

## HB 2286 -1 STAFF MEASURE SUMMARY

### House Committee On Behavioral Health and Health Care

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**Meeting Dates:** 1/23, 2/7

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#### **WHAT THE MEASURE DOES:**

Requires Oregon Health Authority (OHA) to maintain process to identify claims eligible for enhanced federal match for services provided to American Indians or Alaska Natives by nontribal providers, secure enhanced federal match from Centers for Medicare and Medicaid Services, and establish a mechanism to return to tribe portion of enhanced federal match.

*FISCAL: Has minimal fiscal impact*

*REVENUE: No revenue impact*

#### **ISSUES DISCUSSED:**

- 100% FMAP Tribal Savings and Reinvestment Program
- Federal definition of American Indian and Alaskan Native

#### **EFFECT OF AMENDMENT:**

-1 Clarifies definitions of "eligible claim" and "enhanced federal match."

#### **BACKGROUND:**

In 2016, the Centers for Medicare and Medicaid Services (CMS) updated its payment policy to allow Indian Health Service (IHS) and Tribal facilities to enter into written care coordination agreements with non-IHS/Tribal providers to furnish certain services for their patients who are American Indian or Alaska Native (AI/AN) Medicaid beneficiaries ([SHO #16-002](#)). Amounts paid by the state Medicaid program for services provided in accordance with those agreements are eligible for federal matching funds at the enhanced federal matching rate (FMAP) of 100 percent. Since 2018, the Oregon Health Authority has implemented this guidance with seven of the state's nine Federally-recognized Tribes through the 100% FMAP Tribal Savings and Reinvestment Program.

House Bill 2286 would codify the 100% FMAP Tribal Savings and Reinvestment Program by requiring the Oregon Health Authority to maintain a process to identify claims eligible for enhanced federal match for services provided to American Indians or Alaska Natives by nontribal providers and return a portion of that enhanced funding to the Tribes.