

Oregon's 1115 Medicaid Waiver

All Come Webinar

November 12, 2025



Zoom Meeting Tips

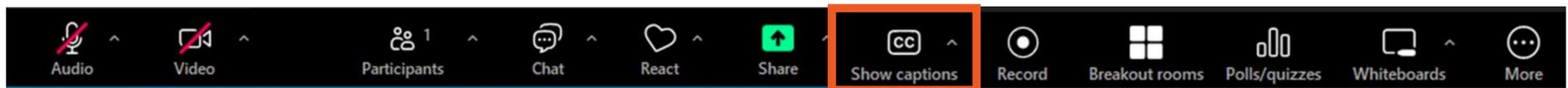
Use chat to ask questions.

- We'd like this session to be interactive, so we'll be saving the chat.
- If you want to ask a question verbally, feel free to raise your hand.

This webinar is being recorded.

- We'll share it with participants after the presentation.

For **live captioning**, please click on the “cc” button at the bottom of your screen.



Today's Agenda

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1115 Medicaid Waiver Background



What is the Oregon Health Plan?

Medicaid

Medicaid is the nation's public health care program. In Oregon we call it the Oregon Health Plan (OHP).

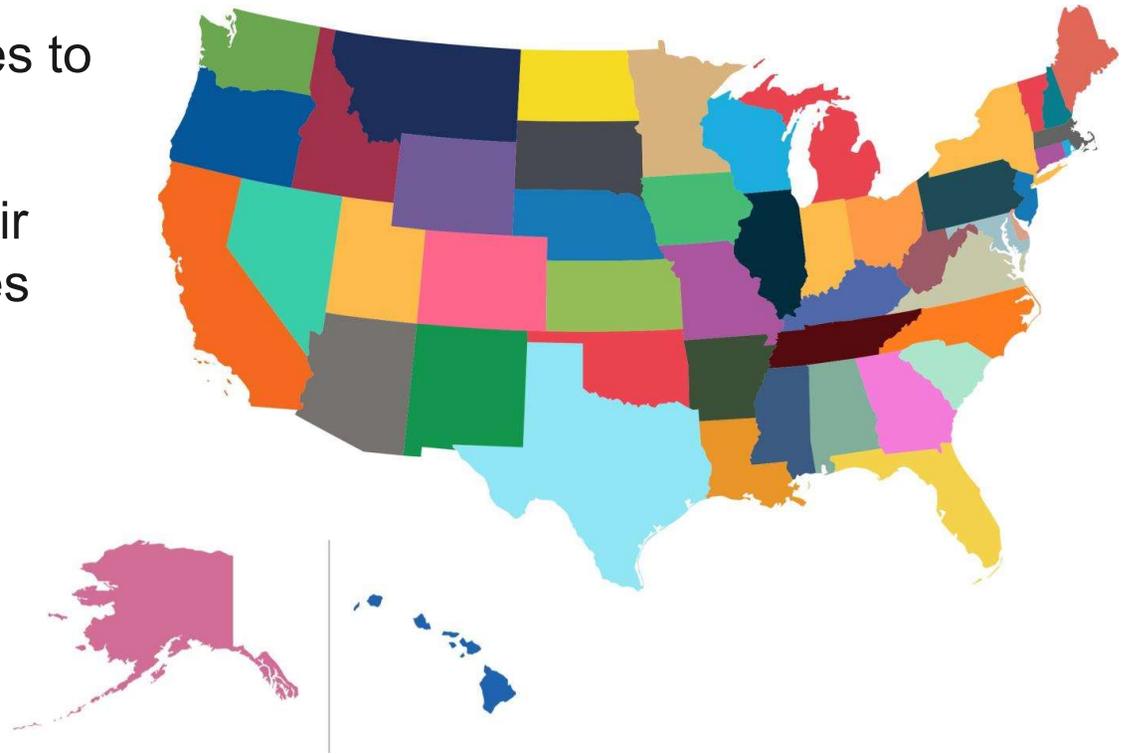
Oregon Health Plan

The Oregon Health Plan (OHP) is free health care coverage for low-income children, teens, and adults who live in Oregon. You can apply for OHP at any time during the year.



What is a Medicaid Waiver?

- States must follow federal rules to get Medicaid funding.
- States can ask **to change** their Medicaid rules. These changes are called a Medicaid waiver.



Benefit Update Project



Oregon Health Plan (OHP) - Benefit Update Project (BUP)

- A project to change how OHP benefits are organized so that OHP covers all the services that federal law says are **mandatory** and that Oregon says are **medically necessary (needed for health reasons)**.
- This change is mostly administrative rather than a change to **how** OHP services are delivered.



HERC review of services

- Oregon's Health Evidence Review Commission (HERC) reviews medical evidence to make sure services are safe and proven to work.
- As part of the Benefit Update Project, HERC is reviewing select services not covered by the Oregon Health Plan to see if coverage should be added after 1/1/2027.
- The work plan for HERC's review of services is available online: [Oregon Health Authority : Benefits Update Project Workplan \(BUP\) : Health Evidence Review Commission : State of Oregon](#)

Highlights of anticipated new OHP services starting 1/1/2027

HERC is recommending coverage changes for the following examples to OHP starting 1/1/2027 as part of the Benefit Update Project.

Coverage area	Details
Primary care office visits and medications for currently non-covered conditions	<ul style="list-style-type: none"> • Check-ups and reasonable testing are already covered • Many low-cost and safe medications already covered
	<ul style="list-style-type: none"> • Medications and equipment: no more denials because a condition is unfunded
Allergy treatment & testing	<ul style="list-style-type: none"> • Newly covered conditions such as seasonal allergies and some rashes
Sports Medicine (treating injuries and illnesses related to physical activity)	<ul style="list-style-type: none"> • Physical & occupational therapy for more conditions
Ophthalmology (Eye diseases)	<ul style="list-style-type: none"> • Newly covered eye and eyelid conditions

For more information on HERC review and decisions as part of the Benefit Update Project, visit: <https://www.oregon.gov/oha/HPA/DSI-HERC/Pages//BUP-Workplan.aspx>

The Benefit Update Project Workgroup

- The workgroup includes representatives from a diverse range of organizations, including coordinated care organizations (CCOs), health systems and member advocacy groups.
- They are meeting between August and December 2025 to help plan for the move away from the Prioritized List.
- The workgroup discusses the appeals and hearing process, HERC's role, medical necessity policy and other topics.
- Meeting information and materials are available: [BUP webpage](#)
- Workgroup members will join in the discussion; everyone else can listen to the meetings
[November 18, 2025](#); [December 2, 2025](#)

How else can you get involved?

- Questions or suggestions? Email: herc.info@oha.oregon.gov
- Participate in HERC public meetings to review services
 - [How to participate with HERC](#)
- Review the Pharmacy and Therapeutics (P&T) Committee work plan for reviewing drug coverage:
 - P&T [work plan to review drug coverage for BUP](#)
 - [P&T website](#) with meeting information
- Visit the [BUP webpage](#) for more information and resources
 - BUP [Factsheet](#)
 - BUP [FAQs](#)

Reentry Health Care Program



Reentry Health Care Program Background

- The **1115 Reentry Demonstration Waiver** intended to provide coverage for eligible individuals leaving a carceral setting up to 90-days pre-release. This coverage included case management, medication assisted treatment (MAT), and 30-days of medications in-hand at release.

Reentry Health Care Update

OHA is proud of the work on this program to date, but after careful consideration and review, OHA has made the difficult decision to not implement the 1115 Reentry Demonstration as part of Oregon's current 1115 OHP Demonstration waiver.

We recognize the contributions and shared expertise from partners, communities, and members over the past 18 months and value your support in designing the Reentry Health Care Program.

Barriers to Implementation

● **Systems Limitations**

- The program required a substantial system change to our Medicaid eligibility and enrollment systems.

● **Federal Changes and Instability**

- H.R. 1 passed and includes required changes to Medicaid rules. Implementing these new rules also requires significant technical eligibility and enrollment-related system changes to implement by January 1, 2027, for the entire Medicaid population.

Next Steps

Federal Consolidated Appropriations Act (FCAA) FCAA 2023 Sec. 5121

OHA plans to continue to focus on meeting mandatory FCAA 2023 Sec 5121 requirements.

FCAA 2023 Sec. 5121 Eligible Population:

- ✓ Eligible for Medicaid or Children's Health Insurance Programs (CHIP)
- ✓ Under 21 **or** under 26 and aged out of foster care system
- ✓ Post-adjudicated (sentenced)
- ✓ Within 30 days prior to release from a carceral facility or within 30 days post-release from a carceral facility.

FCAA 2023 Sec. 5121 Eligible Services:

- ✓ **Targeted Case Management (TCM)**
- ✓ Screening and diagnostic services in alignment with **Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)** within 1 week of release or as soon as possible after release.

The legislative proposal to change state statute is being developed and will be introduced in the 2026 legislative session.

Additional Resources

Visit the Reentry Health Care website for more info:

<https://www.oregon.gov/oha/hsd/medicaid-policy/pages/reentry-info.aspx>

Questions? Email the Reentry Team:

OHPCarceralPrograms@oha.oregon.gov

Health-Related Social Needs (HRSN) Benefit Implementation Update

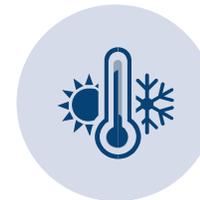


What are Health-Related Social Needs?

Health-Related Social Needs (HRSNs) are social and economic needs that affect people's ability to stay healthy and well. Eligible Oregon Health Plan (OHP) members may get these services, which are meant to help improve their health outcomes.

HRSN Benefits include:

- Housing supports:
 - Rent and utility financial assistance
 - Home changes for health and safety
 - Tenancy sustaining services
- Outreach & engagement services
- Nutrition supports:
 - Medically tailored meals
 - Nutrition education



Health-Related Social Needs (HRSN) Housing Eligibility Update

Here's a high-level overview of the rent and utility financial assistance benefit eligibility:

Oregon Health Plan (OHP) Members may be eligible if all the following applies:

- ✓ Currently housed and renting
 - **Request must include the Member's lease or rental agreement**
- ✓ At risk of houselessness, meaning:
 - The household income is 30% or less of the region's average median income (AMI)
 - **Verification at time of request is required, such as paycheck stubs or income taxes**
 - The Member needs support and lacks resources to maintain current housing
- ✓ Qualifying health condition
 - See next slide for additional details.

Each OHP member application will be reviewed by the health plan to make sure eligibility requirements are met. More information can be found on the [HRSN Service Provider webpage](#) and this [Housing Eligibility Factsheet](#).

Beginning 1/1/2026: Summary of changes for HRSN Rent & Utility Clinical Risk Factors

Keep **population-based** risk factors to support stable health during the most sensitive times of life

- Very young children (younger than six years)
- Older people (65 years old and up)
- Pregnant and up to 12 months after the child is born
- Young Adults with Special Healthcare Needs (YSHCN)

Focus on **acute and unstable health conditions** that can be helped most with the short-term rent benefit

- Narrow to acutely unstable health and higher risk chronic health conditions
- Require engagement in health care services for health conditions

Health-Related Social Needs (HRSN) Nutrition: Pantry Stocking and Fruit & Vegetable Benefit

Oregon Health Authority will be launching two new nutrition services for eligible Oregon Health Plan members in summer 2026:



Pantry Stocking: Allows eligible members to receive foods aimed at promoting improved nutrition.



Fruit & Vegetable Benefit: Allows eligible members to receive fruits, vegetables, and herbs from participating food retailers, vendors, and farms.

Both services may be provided at the household level for eligible members who are pregnant, children under 21, or Young Adults with Special Healthcare Needs (YSHCN).

Health-Related Social Needs (HRSN) Data Update



The HRSN rent & utility benefit made a statewide impact in the first eight months (through June 2025)



12,557 members requested rent and utilities support



6,206 members authorized for rent and utilities support



4,490 members received HRSN rent and utilities

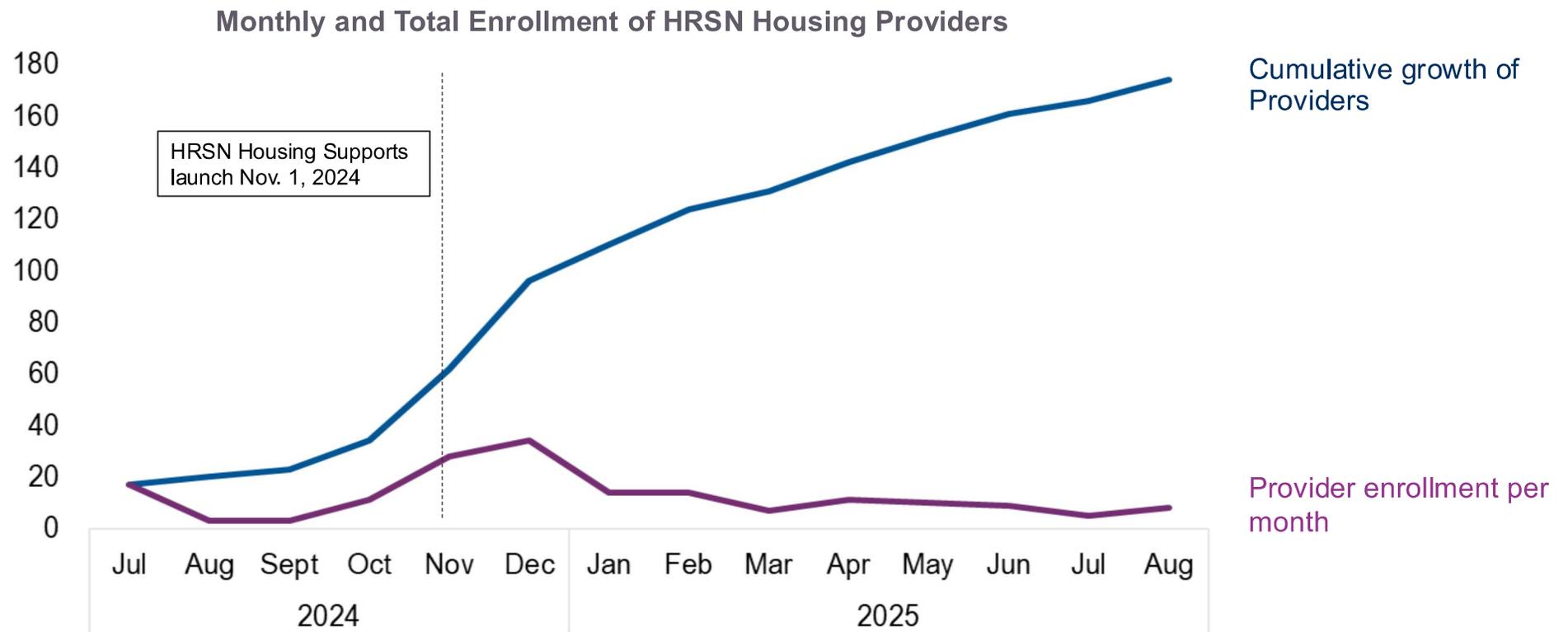
“The availability of the HRSN benefit in Klamath County has stabilized many families and individuals, keeping them off the streets or out of the one available shelter in our community. **This benefit has, so far, kept 74 families and children from becoming homeless**”

- Klamath and Lake Community Action Services

Data Sources: Reflects member-level data from Nov. 2024 – June 2025. Data is pulled from Contractor reports (requests and authorizations) and financial reporting and claims data (receipt of benefits/utilization).

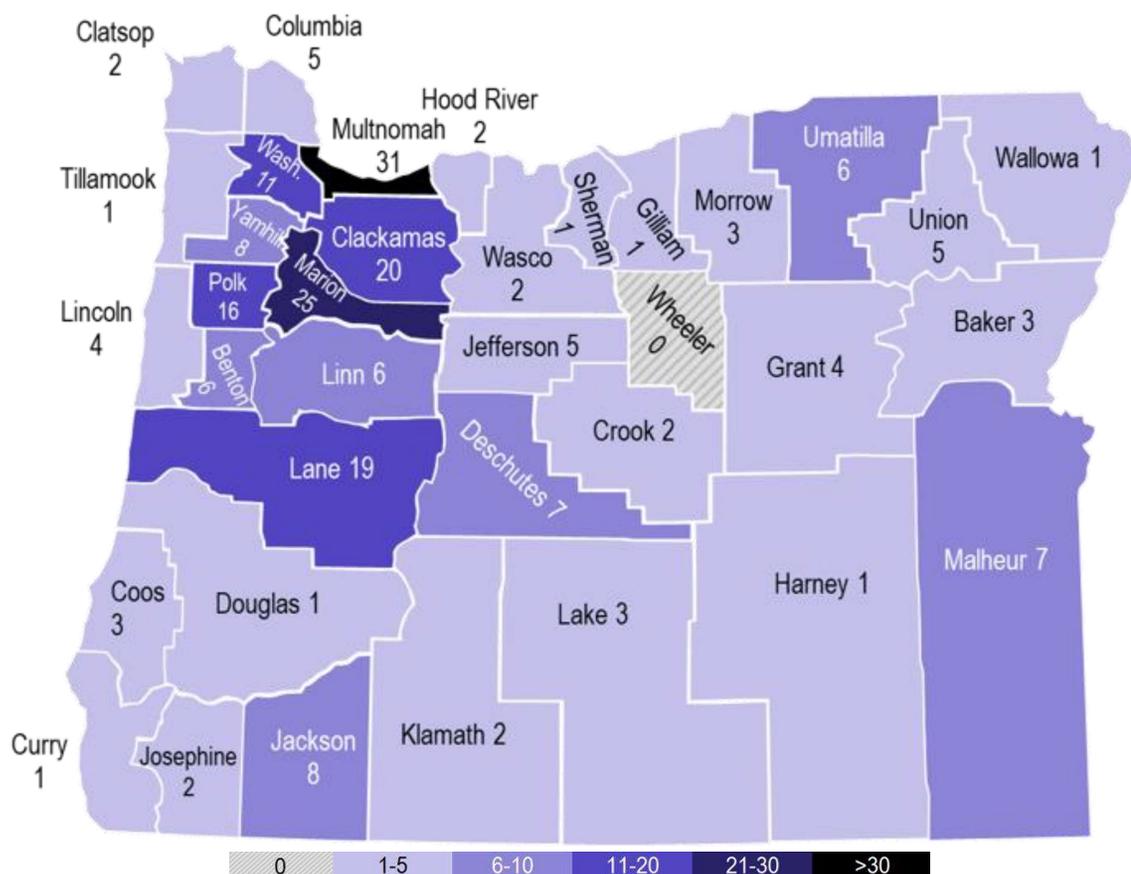
Preliminary data may be subject to change

Organizations are still enrolling to become HRSN providers



Data Source: Medicaid Management Information System (MMIS), July 2024 – August 2025. Most recent number reflects data pulled on 09/22/2025; all past numbers reflect the points in time when they were pulled.

In most Oregon counties, multiple community providers are actively delivering services to members



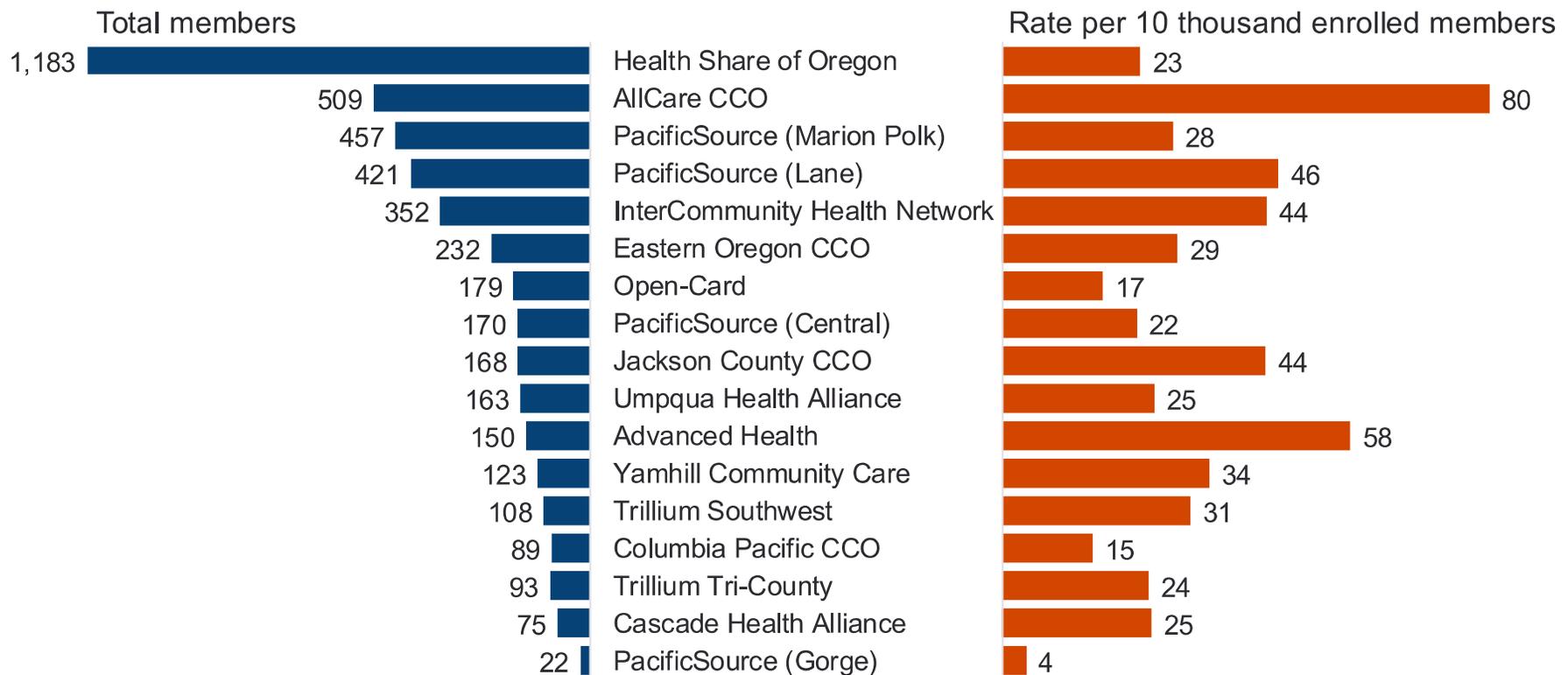
From November 2024 through June 2025, a total of 79 organizations provided HRSN rent & utility benefits

Figure: Oregon county map of community HRSN service providers who have delivered HRSN rent services to members, based on location of member receiving services.

Data source: provider and member-level data from MMIS as of June 2025 – data pulled on 20 October 2025. Service delivery data for August and September are not yet available.

Use of the HRSN rent benefit varies significantly by health plan

Members receiving Rent and Utility Services by Plan: Total Members and Rate per 10 thousand enrolled Members



Reflects member-level data from Nov. 2024 – June 2025 from CCO Exhibit L Quarterly Reports and MMIS. Number reflects data pulled on 10/20/2025. Member enrollment data comes from OHA’s Medicaid Enrollment Dashboard. 6 members received services from more than one plan and are reflected more than once.

The rent and utility benefit has a particularly high impact in northeast and southwest Oregon

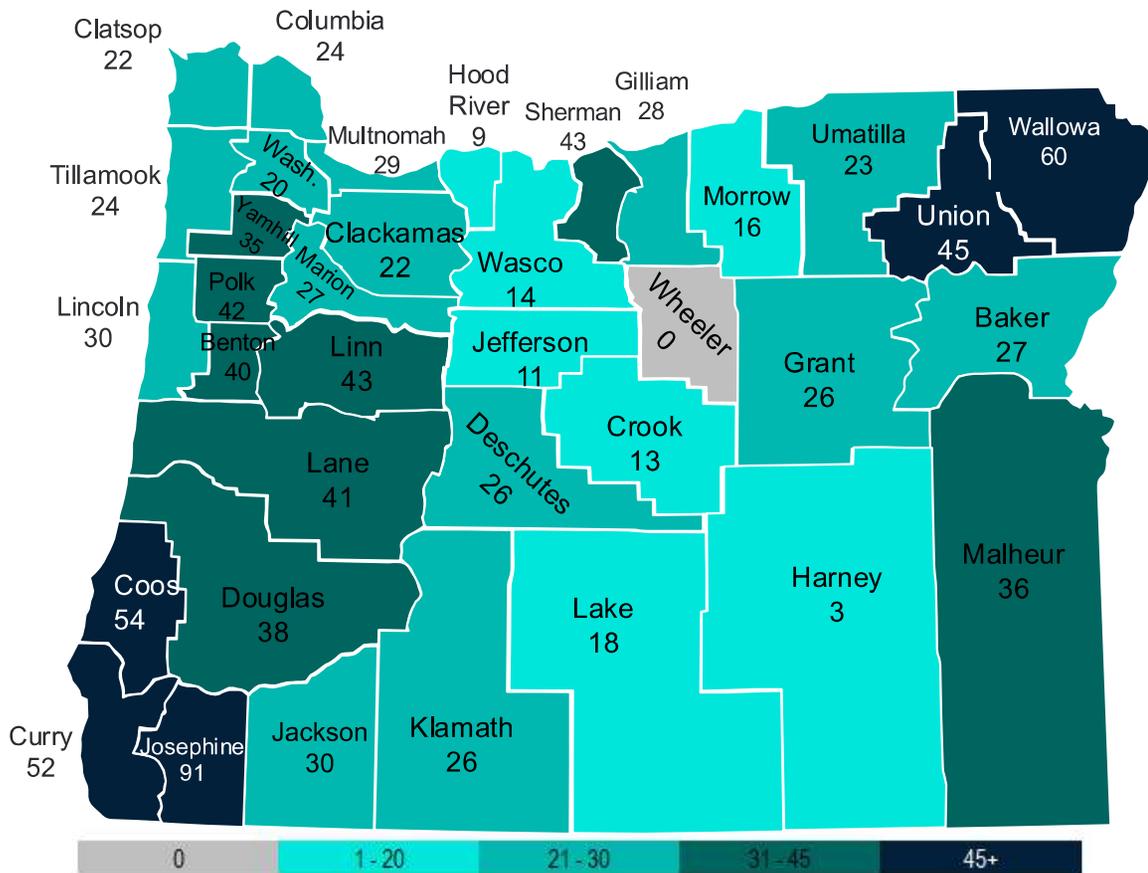


Figure: Oregon county map of rate per 10 thousand enrolled members who have received HRSN rent benefits.

Data source: Reflects member-level data from Nov. 2024 – June 2025 from CCO Exhibit L Quarterly Reports and MMIS. Number reflects data pulled on 10/20/2025.

From November 2024 through June 2025, a total of 4,490 unique members have received rent/utilities assistance.

Question & Answer



What questions do you have?

Stay Connected!

Email questions related to today's presentation to:

- Reentry Health Care - OHPCarceralPrograms@oha.oregon.gov
- HRSN - hrrsn.program@oha.oregon.gov
- BUP/HERC - herc.info@oha.oregon.gov

Check our website for updates and information:

www.oregon.gov/1115waiverrenewal

Subscribe to updates that will be sent out in the coming months:

<https://public.govdelivery.com/accounts/ORHA/signup/37696>



Upcoming Sessions

We will resume our webinar series next year. Stay tuned for more information.





Thank you for your collaboration and ongoing partnership!



Appendix



All coverage areas reviewed as part of BUP

HERC reviewed services in the following coverage areas to see if coverage should be added after 1/1/2027.

Coverage Areas HERC Has Reviewed

- Preventive Services not shown to benefit people
- Behavioral Health conditions
- Fibromyalgia and chronic pain syndrome
- Conditions requiring only evaluation, medical management, equipment and supplies
- Allergies
- Visit limits for noninvasive back pain treatments
- General surgery
- Gastrointestinal conditions
- General Headaches and spine)
- Lower-extremity venous disease
- Procedures and surgeries of the back and spine
- Sports medicine and orthopedic surgeries (other than of the back and spine)
- Gastrointestinal conditions
- orthopedic surgeries (other than of the back
- Ophthalmology - Diseases of the eye

For more information on HERC review and decisions as part of the Benefit Update Project, visit: <https://www.oregon.gov/oha/HPA/DSI-HERC/Pages//BUP-Workplan.aspx>

All coverage areas reviewed as part of BUP

HERC reviewed services in the following coverage areas to see if coverage should be added after 1/1/2027.

Coverage Areas HERC Has Reviewed

- Podiatry - Foot care
- Plantar neuromas and plantar fasciitis
- Urologic conditions - affect the bladder & kidney
- Women's health (Gynecology)
- Conditions of the rectum and colon - Problems causing pain, bleeding, or trouble with digestion
- Oral Health conditions
- Dermatology - Skin treatments
- Ear nose and throat
- Temporomandibular Joint disorders (TMJ) - Pain or discomfort in the jaw area
- Chiropractic and osteopathic manipulative treatment
- Tonsils and adenoids in the Medical Eval and Mgmt
- Bunions and hammertoes for people with diabetes who have foot ulcers
- Services that are not medically necessary
- Cervicogenic headaches
- PE tube placement
- tympanic membrane perforation

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