

Oregon's Medicaid 1115 Demonstration waiver renewal was approved by the Centers for Medicare and Medicaid Services (CMS) on January 12, 2017. This waiver allows the state to continue the Oregon Health Plan— Oregon's Medicaid program – for another five years. The Oregon Health Plan (OHP) covers over 1 million low-income Oregonians who are struggling to make ends meet. This is the largest health plan in the state and covers 1 in 4 Oregonians and almost 40% in some rural counties. This approval provides Oregon the ability to continue its innovative model of health care for OHP members and providers and preserves over two decades of work that have gone into building and improving the Oregon Health Plan.

The waiver renewal, a five year contract with the federal government, is approved for the period from January 12, 2017 through June 30, 2022. The Oregon Health Authority and CMS worked through an expedited approval process to ensure that Oregon is able to maintain the success achieved under Health System Transformation and continue momentum to ensure all Oregonians have access to high quality, affordable health care. To review frequently asked questions and information related to 1115 waiver authority, please visit <http://www.oregon.gov/oha/hpa/Medicaid-1115-Waiver/Documents/Waiver-Basics-FAQs.pdf>.

Oregon will maintain the core tenets of the highly successful Oregon Health Plan (OHP) that serves over 1 million low income Oregonians. Under the agreement, Oregon will continue to:

- Provide integrated physical, behavioral and oral health care services to OHP members through Coordinated Care Organizations (CCOs).
- Advance the coordinated care model to further integrate care and pay for value rather than volume of services, improve quality and outcomes, and continue to hold down costs to a sustainable rate of growth.
- Offer evidence-based benefits through the state's prioritized list of services, which emphasizes prevention and effective care.

In addition to continuing the core components of Oregon's existing coordinated care model, the waiver allows Oregon to further advance Health System Transformation in several key policy areas. Oregon received additional flexibility to:

- **Continue the Hospital Transformation and Performance Program (HTPP)** through June 30, 2018.
- **Promote increased investments in health related and flexible services.** The waiver provides clarity on how non-traditional services that improve health are accounted for in global budgets. CCOs will be encouraged to invest in services that improve quality and outcomes, and CCOs that reduce costs through use of these services can receive financial incentives to offset those cost reductions.
- **Promote primary care and pay for value.** Oregon will advance the use of value-based payments by CCOs. The state received authority to provide new performance incentive

payments to primary care providers under the “Patient-Centered Primary Care” medical homes and “Comprehensive Primary Care Plus” initiative.

- **Advance Tribal Health Programs.** The Tribal Uncompensated Care Program (UCCP) was transitioned to become a Medicaid benefit, making the program easier to manage for tribes. Important services and protections for American Indians and Alaska Natives in Oregon were strengthened.
- **Expand access to coordinated care.** The state received authority to make enrollment into a coordinated care organization easier for Oregonians who are dually eligible for both Medicaid and Medicare. This expands coverage into high quality, cost effective, person-centered care for some of Oregonians most vulnerable population.

The approved application can be found at:

<http://www.oregon.gov/oha/hpa/Medicaid-1115-Waiver/Pages/Waiver-Renewal.aspx>.