

Authorization Page

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TEMPORARY ADMINISTRATIVE RULES

Oregon Health Authority, Division of Medical Assistance
Programs

410

Agency and Division

Administrative Rules Chapter Number

Sandy Cafourek

dmap.rules@state.or.us

Rules Coordinator

Email Address

500 Summer St. NE, Salem, OR 97301

503-945-6430

Address

Telephone

Upon filing.

Adopted on

08/13/2015 thru 02/08/2016

Effective dates

RULE CAPTION

Direction, Definition, Implementation, and Reporting of Other Non-Medical
Services Provided by CCOs

Not more than 15 words

RULEMAKING ACTION

ADOPT: 410-141-3150

AMEND:

SUSPEND:

Stat. Auth. : ORS 413.042

Other Auth.:

Stats. Implemented: ORS 413.042

RULE SUMMARY

The Division created this temporary rule to provide immediate direction and clarification as to the definitions, implementation, and reporting of other non-medical services as provided by the Coordinated Care Organizations within the Oregon Health Plan. These are non-state plan, health-related services provided in lieu of traditional benefits and are intended to improve care delivery and member health and lower costs.

STATEMENT OF NEED AND JUSTIFICATION

The adoption of OAR 410-141-3150

In the Matter of

None

Documents Relied Upon, and where they are available

The Division created this temporary rule to provide immediate direction and clarification as to the definition, implementation, and reporting of other non-medical services as provided by the Coordinated Care Organizations within the Oregon Health Plan. These are non-state plan, health-related services provided in lieu of traditional benefits and are intended to improve care delivery and member health and lower costs.

Need for the Temporary Rule(s)

A temporary rule is necessary immediately as CCOs must have a definition and guidelines for implementation and reporting of other non-medical services as provided by the Coordinated Care Organizations within the Oregon Health Plan. The Division needs to act promptly to ensure guidance related to other non-medical services is available to CCOs so they can be compliant in the delivery and reporting of such services. It is necessary to use the temporary rule process to reflect those requirements in a timely manner.

Justification of Temporary Rules



Authorized Signer

Printed Name

Date

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Secretary of State

STATEMENT OF NEED AND JUSTIFICATION

A Certificate and Order for Filing Temporary Administrative Rules accompanies this form.

Oregon Health Authority (Authority), Division of Medical Assistance Programs (Division) 410
Agency and Division Administrative Rules Chapter Number

Direction, Definition, Implementation, and Reporting of Other Non-Medical Services Provided by CCOs

Rule Caption: (Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.)

In the Matter of: The adoption of OAR 410-141-3150

Statutory Authority: ORS 413.042

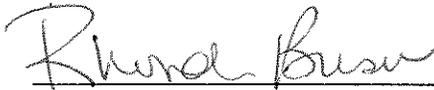
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Authorized Signer

Printed name

Date

Administrative Rules Unit, Archives Division, Secretary of State, 800 Summer Street NE, Salem, Oregon 97310.

Other Non-Medical Services

(1) For purposes of this rule: "Other Non-Medical Services" means non-state plan, health related services, also referred to as "flexible services." These services are provided in lieu of traditional benefits and are intended to improve care delivery and member health and lower costs. Services may effectively treat or prevent physical or behavioral healthcare conditions. Services are consistent with the member's treatment plan as developed by the member's primary care team and documented in the member's medical record.

(2) In the conventional manner using CPT or HCPCS codes, Other Non-Medical Services cannot be reported for utilization purposes. CCOs report qualified Other Non-Medical Services to the Authority in the financial report category "health related services" referenced in the CCO contract and accounted for in the CCO's medical or member services' expenses. These expenditures are not counted as administrative costs when determining medical loss ratio. Other Non-Medical Services may include, but are not limited to:

(a) Training and education for health improvement or management, e.g., classes on healthy meal preparation, diabetes self-management curriculum;

(b) Self-help or support group activities, e.g., post-partum depression programs, Weight Watchers groups;

(c) Care coordination, navigation, or case management activities not covered under state plan benefits, e.g., high utilizer intervention program;

(d) Home and living environment items or improvements such as non-DME items to improve mobility, access, hygiene, or other improvements to address a particular health condition, e.g., air conditioner, athletic shoes, or other special clothing;

(e) Transportation not covered under state plan benefits, e.g., other than transportation to a medical appointment;

(f) Programs to improve the general community health, e.g., farmers' market in the "food desert;"

(g) Housing supports related to social determinates of health, e.g., shelter, utilities, or critical repairs; and

(h) Assistance with food or social resources, e.g., supplemental food, referral to job training or social services.

(3) The contractor shall establish and maintain written policies and procedures for authorizing Other Non-Medical Services. In compliance with the contractor's policy, CCO-covered services may be substituted with or expanded to include Other Non-Medical Services. These services shall be coordinated by the contractor and may be in collaboration with the PCPCH or other participating PCPs. The contractor, the member, and, as appropriate, the family of the member are to agree that such services are an effective alternative for the member. These policies and procedures shall be submitted to the Authority for review and approval.

Stat. Auth.: ORS 413.042

Stats Implemented: ORS 413.042