

Oregon Eligibility Partnership Transmittal

Date issued: 6/29/2026

Transmittal #: OEP-PT-26-021

Effective date: 7/1/2026

Transmittal type: Policy

Subject/Topic: Non-MAGI Medical Updates for July 2026

Primary Audience

☒ Eligibility

☐ Leadership

☐ Family Coach

☐ LTSS Case Management

☐ Support

☐ Other:

Impacted areas

☒ New/Updated Policy/Rule

☐ Policy Clarification

☒ Reference Materials

☐ System(s), Specify

☐ Other:

Reference material(s) Oregon Administrative Rules (OARs) 461-115-0050, 461-115-0430, 461-135-0880, 461-140-0210, 461-140-0220, 461-140-0242, 461-140-0250, 461-140-0296, 461-140-0300; 461-160-0620

Summary

Below is a summary of Non-MAGI medical rule changes that will take effect July 1, 2026, with any applicable associated system or process changes.

Details

- There were 11 OARs updated effective 4/1/26 and 25 more effective 7/1/26 to change the way Medicare Savings Programs are referred to in the rules to match the actual names of the programs in federal rules and all other states. The first of a series of rule filings took effect Jan. 1, 2026. Eventually all OARs will reflect the following:
 - QMB-BAS will change to QMB
 - QMB-SMB will change to SLMB
 - QMB-SMF will change to QI

- QMB-DW will change to QDWI
- QMB Programs will change to Medicare Savings Programs
- ONE correspondence was updated to reflect these changes.
- **OAR [461-115-0050](#) When an Application Must Be Filed**
 - This rule was updated to add the application rules for OSIPM and Medicare Savings Programs (MSPs) back to chapter 461 instead of referring to the MAGI rule in chapter 410. Other various formatting and organizational changes were made.
 - No updates to ONE are needed.
- **OAR [461-115-0430](#) Periodic Redetermination or Renewal; Not EA, SNAP or TA-DVS**
 - This rule was updated to add all the renewal rules for OSIPM and MSPs back to chapter 461 instead of referring to the MAGI rule in chapter 410. Along with other various formatting and organizational changes, it was also updated to clarify that when an individual is receiving OHP and either also receiving MSP benefits or newly evaluated for MSP benefits, is tagged for active renewal due to the OHP benefit (either because they're receiving OSIPM or are no longer eligible for OHP), and they fail to return the renewal form or comply with any renewal-related RFI for the OHP, the MSP benefit can be approved if no additional information is needed to determine MSP eligibility.
 - Note: The renewal interview requirement for MSPs was eliminated entirely effective 10/22/19 and for initial applications effective 10/1/25. Neither of these changes apply to QDWI; however, we have no QDWI recipients in Oregon.
 - ONE was updated when these policies were implemented, no further updates are needed.
- **OAR [461-135-0880](#) OSIPM and QMB Programs; COVID-19**
 - This rule will be repealed as the COVID-19 Public Health Emergency ended 4/1/23 and all unwinding activities were completed 12/31/25.
 - No updates to ONE are needed.
- **OAR [461-140-0210](#) Asset Transfer; General Information and Timelines**
 - This rule was updated to remove the reference to OSIPM and replace with nursing facility and home and community-based services and remove sections applicable to June 30, 2006 and earlier. Disqualifying transfers apply to certain long-term care services regardless of whether the individual is receiving MAGI or OSIPM.

Although it is true that a service disqualification may result in OSIPM ineligibility, no one is specifically disqualified from receiving OSIPM.

- No updates to ONE are needed.

- **OAR [461-140-0220](#) Determining if a Transfer of an Asset is Disqualifying**

- This rule was updated to replace references to OSIPM with nursing facility and home and community-based services, remove language applicable in time periods outside of the 60-month lookback, and add an allowance for transfers made by an individual who was a victim of fraud, misrepresentation, or coercion if the individual is incapacitated, cannot take legal action, and a referral has been made to the Adult Protective Services unit. This rule is also being amended to group the asset transfer provisions by program for improved readability and clarity.
- No updates to ONE are needed, workers should continue to select **Fraud, misinterpretation or coercion, and legal action has been taken to recover asset** from the dropdown in the **Non Disqualifying Reason** field on the **Transfer/Sold Resource** screen and make a case note.

Transfer/Sold Resource Information

Resource Type *

Resource Sub Type

Owner *

Individualid

Fair Market Value at the time of the transfer/sale *

Resource Transferred/Sold To *

Name

Transfer Date * <mm/dd/yyyy>

Compensation Received (including encumbrances assumed) *

Countable Resources at Time of Transfer * \$

Non Medical Program Verification *

Other Verification

Medical Verification *

Other Verification

Non Disqualifying Reason

Non Disqualifying Reason Verification

Comments

1000 Character Max

- **OAR [461-140-0242](#) Disqualifying Transfer of Assets Including Home; OSIP and OSIPM**

- This rule was updated to replace references to OSIP and OSIPM with nursing

facility and home and community-based services and add a definition of asset to include income or resources to which the individual or spouse is entitled but does not receive because of any action by the individual, their spouse, a court or person with legal authority, or anyone acting on the direction of the individual or spouse. A new section (3) is being added to further qualify what constitutes an asset to which someone is entitled but does not pursue. Lastly, a subsection is being added to the new section (5) to establish under which circumstances failure to pursue an asset to which one is entitled is not considered a disqualifying transfer; namely whether the cost of doing so outweighs any benefit or whether the individual can afford to pursue.

- Email apd.medicaidpolicy@odhsoha.oregon.gov as needed for ONE coding instructions until system updates can be made.

- **OAR [461-140-0250](#) Determining the Uncompensated Value of a Transferred Asset**

- This rule is being amended to replace OSIP and OSIPM with nursing facility and home and community-based services, add paragraph (C) to section (2)(a) clarifying that the compensation received for an asset to which one is entitled and chooses to pursue includes costs associated with obtaining the asset, and add clarifying language around other costs and encumbrances are included in the compensation received for other transfers.
- No updates to ONE are needed.

- **OAR [461-140-0296](#) Length of Disqualification Due to an Asset Transfer; Nursing Facility Services or Home and Community-Based Care**

- This rule was updated to remove language applicable to dates prior to Dec. 31, 2005 as they are well before the 60-month lookback.
- No updates to ONE are needed.

- **OAR [461-140-0300](#) Adjustments to the Disqualification for Asset Transfer**

- This rule is being amended to replace OSIP and OSIPM with nursing facility and home and community-based services.
- No updates to ONE are needed.

- **OAR [461-160-0620](#) Income Deductions and Patient Liability; Long Term Care Services or Home and Community-Based Care; OSIPM**

- The community spouse minimum monthly maintenance Needs allowance and housing allowance under the Spousal Impoverishment Protections are being updated to \$2,705.00 and \$811.50, respectively.

- ONE will be updated to apply the new standards effective 7/1/26.

Authorized by Ada Osuna

Questions? apd.medicaidpolicy@odhsos.oregon.gov