



Salem OR 97301
Voice: 503-947-2340
Fax: 503-947-2341
www.Oregon.Gov/OHA
www.health.oregon.gov

March 26, 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) issue update for the two weeks ended March 23, 2018. This update includes an update on one previously documented issue and one newly documented issue.

OHA's Issue Resolution Leadership and Project Teams continue to meet, and we are continuing ongoing research and analysis into previously documented issues and documenting new issues. 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

Payments for Certain Procedures Related to Termination of Pregnancy

As previously documented, three procedure codes that may be used to pay termination of pregnancy procedures were recently determined not to be eligible for federal funding. System changes have been implemented to ensure federal funds are not claimed for these procedure codes going forward. We have refinanced \$1.6 million in federal funds arising from claims for services provided in 2009 through 2017. We are conducting additional analysis to confirm amounts to be refinanced for 2002 through 2008, but our current estimate is approximately \$400,000 in additional federal funds to be refinanced for that time period. Once that analysis is complete, the remaining amounts will be refinanced.

Newly Documented Issues

The following is a summary of one newly documented issue since our last update. This issue still requires additional research and analysis. As such, we expect our understanding of the cause, scope, and impact to evolve.

Retroactive Medicare Eligibility

Status: Not yet resolved; additional analysis required.

Estimated Impact: Not yet known; additional research and analysis required.

Summary: It's not uncommon to receive notification from the Centers for Medicare and Medicaid Services (CMS) that an Oregon Health Plan member has been retroactively enrolled in Medicare. In some instances, the retroactive period can be several months or longer. While researching the previously documented issue regarding overpayments to Coordinated Care Organizations (CCOs) for dual eligible members, we learned that our system does not retroactively correct the capitation rates paid to CCOs for these members to reflect their dual eligible status back to the retroactive effective

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date. Additional research and analysis is in progress to quantify the impact of this issue and to determine next steps for resolution.

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

Sincerely,

Laura Robison Chief Financial Officer Oregon Health Authority

cc: Patrick Allen, Director, OHA

Fariborz Pakseresht, Director, DHS