



Date: September 20, 2024
To: Coordinated Care Organizations
From: David Inbody, CCO Operations Director
Subject: Clarification of Oregon’s Non-Par and Out of State Hospital Billing Rules

The Oregon Health Authority Medicaid program would like to provide the following clarification regarding the Oregon Administrative Rules (OARs) addressing reimbursements for non-participating providers and for non-contiguous and contiguous out-of-state hospital outpatient services:

- The non-participating provider rules and rates contained in OAR 410-120-1295 (“Non-Participating Provider”) do not apply to the out-of-state contiguous and non-contiguous hospital policy detailed in OAR 410-125-0181 (“Non-Contiguous and Contiguous Area, Out-Of-State Hospitals”). Non-contiguous area hospitals are out-of-state hospitals located more than 75 miles outside the Oregon border. Contiguous area hospitals are out-of-state hospitals located less than 75 miles outside the Oregon border.
 - The reimbursement rates contained in OAR 410-125-0181 apply to Fee-For-Service billing only.
 - The reimbursement rates contained in OAR 410-120-1295 do not apply to contiguous or non-contiguous out-of-state hospitals or other providers, as OHA has no authority to direct an out-of-state provider to accept a particular level of payment from an Oregon CCO.

What should you do?

Coordinated Care Organizations should negotiate rates of reimbursement with out-of-state hospitals and other providers.

Questions?

If you have any questions, please contact Chad Albright at 503-689-2621 or chad.albright2@oha.oregon.gov

Thank you for your continued support of the Oregon Health Plan and the services you provide to our members.

