

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-01-16
Baltimore, Maryland 21244-1850



Children and Adults Health Programs Group

January 30, 2015

Judy Mohr-Peterson, Ph.D.
State Medicaid Director
Oregon Health Authority
500 Summer Street Northeast, E-15
Salem, OR 97301

Dear Ms. Peterson:

Thank you for the state's request for your recent request to amend your special terms and conditions of the section 1115 demonstration, (Project Nos. 21-W-00013/10 and 11-W-00160/10).

On November 10, 2014, Oregon submitted an amendment request that did not adhere to the requirements of paragraphs 7 and 15 of the special terms and conditions describing the process for submission of an amendment request. The request was for an extension of the state's tribal health programs uncompensated primary care payments for the full period of the state's current 1115 demonstration approval, through June 30, 2017, and for the authority to use appropriate reimbursement rates as established in the state's Medicaid State Plan, with non-federal match, as required, via fiscal transfers from the tribes. We understand that Oregon will continue to work towards meeting the requirements of paragraphs 7 and 15 of the special terms and conditions to submit an amendment request.

With this letter, the Centers for Medicare & Medicaid Services (CMS) is granting a temporary extension of the expenditure authority listed below, Section X (Tribal Health Facility Payment Program for Uncompensated Care) of the special terms and conditions, and the Tribal Health Facility Payment Program Claiming Protocol included as attachment I of the special terms and conditions until March 31, 2015.

Title XIX – Costs Not Otherwise Matchable (CNOM)

5. Uncompensated Care for Tribal Health Facility Program: Expenditures for supplemental payments to Indian Health Service (IHS) and tribal health facilities operating under the Indian Self Determination and Education Assistance Act (ISDEAA) 638 authority: 1) for uncompensated care costs resulting from primary care services on the prioritized list which are no longer funded, that were restricted or eliminated from the Medicaid state plan effective January 1, 2010 for non-pregnant adults enrolled in Medicaid (Oregon Health Plan); and 2) for

uncompensated care costs resulting from primary care services on the prioritized list that are provided to individuals with incomes up to 133 percent of the Federal Poverty Level (FPL) who have no Medicare, Medicaid, CHIP or other coverage. Beginning January 1, 2014, through January 31, 2015, the state shall only make supplemental payments to these facilities for uncompensated care costs resulting from primary care services on the prioritized list which are no longer funded, that were restricted or eliminated from the Medicaid state plan effective January 1, 2010 for all populations enrolled in Medicaid (Oregon Health Plan).

The demonstration is currently operating under the authority of section 1115(a) of the Social Security Act.

If you have any questions, please do not hesitate to contact your project officer, Mrs. Vanessa Sammy. Mrs. Sammy can be reached at (410) 786-2613, or at vanessa.sammy@cms.hhs.gov. We look forward to continuing to work with you and your staff on this demonstration.

Sincerely,

/s/

Eliot Fishman
Director

cc: Carol Peverly, ARA, Region X
Gary Ashby, Seattle Regional Office