



## HEALTH SYSTEMS DIVISION

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**Date:** September 15, 2021

**To:** Yamhill System of Care Executive

**From:** Chelsea Holcomb  
Child and Family Behavioral Health Unit, on behalf of the System of Care Advisory Council State Agencies Standing Committee

**Subject:** System of Care Barrier

Thank you for the system barrier that came to the System of Care Advisory State Agencies Standing Committee in April. We will be inviting you to conversations with the System of Care State Agency Standing Committee and to the State System of Care Advisory Council to review this over the coming months. We hope that this process will allow for a fuller exploration of the issues.

### Overview

The Child and Family Behavioral Health Unit wants to acknowledge that the CCO versus Open Card access to Wraparound is an acknowledged barrier and a top priority for the Unit to resolve. OHA encourages providers not to differentiate between the two insurances and find ways to provide Wraparound to any youth needing this process.

The other part of your barrier relates to the communication of the differences between Open card and CCO managed care. This is needing further consultation.

### Response

#### Wraparound:

Wraparound services are paid to the CCOs at a per member per month rate to serve youth in their service area. The CCOs often contract with Community Mental Health Programs or local non-profits to provide the services. The rates are set through these contracts which means the negotiation process and rates that are set may be different across the state depending on the CCO and the provider. This means that the rate is not set by OHA HSD (formally DMAP). Contracted providers may also use other funding sources to support providing wraparound services to open card or privately insured and is common practice in several counties. Potentially individuals may be able to request a single contract provider in the event they move or cannot find the services they need through current providers. OHA recognizes the issue of wraparound being reimbursed differently for fee-for-service and is currently exploring the potential for it to be added to the Oregon State Plan. Please note that other codes can be used to cover Wraparound services and OHA would encourage you to explore these. Nat Jacobs, [nat.jacobs@dhsosha.state.or.us](mailto:nat.jacobs@dhsosha.state.or.us) can provide technical assistance on this.

#### Coverage:

The reimbursement rates are different than coverage under an insurance plan. If the service is not covered or not considered medically necessary, then insurance will not pay for it.

**Finding services:**

There are services available to OHP members to help them find providers who will take open card or to help with CCO enrollment.

**Care coordination:**

Care coordination is a covered benefit and CCO's are contracted to provide that service for enrolled individuals. For FFS individuals, KEPRO has been contracted to provide this service. CareOregon also provides care coordination for tribal members not enrolled in a CCO.

Additionally, there are Community Partner Outreach teams who provide culturally and linguistically appropriate services and can assist members with:

- making decisions about enrollment
- address barriers to coverage access
- help complete applications

You can find more information, including their email here:

- <https://www.oregon.gov/oha/HSD/OHP/Pages/Community-partners.aspx>
- <https://www.oregon.gov/oha/HSD/OHP/Pages/OHPcoversme.aspx>

The page Community Partner Outreach usually refer Oregonians to is <https://healthcare.oregon.gov/Pages/find-help.aspx>. They can find Certified Assister Organizations here by at least entering a zip code, checking off "Oregon Health Plan" And then clicking "Search for Help". It should bring up a map and a list of available partners in the zip code that is entered.