



OFFICE OF THE DIRECTOR

Kate Brown, Governor

Oregon
Health
Authority

January 19, 2018

The Honorable Governor Kate Brown
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Salem, OR 97301

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

Dear Governor Brown,

This letter contains the Oregon Health Authority's (OHA's) January 12 bi-weekly issue update. Thank you for understanding for our delay in submitting this letter. This update includes an update on one previously documented issue.

OHA's Issue Resolution Leadership Team has met several times in December and January to develop a charter, governance structure, and issue log format, which we expect to finalize in the coming weeks. 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.

Overwritten Eligibility Records

As previously documented, this issue relates to specific situations where eligibility information is retroactively overwritten in the system when clients provide updated eligibility information. For example, a parent and child both apply for Medicaid on January 1, 2017 and the household income is 250% of the Federal Poverty Level (FPL). The child is eligible but the parent is not. In July 2017, the parent reports updated income information showing that household income is now 100% of the FPL, so the parent is now eligible. Due to this system issue, the July 1 eligibility information overwrites the original January 1 information in the system, showing that the parent was eligible all the way back to January 1.

The system issue has been corrected, and we conducted additional research to determine whether any claims for services prior to the true eligibility date were paid retroactively on a fee-for-service basis. Note that affected individuals were not retroactively enrolled into coordinated care organizations (CCOs). Our research determined that approximately \$46,000 in fee-for-service claims have been paid for individuals affected by this system issue during the months where they should not have been found eligible. We are in the process of defining next steps to refinance this amount.

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

Sincerely,

/s/

Patrick M. Allen
Director
Oregon Health Authority

cc: Fariborz Pakseresht, Director, DHS