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**State/Territory Name: Oregon** 

State Plan Amendment (SPA) #: 23-0018

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 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, Maryland 21244-1850



June 14, 2023

David Baden Interim Director Oregon Health Authority 500 Summer Street Northeast, E-15 Salem, OR 97301-1079

Re: Oregon State Plan Amendment (SPA) OR-23-0018

Dear Mr. Baden:

The Centers for Medicare & Medicaid Services (CMS) reviewed the proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) OR-23-0018. This amendment proposes to temporarily extend, without modifications, the 5% rate increase for nursing facilities, assisted living facilities, and residential care facilities for a temporary period of 5/12/23 through 6/30/23.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that Oregon's Medicaid SPA Transmittal Number OR-23-0018 is approved effective May 12, 2023.

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

Sincerely,

Alissa M. Debov -S Digitally signed by Alissa M. Deboy -S Date: 2023 06.14 08:34:15 -04'00'

Alissa Mooney DeBoy On Behalf of Anne Marie Costello, Deputy Director Center for Medicaid and CHIP Services

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE OF	2. STATE OR THE SOCIAL	
	SECURITY ACT   XIX   XXI		
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE 5/12/23		
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 440.155, 40, 1915(k),(i) and (j)	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2023 \$ 3,923,350 b. FFY \$		
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  Section 7.5.B	8. PAGE NUMBER OF THE SUPERSED OR ATTACHMENT (If Applicable) NEW		
9. SUBJECT OF AMENDMENT  This transmittal is being submitted related to COVID-19 emergency disaster relief SPA to extend, without modifications, the 5% rate increase to rates for nursing facilities, assisted living facilities, residential care facilities for a temporary period of 5/12/23 through 6/30/23.			
10. GOVERNOR'S REVIEW (Check One)  GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPECIFIED:		
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO Oregon Health Authority	Oregon Health Authority	
12. TYPED NAME Dana Hittle	Medical Assistance Programs 500 Summer Street NE E-65 Salem, OR 97301		
13. TITLE  Medicaid Director		ATTN: Jesse Anderson, State Plan Manager	
14. DATE SUBMITTED 6/8/23			
FOR CMS USE ONLY			
16. DATE RECEIVED 6/8/23	17. DATE APPROVED June 14, 2023		
PLAN APPROVED - O	NE COPY ATTACHED		
18. EFFECTIVE DATE OF APPROVED MATERIAL 5/12/23	SACISSEUME OF A DEBOY IN GOFFICIAL  Deboy -S  Date: 2023.06.14 08 34:38 -04'00'		
20. TYPED NAME OF APPROVING OFFICIAL	TITLE OF APPROVING OFFICIAL		
Alissa Mooney DeBoy on Behalf of Anne Marie Costello	Deputy Director, Center for Medicaid and	outy Director, Center for Medicaid and CHIP services	
22. REMARKS			

State/Territory: OREGON

## Section 7 – General Provisions 7.5.B. Temporary Extension to the Disaster Relief Policies for the COVID-19 National **Emergency**

Effective the day after the end of the PHE until 06/30/2023, the agency temporarily extends the

following election(s) of section 7.5 (approved on 11/9/2022 in SPA Number 22-0020) of the state plan:
Section E – Payments
Other: 4X Other payment changes:
Please describe.
All policies and procedures describe in this SPA are time limited to $5/12/2023$ through $6/30/23$ . These temporary rate methods account for the extraordinary expenses these providers have been experiencing in managing the COVID-19 emergency.
Rates for nursing facilities, assisted living facilities, residential care facilities are increased by 5%.

Approval Date: <u>6/14/2023</u> TN <u>23-0018</u> Effective Date: 5/12/2023 Supersedes TN: NEW