Oregon's 1115 Medicaid Waiver

All Come Webinar

September 6, 2023







Zoom Webinar Tips



Use the chat function to submit your questions

- We will spend the last 10 minutes of the webinar answering questions
- We will follow up on any questions we are not able to address
- If you would prefer to ask your question verbally, please ask to be unmuted in the chat





This webinar is being recorded

 It will be shared on our OHA 1115 Waiver webpage following the conclusion of the presentation



For live captioning, please click on the "cc" button located at the bottom of your screen

Today's Agenda

- 1 Oregon 1115 Waiver Overview and Changes
 Review 1115 Waiver background, history, and goals
- Background and Goals for Today

 Provide background on HRSN concerns and share updates on the new approved population sequencing approach
- Potential Concerns and Updated Approaches
 Share concerns expressed by partners and discuss proposed approaches to address the concerns or challenges
- 4 Outstanding Questions

 Discuss remaining outstanding questions regarding the updates and allow time for audience Q&A

Oregon's 1115 Medicaid Waiver



What is a Waiver?

- Each state has their own Medicaid plan that must follow a **standard set** of rules determined by the federal government.
- States can ask the federal government for permission to change their Medicaid rules.
- Waivers are an opportunity for states to test and implement new innovations using Medicaid funding.
- States **must renew their Medicaid waivers** with the Centers for Medicare and Medicaid Services (CMS) every five years. CMS can accept or reject proposals.



History of Oregon Waivers

- In **1994 Oregon received approval** to implement Medicaid waivers, to make the Oregon Health Plan (OHP) more flexible, provide additional services, and increase the number of individuals covered.
- Oregon's most recent 1115 Medicaid Waiver was approved for October
 1, 2022 through September 30, 2027.
- Some waiver updates are still pending negotiation.



Oregon 1115 Waiver Goals



GOALS

- Address and advance health equity
- Create a more equitable, culturally- and linguistically-responsive health care system
- Ensure people can maintain their health coverage
- Improve health outcomes by addressing health-related social needs
- Ensure smart, flexible spending for health-related social needs and health equity

Healthier Oregon OHP members are

included in 1115 waiver benefits!

Oregon 1115 Waiver Changes



CHANGES

- Extended Oregon Health Plan (OHP) eligibility for young children, youth, and adults
- Continuous OHP eligibility and enrollment for children up to age six*†
- Two years of continuous enrollment for OHP members ages six and older*†
- Health-related social needs (HRSNs) supports including housing, nutrition and climate supports*
- Coverage for young adults with special health care needs up to age 26*

† Note: These benefits are in effect and began in July 2023

^{*} Indicates an approved change that is first-in-the-nation

Background and Goals for Today



Goals for Today



GOALS

Review key features of the new population phasing approach

Gain a shared understanding of the rationale for the new population phasing approach

Confirm next steps

Background for Today



CONTEXT

- OHA had proposed to launch housing services first for populations with significant behavioral health needs (including diagnosed and undiagnosed serious mental illness, referred to as "SMI+") and then phase-in "special populations" such as veterans, and families with children, etc.
- CMS recently raised concerns about how the state can manage enrollee demand for rental
 assistance and informed OHA that Oregon does not have authority to establish waitlists for
 waiver services (including rent).
- Coordinated care organizations (CCOs) and housing partners have shared their concerns about the current phasing proposal and the practical issues of implementation.
- With this in mind, the team has developed a revised approach to phase in populations gradually.

NEW Population Sequencing for HRSN Services

<u>Climate Services Launch</u> for all eligible populations

Phase 2: 11/1/2024

Housing Services Launch for Select Populations:

• Focus on those "at risk" of becoming houseless and prevent more people from entering the chronically houseless population

Phase 3: 1/1/2025

Nutrition Services Launch for all eligible populations

Phase 4: Timing TBD

Remaining Populations Launch

• Launch housing services for remaining eligible populations, including those experiencing houselessness

Feedback & Updated Approaches





Feedback: Housing

Low availability of housing. Given the shortage of available housing, partners highlighted the difficulty meeting the demand. There were questions about whether individuals receiving services through the waiver would be prioritized and how that would affect existing waitlists. CMS also expressed concerns about using waitlists to manage demand.

Approaches to address feedback

- Focusing on the "at risk" population mitigates some of the issues associated with low housing stock, given that the focus will be more on maintaining housing than finding new housing
 - Eliminates the need for a waitlist for the six-month rent service
 - The definition of "at-risk of houselessness" limits who is eligible which extends funding availability
- Approach may enable the State to serve more people overall, since some individuals may need less than six months' rent for stabilization



Concerns about a "drop off." Individuals are eligible for up to six months of rent. Partners identified that without alternative funding sources available (e.g., employment, vouchers) to provide rent beyond six months, this could cause harm to members.

Approaches to address feedback

- Reduce the risk of a "drop-off" after the up-to-six months of rental assistance by focusing on prevention. Individuals often become at risk of homelessness because of a short-term financial shock
 - With up to six months of rental assistance, individuals may be able to better able to sustain their own housing



Feedback: Member Identification

Medical nature of benefits. CCOs and other community partners provided input about challenges identifying individuals with diagnosed and undiagnosed behavioral health conditions, and potentially barriers to accessing services.

Approaches to address feedback

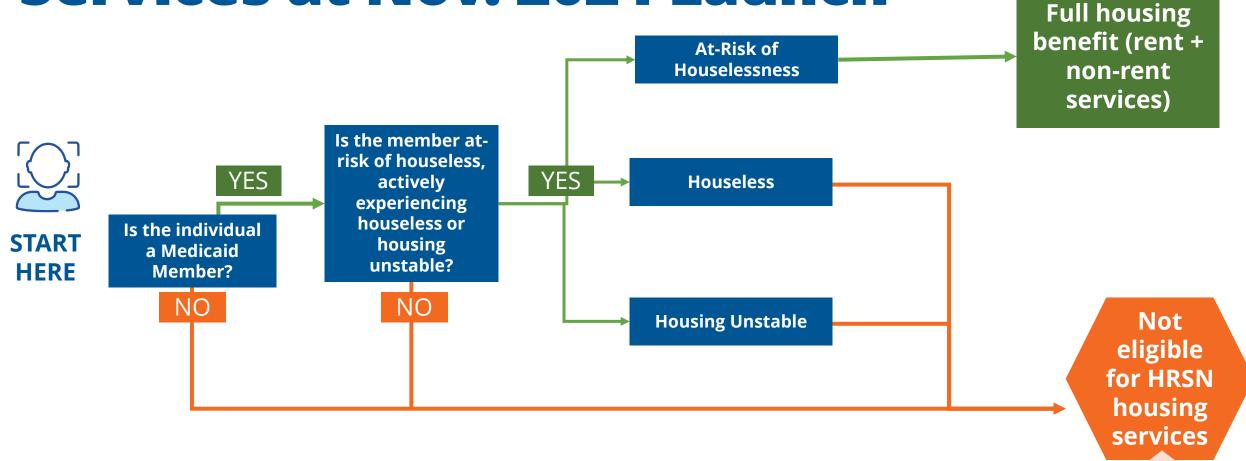
- Simplifies population phasing to make it easier to understand and operationalize
- Screening tools to identify individual at risk of houselessness are wellestablished, so community partners will be prepared to implement this

Feedback: Population Focus

Accidental inclusion or exclusion of specific populations. The State became concerned that partners might lessen focus on the SMI+ population after the initial six-month launch, shifting to other populations that are perceived as easier to serve.

Approaches to address feedback

 The State will continue to focus on the SMI+ population throughout the waiver using incentives to reward CCOs, third party contractors (TPCs), and community-based organizations (CBOs) for serving this population Member Eligibility for HRSN Housing Services at Nov. 2024 Launch



Individuals will receive other, non-HRSN housing services to meet their needs if they are not eligible for HRSN services. HRSN-qualifying members who are homeless or housing unstable may receive housing services for which they are eligible at a later date.

Question & Answer

What additional questions do you have at this time or what additional information do you need?



Stay Connected!

For any questions related to today's presentation, please contact us: 1115waiver.renewal@odhsoha.oregon.gov

For additional updates and information, check our website: www.oregon.gov/1115waiverrenewal

Subscribe to updates that will be sent out in the coming months: https://public.govdelivery.com/accounts/ORDHS/signup/14507





Thank you for your collaboration and ongoing partnership!



Appendix



Definitions

Word or Phrase	Definition
At Risk of Houseless	An individual or family who:
	1. Has an annual income below 30 percent of median family income for the area, as determined by HUD;
	2. Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately <u>available</u> to prevent them from moving to an <u>emergency shelter</u> or another place described in paragraph (1) of the "Homeless" definition in this section; and
	3. Meets one of the following conditions
	a) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance
	b) Is living in the home of another because of economic hardship;
	c) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance
	d) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, State, or local government programs for low-income individuals
	e) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;
	f) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
	g) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan;
	(2) A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or
	(3) A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

Definitions Continued

Word or Phrase	Definition
Houseless	 An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
	 iv. Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or 4. Any individual or family who: Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; ii. Has no other residence; and iii. Lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing.
Housing Unstable/In Need of a Housing Service	An individual who requires services to navigate, obtain, and sustain housing tenancy or create an accessible and healthy home environment