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

March 31, 2015

Lynne Saxton State Medicaid Director Oregon Health Authority 500 Summer Street Northeast, E-15 Salem, OR 97301

Dear Ms. Saxton:

Thank you for the state's request to amend the Oregon Health Plan section 1115 demonstration (Project Nos. 21-W-00013/10 and 11-W-00160/10). The Centers for Medicare & Medicaid Services (CMS) is actively working with the state on its amendment application and is granting a temporary extension of the expenditure authority listed below. This temporary extension will allow time for the amendment to proceed through the federal public comment process and for CMS to review the evaluation data for the Tribal Health Facility Payment Program for Uncompensated Care that Oregon advised it would submit by March 31, 2015. This temporary extension will be granted until April 30, 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 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).

If you have any questions, please do not hesitate to contact your project officer, Ms. Iris Allen. Ms. Allen can be reached at (410) 786-1633, or at <u>iris.allen@cms.hhs.gov</u>. We look forward to continuing to work with you and your staff on this demonstration.

Sincerely,

/s/

Eliot Fishman Director

cc: Mr. Frank Schneider, ARA, Seattle Regional Office