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State/Territory Name: Oregon

State Plan Amendment (SPA) #: 21-0024

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

March 17, 2022

Patrick Allen, Director Oregon Health Authority 500 Summer Street Northeast, E-15 Salem, OR 97301-1079

Re: Oregon State Plan Amendment (SPA) OR-21-0024

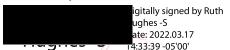
Dear Mr. Allen:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) OR-21-0024. This amendment proposes to add services to the Newborn Nurse Home visiting program, including maternal and newborn physical assessment; anticipatory and supportive guidance.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations at 42 CFR 440.130(c). This letter is to inform you that Oregon Medicaid SPA OR-21-0024 was approved on March 17, 2022, with an effective date of January 1, 2022.

If you have any questions, please contact Nikki Lemmon at 303-844-2641 or via email at Nicole.Lemmon@cms.hhs.gov

Sincerely,



Ruth A. Hughes, Acting Director Division of Program Operations

cc: Jesse.ANDERSON@dhsoha.state.or.us Dana.HITTLE@dhsoha.state.or.us Vivian.LEVY@dhsoha.state.or.us

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER 2. STATE 2 1 0 0 2 4 OR
STATE PLAN MATERIAL	$\boxed{\frac{2}{2}} \xrightarrow{1} = \underbrace{0}_{0} \underbrace{0}_{2} \underbrace{2}_{4} \underbrace{0}_{1} \underbrace{0}_{1}$
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE
CENTERS FOR MEDICAID & CHIP SERVICES	1/1/22
DEPARTMENT OF HEALTH AND HUMAN SERVICES	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
42 CFR 440.130(c)	a FFY 2022 \$ 765,565 b FFY 2023 \$ 1,020,753
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
Attachment 3.1-A, page 6-a-8	OR ATTACHMENT (If Applicable)
Attachment 4.19-B, page 1a.8	NEW
9. SUBJECT OF AMENDMENT	
	nt under clinic consists for the Nurse Llowe visiting presson
This transmittal is being submitted to add a direct medical component under clinic services for the Nurse Home visiting program.	
10. GOVERNOR'S REVIEW (Check One)	
${igodoldoldoldoldoldoldoldoldoldoldoldoldol$	OTHER, AS SPECIFIED:
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	0
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
•	
11_SIGNATURE OF STATE AGENCY OFFICIAL 15	. RETURN TO
	Oregon Health Authority
12. TYPED NAME	Medical Assistance Programs
Dana Hittle	500 Summer Street NE E-65
13. TITLE	Salem, OR 97301
Interim Medicaid Director	ATTN: Jacob Anderson Otata Dian Managan
14. DATE SUBMITTED	ATTN: Jesse Anderson, State Plan Manager
12/28/21	
FOR CMS USE ONLY	
16. DATE RECEIVED 17	. DATE APPROVED
12/28/21	March 17, 2022
PLAN APPROVED - ONE	COPY ATTACHED
18. EFFECTIVE DATE OF APPROVED MATERIAL 19	. SIG
1/1/22	SIC SIC State Stat
	. TITLE OF APPROVING OFFICIAL
Ruth A. Hughes Ac	ting Director, Division of Program Operations
22. REMARKS	
3/16/22 state authorized P&I change to remove reference to 'clinic services' as this SPA was moved under	
	clinic services as this SPA was moved under

Transmittal # 21-0024 Attachment 3.1-A Page 6-a-8

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State/Territory: <u>OREGON</u>

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

13.c. Preventive Services: Newborn Nurse Home Visit

Newborn Nurse Home Visits

Coverage for Preventive services is in accordance with 42 CFR 440.130(c). Newborn nurse home visits are a component of the services provided to families with newborns as part of the Universally offered Newborn Nurse Home Visiting Program.

Newborn Nurse Home Visits may include a support visit prior to the comprehensive newborn nurse home visit to address an urgent need, one comprehensive visit and up to two follow up support visits. The visits can be exceeded based on medically necessity in accordance with EPSDT. Nursing services provided include a comprehensive maternal and newborn physical assessment as appropriate for the visit type as well as standardized anticipatory and supportive guidance.

Program coverage:

A comprehensive newborn nurse home visit must be provided by a registered nurse in the family's home. The comprehensive newborn nurse home visit must include but is not limited to:

(a) Maternal physical assessment (if applicable) according to clinical guidelines approved by the Authority.

(b) Newborn physical assessment according to clinical guidelines approved by the Authority

Provider qualifications:

Newborn Nurse Home Visiting Services Providers must be certified by the Oregon Health Authority. Newborn Nurse Home Visiting services must be provided by a licensed registered nurse with experience in community health, public health, child health nursing.

Reimbursement: This service is reimbursed according to attachment 4.19-B.

Transmittal 21-0024 Attachment 4.19-B Page 1a.8

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State/Territory: <u>OREGON</u>

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES

13.c Preventive Services: Newborn Nurse Home Visit

Newborn Nurse Home Visits

Reimbursement for **Newborn Nurse Home Visits** is provided under a statewide rate and is the lower of:

- 1. Submitted charges; or
- 2. 99502 with modifier 32 = \$592.81
- 99502 with modifier TD = \$242.31
- 99502 with modifier TT = \$170.65

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rate is effective for services provided on or after 1/1/2022. All rates are published on the agency web at: <u>http://www.oregon.gov/oha/healthplan/pages/feeschedule.aspx</u>