

to utilize services. This is being done by expanding the SPL criteria to include individuals who are assessed as SPL 18.

The Department must also amend the rule to correct the re-assessment timeline from every six months to every 12 calendar months. This is being done by changing the timeframe in the rule to the correct period.

Finally, the Department needed to add language to clarify who is eligible for EWE. The Department added in language to clarify that individuals who have been determined eligible for Medicaid OHP Plus under OAR 410-200 are not eligible for Extended Waiver Eligibility.

Justification of Temporary Filing:

Failure to act promptly and immediately amend OAR 411-015-0030 will result in serious prejudice to the public interest, the Department, and individuals being assessed as SPL 18. These rules need to be adopted promptly, so that APD may begin serving individuals assessed at SPL 18, withdraw from administrative hearings of individuals who fall within that service priority level, and so the Department can communicate changes to field staff for implementation. Without this change individuals eligible for EWE may not receive the benefit and in turn experience negative health consequences.

Documents Relied Upon, and where they are available:

None.

**DEPARTMENT OF HUMAN SERVICES
AGING AND PEOPLE WITH DISABILITIES
OREGON ADMINISTRATIVE RULES**

**CHAPTER 411
DIVISION 15**

LONG-TERM CARE SERVICE PRIORITIES FOR INDIVIDUALS SERVED

411-015-0030 Extended Waiver Eligibility (EWE)

(1) Individuals determined to no longer meet the criteria in 411-015-0100 and is assessed as Service Priority Level (SPL) 14 - ~~17-18~~ through the assessment process outlined in 411-015-0008 may be eligible to continue receiving Medicaid-funded Long-Term Support Services (LTSS) when one of the following circumstances cause unmet needs or health and safety risks, which would result in the individual being institutionalized or hospitalized within 30 days:

- (a) Lack of access to shelter and support would cause the individual to deteriorate or decompensate;

- (b) Without supports, individual would lack access to safe housing or has a documented history of eviction or threats of eviction that would lead the individual to deteriorate or decompensate; or

- (c) Without supports, individual is at significant risk of abuse or exploitation.

(2) Individuals who are approved for EWE may receive the Medicaid-funded services and supports for which they are eligible and demonstrate an assessed need as defined in OAR 411-027-0020 for six calendar months from the effective date.

(3) Individuals meeting the criteria for EWE must have a re-assessment defined in OAR 411-015-0008 completed no less frequently than every ~~six~~ 12 calendar months, or when the individual's needs or circumstances change.

(4) EWE may be renewed for an additional ~~continue past the~~ six calendar months if the consumer or their representative demonstrates:

(a) The individual or representative is actively working with their assigned case manager to develop a safe plan to address the circumstances identified in section (1)(a) - (c) of this rule; and

(b) The individual or representative shows demonstrable progress towards implementing the plan developed in subsection (3)(a) of this rule.

(5) Case managers may deny initial EWE if the individual does not meet the criteria in (1) of this rule.

(6) Case managers may deny renewals of EWE if the individual does not meet the criteria in (1) of this rule, or the individual or representative does not meet the criteria in section (4) of this rule.

(7) If the case manager does not deny EWE, they must submit initial and renewal requests for approval of EWE to the Central Office no later than two weeks prior to the service plan being closed.

(8) Initial and ongoing eligibility for EWE shall be determined by APD central office on a case-by-case basis.

(a) Ongoing eligibility will be determined based upon an assessment and a review of the individual's progress towards mitigating the identified risk. In order to remain eligible, the individual must show they have been unable to mitigate the risks identified in (1) of this rule, through development and implementation of a transition plan.

(b) In order to ensure engagement, case managers must have direct contact with individuals or their representative each month as described in OAR 411-028-0020(1). Case managers must narrate the monthly contacts in Oregon ACCESS and the steps or actions being taken to mitigate the identified risk.

(9) Individuals receiving Medicaid OHP Plus under OAR chapter 410, division 200 are not eligible for EWE.

Stat. Auth.: ORS 410.070

Stats. Implemented: ORS 410.070