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Kate Brown, Governor

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April 25, 2018

The Honorable Governor Kate Brown
254 State Capitol
Salem, OR 97301

RE: Oregon Health Authority Bi-Weekly Update on Ongoing and Emerging Issues

Dear Governor Brown:

This letter is the Oregon Health Authority's (OHA's) April 25th issue update. This update includes an update on one previously documented issue.

OHA's Issue Resolution Leadership Team and the Issue Resolution Project Team continue to meet to solidify the processes and management tools used to address and identify issues. We are also continuing ongoing research and analysis into previously documented issues and documenting new issues. As noted in our previous update, once we establish the final template for our internal issue log, we will change the format of these bi-weekly updates to include a brief cover memo and the most recent version of the issue log.

Updates on Previously Documented Issues

Dual Eligible Population

As previously documented, OHA identified two issues related to the dual eligible population that occurred during 2014, 2015, and part of 2016. First, OHA paid full capitation rates to Coordinated Care Organizations (CCOs) and Dental Care Organizations (DCOs) for some dual eligible members, rather than the correct, lower capitation rates that reflect Medicaid as the payer of last resort. Second, some dual eligible members were not properly coded in the Medicaid Management Information System (MMIS) with the appropriate eligibility category, leading to incorrectly claiming the 100% federal match rate associated with Affordable Care Act (ACA) Medicaid expansion members.

OHA made system and process changes in 2016 to pay CCOs and DCOs the correct capitation rate for dual eligible members and claim the correct federal match rate going forward. These system changes also corrected capitation rates retroactively to early 2016, and OHA refinanced overclaimed federal funds to reflect correct federal financial participation amounts.

OHA has defined next steps and timelines for recouping overpayments and refinancing overclaimed federal funds. CCOs and DCOs received actual amounts to be recouped on April 23, which are shown in Table 1 below. OHA will work CCOs and DCOs to review the data and resolve questions before the recoupment process begins in June 2018. OHA plans for all recoupments to be complete by December 31, 2018 and all final reconciliation and refinancing work to be complete by March 31, 2019.

Table 1: Capitation Overpayments by CCO and DCO

Coordinated Care Organization or Dental Care Organization	Total Overpaid Capitation to be Recouped
Access Dental Plan	\$790
Advanced Health	1,214,884
Advantage Dental	18,966
AllCare	2,366,409
Capitol Dental Care	5,202
Care Oregon Dental	1,083
Care Oregon Inc	62,730
Cascade Health Alliance	752,267
Columbia Pacific	1,464,382
Eastern Oregon	2,512,500
Family Dental Care	1,453
FamilyCare	3,685,064
Health Share of Oregon	11,108,420
Intercommunity Health Network	2,684,630
Jackson Care Connect	1,658,890
Kaiser Permanente	2,531
Managed Dental Care of Oregon	958
Oregon Dental Services	4,931
PacificSource Community Solutions - Gorge	581,443
PacificSource Community Solutions – Central	2,956,629
PrimaryHealth of Josephine County	543,749
Trillium Community Health Plan	3,981,028
Umpqua Health Alliance	1,275,999
Willamette Valley Dental Group	384
Willamette Valley Community Health	3,767,542
Yamhill Community Care	831,612
Total	\$41,484,473

OHA has additional research to finalize the amount of overclaimed federal funds for fee-for-service (FFS) claims to be refinanced. However, we expect to be able to refinance the FFS claims related to this issue by March 31, 2019, as well.

Please don't hesitate to contact me with any questions you may have.

Sincerely,



Patrick M. Allen
Director

CC: Fariborz Pakseresht, Director, DHS