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TEMPORARY ADMINISTRATIVE ORDER
INCLUDING STATEMENT OF NEED & JUSTIFICATION

DMAP 42-2022

CHAPTER 410

OREGON HEALTH AUTHORITY

HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

FILED

03/29/2022 8:40 AM
ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

FILING CAPTION: OHP Eligible Pregnant Individuals Shall Be Provided 12-Month Continuous Eligibility After Their Pregnancy Ends

EFFECTIVE DATE: 04/01/2022 THROUGH 09/27/2022

AGENCY APPROVED DATE: 03/25/2022

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NEED FOR THE RULE(S):

Budget authority approving the expansion of protected postpartum eligibility was passed via HB5202 in February, 2022. As of April 1, individuals will be entitled to 12-months of protected postpartum eligibility after their pregnancy ends.

JUSTIFICATION OF TEMPORARY FILING:

The Authority finds that failure to act promptly will result in serious prejudice to the public interest, the Authority, and recipients of Medicaid benefits. These rules need to be adopted promptly so that the Authority may provide 12-months of protected postpartum coverage for eligible individuals. There currently is no administrative rule allowing for continued protected postpartum coverage which will be harmful for OHP members who have recently become pregnant or given birth.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE:

American Rescue Plan Act of 2021: <https://www.congress.gov/bill/117th-congress/house-bill/1319/text>

HB5202: <https://olis.oregonlegislature.gov/liz/2020R1/Downloads/MeasureDocument/HB5202/A-Engrossed>

RULES:

410-200-0135, 410-200-0240

AMEND: 410-200-0135

RULE SUMMARY: OAR 410-200-0135: Amendments made to adjust protected postpartum eligibility policy; individuals who meet citizenship or non-citizen status requirements will now be eligible for 12-months of protected coverage following their pregnancy end-date (increased from 60 days).

OAR 410-200-0240: Edits made to remove the reference to the 60-day protected postpartum eligibility period, and to remove date-specific policy that no longer applies.

CHANGES TO RULE:

Assumed, Continuous, and Protected Eligibility for Children and Pregnant Individuals ¶

- (1) Assumed Eligibility - A child born to an individual who is eligible for and receiving Medicaid/CHIP benefits at the time of the birth is assumed eligible until the end of the month in which the child turns one year of age, unless:¶
- (a) The child dies;¶
 - (b) The child is no longer a resident of Oregon; or¶
 - (c) The child's representative requests a voluntary termination of the child's eligibility.¶
- (2) Continuous Eligibility for children - When eligibility for a child under age 19 is redetermined and would result in a loss of eligibility for any Medicaid/CHIP program administered by the agency prior to the end of the renewal month, eligibility shall be maintained in the current program through the end of the renewal month, unless the loss of eligibility is due to any of the following:¶
- (a) The child is no longer an Oregon resident;¶
 - (b) The child dies;¶
 - (c) The child becomes incarcerated;¶
 - (d) The child turns age 19;¶
 - (e) For children in the CHIP program, receipt of minimum essential coverage;¶
 - (f) An adult in the EDG (as defined in OAR 410-200-0015) requests the medical benefits are closed;¶
 - (g) The child begins receiving Supplemental Security Income (SSI); or¶
 - (h) Eligibility renewal or redetermination cannot be completed because requested information is not submitted by the deadline established by the agency.¶
- (3) Protected Eligibility for pregnant individuals - ~~Individuals who are eligible for and receiving Medicaid for any portion of their pregnancy shall remain eligible through the two calendar months following the month in which the pregnancy ends.¶~~
- (a) Pregnant individuals' benefits are protected as described in this section regardless of changes in circumstance that would otherwise affect eligibility, unless the individual:¶
- (aA) Is no longer an Oregon resident;¶
 - (bB) Becomes incarcerated;¶
 - (cC) Dies;¶
 - (dD) Begins receiving SSI; or¶
 - (eE) Requests a voluntary termination of eligibility, including a request made by an individual authorized to act on the beneficiary's behalf.¶
- (b) Effective April 1, 2022, except as described in subsection (d) of this section, individuals who are eligible for and receiving HSD Medical Program benefits for any portion of their pregnancy shall maintain coverage through the 12 calendar months following the month in which the pregnancy ends;¶
- (c) Individuals whose pregnancy ended within the year prior to April 1, 2022, are eligible for protected benefits as of April 1, 2022, through the end of the 12 months following the month in which their pregnancy ended;¶
- (d) Individuals who do not meet the citizen and non-citizen status requirements who are eligible for and receiving HSD Medical Program benefits for any portion of their pregnancy shall maintain CWM Plus coverage through the two calendar months following the month in which the pregnancy ends.

Statutory/Other Authority: ORS 411.095, 411.402, 411.404, 413.038, 414.025, 414.534

Statutes/Other Implemented: ORS 411.095, 411.400, 411.402, 411.404, 411.406, 411.439, 411.443, 413.032, 413.038, 414.025, 414.231, 414.447, 414.534, 414.536, 414.706

AMEND: 410-200-0240

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CHANGES TO RULE:

410-200-0240

Eligibility for Individuals Who Do Not Meet the Citizen and Non-Citizen Status Requirements ¶

(1) ~~Citizen/Alienship~~ Waived Emergency Medical (CAWEM) provides coverage for emergency services. ¶

~~(a) With the exception of subsection (b) below, t~~To be eligible for CAWEM benefits, an individual must: ¶

~~(Aa) Be age 19 or older; and ¶~~

~~(Bb) Be ineligible for Plus level HSD Medical Program benefits solely because he or she does not meet the Citizen and Non-Citizen Status Requirements (OAR 410-200-0215). ¶~~

~~(b) Children under age 19 are eligible for CAWEM benefits through December 31, 2017, if the requirement outlined in section (1)(a)(B) is met~~Meet all eligibility requirements for an HSD Medical Program, except they do not meet the Citizen and Non-Citizen Status Requirements (OAR 410-200-0215). ¶

(2) ~~Citizen/Alienship~~ Waived Emergency Medical Plus (CAWEM Plus) provides: ¶

~~(a) CAWEM Plus benefits provide an enhanced benefit package (OAR 410-120-1210) for the duration of a recipient's pregnancy; ¶~~

~~(A) additional coverage. To be eligible for the CAWECWM Plus benefits, an individual must: ¶~~

~~(ia) With the exception of paragraph (B) of this part, b~~Be age 19 or older; ¶

~~(iib) Be pregnant; and ¶~~

~~(iii) Be ineligible for Plus level~~c) Meet all eligibility requirements for an HSD Medical Programs solely because, except they do not meet the Citizen and Non-Citizen Status Requirements (OAR 410-200-0215). ¶

~~(B) Children under age 19 are eligible for CAWEM Plus benefits through December 31, 2017, if the requirements outlined in (2)(a)(A) are met; ¶~~

~~(C) CAWEM Plus benefits end as follows: ¶~~

~~(i) CAWEM Plus benefits continue through and end on the last day of the pregnancy; and ¶~~

~~(ii) Through March 31, 2018, the individual remains eligible for CAWEM benefits through the end of the calendar month in which the 60th day following the last day of the pregnancy falls (see OAR 410-200-0135). ¶~~

~~(b) Reproductive Health Equity Fund (RHEF) benefits, effective April 1, 2018, provide an enhanced benefit package (OAR 410-120-1210) and begin on the day following the pregnancy end date: ¶~~

~~(A) An individual is eligible for RHEF benefits through the end of the calendar month in which the 60th day following the last day of the pregnancy falls; ¶~~

~~(B) An individual who is receiving CAWEM benefits under section (2)(a)(C)(ii) of this rule shall receive RHEF benefits effective April 1, 2018, through the end of the month in which the 60th day following the last day of the pregnancy falls. ¶~~

~~(3) Effective January 1, 2018, 3)~~ Cover All Kids provides the OHP Plus-equivalent benefit package (OAR 410-120-1210). To be eligible for Cover All Kids benefits, an individual must: ¶

~~(a) Be under the age of 19; and ¶~~

~~(b) Meet all eligibility requirements for an HSD Medical Program, except they do not meet the Citizen and Non-Citizen Status Requirements (OAR 410-200-0215).~~

Statutory/Other Authority: ORS 414.534, ORS 411.060, ORS 411.402, 411.404, 413.042, 414.025

Statutes/Other Implemented: ORS 411.400, 411.402, 411.404, 411.406, 411.439, 411.443, 413.032, 414.025, 414.231, 414.447, 414.534, 414.536, 414.706