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State/Territory Name Oregon

State Plan Amendment (SPA) #: 25-0018

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 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

October 30, 2025

Emma Sandoe
Medicaid Director
Oregon Health Authority
500 Summer Street NE, E-65
Salem, OR 97301

Re: Oregon State Plan Amendment (SPA) – OR-25-0018

Dear Dr. Sandoe:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) OR-25-0018. This amendment proposes to divide an existing targeted case management target group into two separate target groups, Child Welfare and Oregon Youth Authority, and updates the payment methodology.

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 440.169. This letter informs you that Oregon's Medicaid SPA TN OR-25-0018 was approved on October 30, 2025, with an effective date of July 1, 2025.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Oregon State Plan.

If you have any questions, please contact Sasha Zolynas via email at Sasha.Zolynas@cms.hhs.gov.

Sincerely,

Nicole McKnight
On Behalf of Courtney Miller, MCOG Director

Enclosures

cc: Jesse Anderson, Oregon Health Authority

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 5 — 0 0 1 8

2. STATE

OR

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL

SECURITY ACT



XIX



XXI

4. PROPOSED EFFECTIVE DATE

7/1/25

TO: CENTER DIRECTOR

CENTERS FOR MEDICAID & CHIP SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR ~~440-130(e)~~ 440.169

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY ~~2026~~ 2025 \$ 0b. FFY ~~2027~~ 2026 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Supplement 1 to Attachment 3.1-A, Page 1, 1a,
68-75 (NEW) Attachment 4.19-B, page 4v ~~4w~~ (NEW)8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

Supplement 1 to Attachment 3.1-A, Page 1

9. SUBJECT OF AMENDMENT

This transmittal is being submitted move OYA TCM to their own SPA.

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

12. TYPED NAME

Emma Sandoe, PhD

13. TITLE

Medicaid Director

14. DATE SUBMITTED

8/6/25

15. RETURN TO

Oregon Health Authority
Medical Assistance Programs
500 Summer Street NE E-65
Salem, OR 97301

ATTN: Jesse Anderson, State Plan Manager

FOR CMS USE ONLY

16. DATE RECEIVED

August 6, 2025

17. DATE APPROVED

October 30, 2025

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

July 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Nicole McKnight

21. TITLE OF APPROVING OFFICIAL

On Behalf of Courtney Miller, MCOG Director

22. REMARKS

10/16/25-P&I change authorization to box 7 to remove page 4w and add pages 1 and 1a.

10/22/25-P&I change authorization to box 5 to correct the citation, to box 6 to correct the FFYs, and to box 8 to add the superseded page.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
Medical Assistance Program
State/Territory: OREGON

TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management-Child Welfare Youth

Target Group (42 CFR 441.18(a)(8)(i) and 441.18(a)(9):

Targeted case management services are provided to all Medicaid eligible recipients under age 21 who are currently residing in an in-home setting; a foster home; group home; residential care facility (excludes Institutions for Mental Disease and Public Institutions as defined in 42 CFR 435.1010); or independent living situation under the responsibility of the Child Welfare division of the Department of Human Services (DHS).

☐ Target group includes individuals transitioning to a community setting. Case management services will be made available for up to 180 consecutive days of the covered stay in the medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions).

Areas of state in which services will be provided (1915(g)(1) of the Act):

- ☒ Entire State
☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide)

Comparability of services (1902(a)(10)(B) and 1915(g)(1)):

- ☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
☒ Services are not comparable in amount duration and scope (§1915(g)(1)).

Definition of services (42 CFR 440.169):

Targeted case management services are services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted case Management includes the following assistance:

Comprehensive assessment and periodic reassessment of individual needs:

These annual assessment (more frequent with significant change in condition) activities include:

- Taking client history;

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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management-Child Welfare Youth

Comprehensive assessment and periodic reassessment of individual needs (Cont):

- Evaluation of the extent and nature of recipient's needs (medical, social, educational, and other services) and completing related documentation;
- Gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the individual.

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

TARGETED CASE MANAGEMENT SERVICES

Targeted Group name- Oregon Youth Authority

Target Group (42 CFR 441.18(a)(8)(i) and 441.18(a)(9):

Targeted case management services are provided to all Medicaid eligible recipients under age 21 who are currently residing in independent living situation, in-home setting; a foster home; group home; residential care facility under the responsibility of the Oregon Youth Authority (OYA)(excludes Institutions for Mental Disease and Public Institutions as defined in 42 CFR 435.1010).

☐ Target group includes individuals transitioning to a community setting. Case management services will be made available for up to 180 consecutive days of the covered stay in the medical institution. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions).

Areas of state in which services will be provided (1915(g)(1) of the Act):

☒ Entire State

☐ Only in the following geographic areas

Comparability of services(1902(a)(10)(B) and 1915(g)(1)):

☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount duration and scope (1915(g)(1)).

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management- Oregon Youth Authority

Definition of services (42 CFR 440.169):

Targeted case management services are services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted case Management includes the following assistance:

Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include:

- Taking client history;
- Identifying the individual's needs and completing related documentation; and
- Gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the individual.

[Conduct a reassessment at least annually, with the flexibility to reassess more frequently if the client's condition or preferences change.

An annual reassessment ensures the care plan stays current and responsive to evolving needs while adhering to rule requirements. Additionally, offering the option for more frequent reassessments when circumstances change allows for nimble, individualized care adjustments, which is especially important for youth served by OYA in dynamic or unstable situations.]

Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that

- specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
- includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
- Identifies a course of action to respond to the assessed needs of the eligible individual.

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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management- Oregon Youth Authority

Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including

- activities that help link an individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and

Monitoring and follow-up activities:

- activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and
 - changes in the needs or status of the individual are reflected in the care plan.

Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

[At a minimum, monitoring must occur annually, as specified by OAR and in accordance with 42 CFR 440.169(d)(4); however, given the dynamic needs of youth under OYA supervision, monthly contacts by phone or in person are recommended, with flexibility for increased frequency when warranted. This approach ensures timely identification of service issues, responsive care adjustments, and alignment with both federal regulation and best practices in case management.]

☒ Case includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs. (42 CFR 440.169(e))

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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management- Oregon Youth Authority

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Provider organizations or entities must meet the following criteria:

- A minimum of three years experience of successful work with children and families, involving a demonstrated capacity to provide all core elements of case management, including Assessment, Case Planning, Case Plan Implementation, Case Plan Coordination, and Case Plan Reassessment;
- A minimum of three years case management experience in coordinating and linking community medical, social, educational or other resources as required by the target population;
- A minimum of three years experience working with the target population;
- Administrative capacity to ensure quality of services in accordance with state and federal requirements;
- Financial management system which provides documentation of services and costs.
- Capacity to document and maintain individual case records in accordance with state and federal requirements;
- Demonstrated commitment to assure a referral consistent with section 1902a(23), freedom of choice of providers;
- A minimum of three year's experience demonstrating capacity to meet the case management service needs of the target population.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management- Oregon Youth Authority

Qualifications of providers (Cont):

Case Managers must meet the following criteria:

- Completion of training in case management;
- Basic knowledge of behavior management techniques, family dynamics, child development, family counseling techniques, emotional and behavioral disorders;
- Skill in interviewing to gather data and complete needs assessment, in preparation of narratives/reports, in development of service plans, and in individual and group communication;
- Ability to work with court systems, to learn state and federal rules, laws and guidelines and to gain knowledge about community resources.

Freedom of Choice (42 CFR 441.18(a)(1):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management- Oregon Youth Authority

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

☐ Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services. **[Identify any limitations to be imposed on the providers and specify how these limitations enable providers to ensure that individuals within the target groups receive needed services.]**

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management- Oregon Youth Authority

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows:

- (i) The name of the individual;
- (ii) The dates of the case management services;
- (iii) The name of the provider agency (if relevant) and the person providing the case management service;
- (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved;
- (v) Whether the individual has declined services in the care plan;
- (vi) The need for, and occurrences of, coordination with other case managers;
- (vii) A timeline for obtaining needed services;
- (viii) A timeline for reevaluation of the plan.

Limitations:

- Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).
- Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c))

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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management- Oregon Youth Authority

Limitations (Cont):

- FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c))

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
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TARGETED CASE MANAGEMENT SERVICES

Targeted Case Management- Oregon Youth Authority

The fee schedule developed for the Targeted Case Management is designed for specific tasks related exclusively to case management functions for this target group. The fee schedule is constructed by using the market value of the individual's time (the Bureau of Labor Statistics wage level) augmented by a margin for Program Related expenditures (supervisory staff, transportation, program supplies etc.), Employment Related expenditures (mandated and other benefits), and General and Administrative (Indirect). The assumptions from which the fees are developed are expressed in the service standards, and the fees are predicated on fifteen-minute increments. Oregon attests that all administrative fees are included in the rates.

The maximum number of fifteen-minute increments that can be performed and billed for any single day is twenty-four units (24 fifteen minute increments). A single day is defined as any given calendar day (midnight to midnight). No more than six hours would ever be provided for the same client, by the same case manager in any twenty four hour calendar day.

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 was set as of 7/1/25 and is effective for services provided on or after that date. All rates are published on the Agency's website at <https://www.oregon.gov/oha/HSD/OHP/Pages/Fee-Schedule.aspx>.