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## Public notice

Notice of intent –The Oregon Health Authority (OHA) will amend the Medicaid State Plan to include coverage of patient costs for items and services furnished in connection with qualifying clinical trials, effective January 1, 2022

**Date:** March 17, 2022

**Contact:** Jesse Anderson, State Plan manager

**Comments due:** 5 p.m. Thursday, March 31, 2022

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Pursuant to 42 C.F.R. § 440.386, the Oregon Health Authority (OHA) provides notice that it will submit a Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS). The SPA will amend the State Plan to include coverage of routine patient costs for items and services furnished in connection with a qualifying clinical trial, effective January 1, 2022.

### Background:

The 2021 Consolidated Appropriations Act amended section 1905(a) of the Social Security Act to add these services as a mandatory Medicaid benefit, effective January 1, 2022. While OHA has already been covering these services, CMS released a [State Medicaid Director Letter \(SMDL #21-005\)](#) that clarifies states should:

- Have processes in place to authorize and cover such costs even if provided out-of-state or, in the case of a managed care enrollee, out-of-network.
- Submit SPAs to account for this new mandatory benefit for Alternative Benefit Plans.

There is no additional fiscal impact on Medicaid expenditures for these services as they have been covered prior to this Act.

### How to comment:

OHA welcomes public review and input. Please send written comments by 5 p.m. Thursday, March 31, 2022, to [jesse.anderson@dhsoha.state.or.us](mailto:jesse.anderson@dhsoha.state.or.us).