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To: The Honorable Representative Rob Nosse, Chair
House Committee on Behavioral Health and Health Care

From: Julie Johnson, Tribal Affairs Director
Oregon Health Authority

Subject: HB 2286

Thank you Chair Nosse, and members of the committee for the opportunity to speak with you today. My name is Julie Johnson and I am the Tribal Affairs Director for the Oregon Health Authority.

I am here to talk about the importance of HB 2286 and express OHA's support for the bill. The purpose of this bill establishes a statutory basis for an existing Medicaid program – the 100% FMAP Tribal Savings & Reinvestment Program.

I would like to share with you the background and purpose of the bill.

- Medicaid reimbursement is generally comprised of a combination of state and federal funding. The federal funding percentage is called “FMAP” (Federal Medical Assistance Percentage).
- Tribal Medicaid expenditures are funded at 100% FMAP in recognition of the Federal Trust Responsibility to provide health care to American Indians and Alaska Natives wherever they reside.
- With the goal of honoring the government to government relationship and improving health for American Indians and Alaska Natives in our state, OHA works closely with the Nine Federally Recognized Tribes of Oregon and the Urban Indian Health Care Program.
- In 2016, CMS allowed states to claim enhanced 100% FMAP for Medicaid services coordinated by a tribe with a non-tribal provider. This created savings to state general fund expenditures.

- At the request of the Tribes of Oregon, and guidance from Governor Brown, OHA implemented a program in 2018 to claim this enhanced federal Medicaid funding and to return a portion of the savings back to the Tribes.
- The participating Tribes of Oregon use the funding to reinvest and strengthen their health care system.
- HB 2286 will ensure continuity of this program.

We appreciate the ongoing partnerships with the Tribes and the Urban Indian Health Program to support the bill.

- Once the bill was drafted and assigned a number, we shared it with our tribal partners. By request of the Urban Indian Health Program we will be working on an amendment to include them also.
- The American Rescue Plan authorized 100% FMAP for Urban Indian Health Programs for two years. CMS permitted OHA to include the Native American Rehabilitation Association of the Northwest (NARA NW) in this program for this period of time. Strong efforts are currently underway in Congress to make this permanent.
- As a result of the American Rescue Plan and State Health Official Letter 21-004, OHA has partnered with NARA NW to participate in the 100% FMAP Tribal Savings and Reinvestment Program for so long as 100% FMAP is made available by Congress. We want to be sure this is reflected in the legislation.

We do also have a policy option package request to support this work.

- The fiscal cost will be for a one-time automation of this program using the Medicare and Medicaid Information System (MMIS).

By passing HB 2286 this will support OHA's strategic goal to eliminate health inequities by 2030. Thank you for your time, please let me know if you have any questions.