has been authorized to spend up to **\$119 million** on Community Capacity Building Funds to support the development and implementation of the Health-Related Social Needs program.
- Coordinated Care Organizations (CCOs) will administer these funds to eligible community partners.*
- CCOs will be required to use a standardized application and budget request template.
- Eligible Community Partners such as Community Based Organizations (CBOs) and others will be able to apply for and use these funds to support the HRSN program.

¹⁶ *Tribal Governments/Providers will receive a set aside amount of this funding to be administered through a different process

Overarching Goals for Community Capacity Building Funds



Prioritize these funds for HRSN providers



Reserve these funds for Tribal Governments



Engage community partners to help design the funding program



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



Support oversight of the program to deliver these funds



Ensure funds are spread across the state



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



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

Eligible Groups for Community Capacity Building Funds

Groups that may apply for and receive these funds include but are not limited to:

- Community-based organizations (CBOs)
- Social-service agencies
- Housing agencies and providers
- Food and nutrition service providers
- Climate providers
- Outreach and engagement 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)

Please Note: The final list of eligible groups will be finalized with CMS.

Allowable Uses of Community Capacity Building Funds

The Centers for Medicare & Medicaid Services (CMS) has shared specific 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)

Who will be served?

Applicants must provide the following information for service delivery:



Geographic Information:

- Which counties their organization will support
- For each county selected, the applicant must describe:
 - Their current working relationship and knowledge of that county
 - What work and support is being proposed
 - How the priority populations will benefit
 - How they will build additional existing relationships within the county



Language Access:

- The organization's capacity to speak and/or write in languages other than English.

Question & Answer



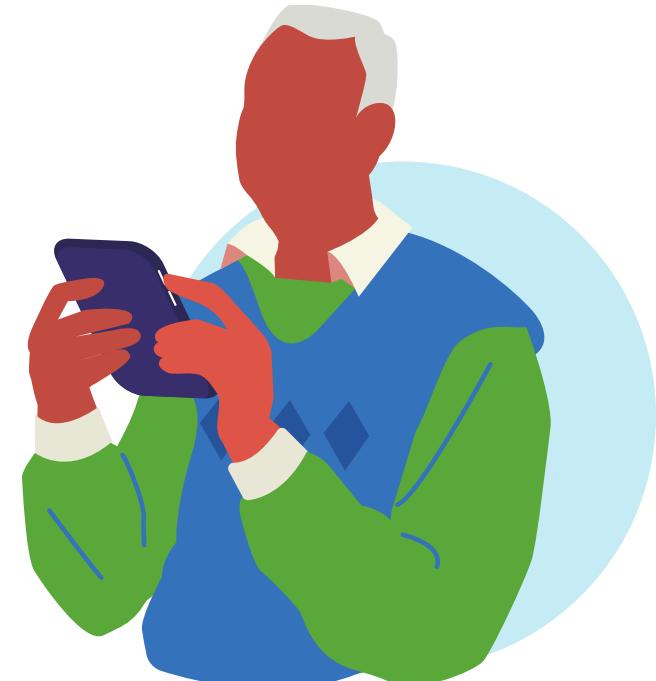
Stay Connected!

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

Specific questions related to Community Capacity Building Funds can be sent to: CCBF.info@oha.oregon.gov

For additional updates and information, check our website: www.oregon.gov/1115waiverrenewal.

Subscribe to OHA's bi-weekly waiver newsletter:
<http://www.tinyurl.com/waivernewsletter>.





**Thank you for your collaboration
and ongoing partnership!**



Appendix



HRSN Service Specifications



**Housing
Supports**



**Nutrition
Supports**



**Climate
Supports**



**Outreach &
Engagement**



Housing

-  Housing navigation, pre-tenancy and tenancy sustaining services
-  Medically-necessary home accessibility modifications such as safety improvements and mold removal
-  One-time assistance with transition and moving costs, including security deposits, first month's rent, utility start up cost, inspection or application fees, and basic household goods
-  Rent/temporary housing for up to six months
-  Utility costs for up to six months



Housing

Initial focus will be on the At-Risk of Houselessness population, as defined by HUD. Focus will be on supporting people who are medically and financially vulnerable, to avoid becoming houseless in the first place.

Examples include:

- Rent assistance for people who will have trouble making rent due to a job loss, health emergency, unexpected expenses or other circumstance.
- People who live in affordable housing units and require support to make rent.

Please Note: OHA is working to further refine and clarify these definitions.



Nutrition Services



Nutrition counseling and education



Medically-tailored meals for six months



Fruit and vegetable prescriptions for up to six months



Meals or pantry stocking for pregnant individuals, children and youth under 21, and young adults 19 - 26 years old with special health care needs (YSHCN) for six months



Climate Supports



Medically necessary devices to maintain healthy temperatures and clean air, such as air conditioners and air filtration devices



Additional devices include heaters, portable power supplies, and mini-refrigerators

Note

- Eligibility for climate supports may vary based on emergency needs or other criteria.



Outreach & Engagement

-  Outreach for access to HRSN services and linkages to other Medicaid and non-Medicaid benefits
-  Individual engagement within populations that may be eligible for HRSN-related outreach and services



Outreach & Engagement



Assistance obtaining identification and required documentation needed to receive benefits and HRSN Eligibility and Service Need Form completion support



Identification of necessary medical, social, educational, and legal services and connection to basic needs services



Assistance securing and maintaining entitlements and benefits, such as TANF, WIC, SNAP, Social Security, and Veteran benefits