



July 26, 2024

500 Summer St NE Salem, OR 97301 VOICE (503) 945-5772 FAX (503) 947-5461 https://www.oregon.gov/oha

Mr. Dan Tsai
Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Mail Stop: S2-25-26
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Ms. Felicia Pailen
Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Mail Stop: S2-25-26
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Dear Mr. Tsai and Ms. Pailen,

On behalf of the Oregon Health Authority (OHA), I am pleased to provide written acceptance of the special terms and conditions (STCs) for Oregon's amendment to its section 1115(a) demonstration titled "Oregon Health Plan" (Project Number 11-W-00415/10; 21W-00073/0). As discussed on our call on July 24, we are requesting a technical correction, as we would appreciate the opportunity to work with CMS to explore how to address instances in which a member is evaluated with monthly income above the threshold for this amendment but below the annual income threshold for BHP, to ensure this amendment provides seamless coverage for Oregonians as it was intended to do.

We greatly appreciate all that you and your team at CMS have done to support Oregon's vision for making health coverage accessible to everyone in Oregon by expanding access to comprehensive, affordable health care coverage for all and honoring our government-to-government relationship with the Tribes.

OHA thanks you and your team's engagement throughout this process and your entire team's dedication to advancing our joint priorities through this demonstration amendment.

Sincerely,

Emma Sandoe Medicaid Director Oregon Health Authority