



NOTICE OF PROPOSED RULEMAKING
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 410
OREGON HEALTH AUTHORITY
HEALTH SYSTEMS DIVISION: MEDICAL ASSISTANCE PROGRAMS

FILED
05/22/2023 11:57 AM
ARCHIVES DIVISION
SECRETARY OF STATE

FILING CAPTION: Updating OHP Dental Coverage Effective Date Of Prioritized List To Reference 410-141-3830.

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 09/21/2023 5:00 PM

The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.

A public rulemaking hearing may be requested in writing by 10 or more people, or by a group with 10 or more members, within 21 days following the publication of the Notice of Proposed Rulemaking in the Oregon Bulletin or 28 days from the date the Notice was sent to people on the agency mailing list, whichever is later. If sufficient hearing requests are received, the notice of the date and time of the rulemaking hearing must be published in the Oregon Bulletin at least 14 days before the hearing.

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NEED FOR THE RULE(S)

This rule specifies the date for the version of the Prioritized List used to set the OHP dental coverage. This rule amendment will point to rule 410-141-3830 for the effective date rather than also listing the date in this rule. This change will help ensure continuity of the two rules.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

Prioritized List Of Health Services
<https://www.oregon.gov/oha/HPA/DSI-HERC/PrioritizedList/2-1-2023%20Prioritized%20List%20of%20Health%20Services.pdf>

STATEMENT IDENTIFYING HOW ADOPTION OF RULE(S) WILL AFFECT RACIAL EQUITY IN THIS STATE

We do not anticipate this rule change to cause either a positive or negative affect on racial equity.

FISCAL AND ECONOMIC IMPACT:

We do not anticipate any fiscal impact on our stakeholder groups, the general population of Oregon, our interested parties, other state agencies, etc.

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).

1. None anticipated. We do not anticipate this rule to have any fiscal impact on local government and the public.

2.

a. The number of small businesses is unknown. The types of businesses impacted will dental agencies and/or clinics. We do not anticipate any new or changed in costs for these small businesses associated with this rule change.

b. We do not anticipate any new or changed in reporting, recordkeeping or other administrative activities associated with this rule change.

c. We do not anticipate any new or changes in needed equipment, supplies, labor associated with this rule change.

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

None

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? NO IF NOT, WHY NOT?

No. The Health Evidence Commission includes Racial Equity consideration and input on impacts in their work.

AMEND: 410-123-1220

RULE SUMMARY: Coverage According to the Prioritized List of Health Services

CHANGES TO RULE:

410-123-1220

Coverage According to the Prioritized List of Health Services ¶¶

(1) This rule, effective ~~January 01, 2022~~, on the date stated in OAR 410-141-3830 incorporates by reference the ~~January 01, 2022~~ Oregon Health Evidence Review Commission (HERC) Prioritized List of Health Services (The List), funded through line 472 and including all line items, diagnostic and treatment codes, guideline notes, statements of intent, coding specifications and annotations. All material included therein are incorporated in and made part of this rule by this reference, including interim modifications reported as required under ORS 414.690(7) and (8).¶¶

(a) The Prioritized List of Health Services includes line items consisting of diagnosis and treatment codes that pair together with specific conditions on the same line. Each line has a description of both a condition(s) and treatment for the condition(s). Services on lines 1-472 are covered for OHP Clients, with some dental services subject to exclusion for adults age 21 and over. Coverage of these services is included in the benefit package when providers follow The List's code pairing, Guideline Notes, annotations and statements of intent. The Benefit Package also covers additional services described in this rule.¶¶

(b) Diagnostic and Preventive Service codes. Approved CDT codes for preventive dental services are included on the funded portion of The Prioritized List of Health Services, and limitations specified in related Guideline Notes. Dental and Oral Health Providers are subject to utilizing The List for procedure and diagnosis code pairing and funding of preventive and diagnostic services. Preventive services include prophylaxis, sealants, fluoride varnish application, caries arresting medicaments, and vaccinations. Diagnostic services include examinations, imaging, oral evaluations, and testing. All diagnosis and preventive service codes are subject to The List Guidelines Notes and limitations found in this rule.¶¶

(c) Ancillary service codes. Covered ancillary codes are subject to applicable Ancillary Guidelines on The List. Approved ancillary codes are listed in this rule at OAR 410-123-1620.¶¶

(d) The List shall be used in conjunction with applicable OHP provisions found in federal and state laws, the State Plan and Oregon's 1115(a) Waiver for coverage of services such as, but not limited to:¶¶

(A) Services on unfunded lines for children ages from birth through 1;¶¶

(B) Services provided for a condition appearing in the funded region of The List in conjunction with federal requirements for Early and Periodic Screening, Diagnosis and Treatment (EPSDT) and Oregon's 1115(a) Waiver;¶¶

(2) Regardless of The List placement, dental and oral health services shall be dentally necessary and clinically appropriate for each individual client served.¶¶

(3) Changes to services funded on The List are effective on the date of The List change.¶¶

(a) The Division administrative rules (chapter 410, division 123) do not reflect the most current Prioritized List of Health Services changes until the rules are amended through the Division rule filing process;¶¶

(b) For the most current Prioritized List of Health Services, refer to the HERC website at <https://www.oregon.gov/oha/HPA/DSI-HERC/Pages/Prioritized-List.aspx>;¶¶

(c) In the event of an alleged variation between a Division-listed code and a national code, the Division shall apply the national code in effect on the date of request or date of service.¶

(4) Refer to The List of Services and OAR 410-123-1260 for information about limitations on procedures funded according to The List. Examples of limitations include frequency and client's age.¶

(5) The List does not include or fund the following general categories of dental services, and the Division does not cover them for any client. Several of these services are considered elective or "cosmetic" in nature (i.e., done for the sake of appearance):¶

(a) Desensitization;¶

(b) Implant and implant services (See Prioritized List Guideline Notes 123 and 169);¶

(c) Mastique or veneer procedure;¶

(d) Orthodontia (except for cleft palate, cleft lip, or cleft palate with cleft lip treatments, or to correct cranial facial abnormalities);¶

(e) Overhang removal;¶

(f) Procedures, appliances, or restorations solely for aesthetic or cosmetic purposes;¶

(g) Temporomandibular joint dysfunction treatment; and¶

(h) Tooth bleaching.

Statutory/Other Authority: ORS 413.042, ORS 414.065

Statutes/Other Implemented: ORS 414.065