

Limited Drug Coverage for Citizenship Waived Medical (CWM) Benefit

Effective immediately, the Oregon Health Authority (OHA) has added limited fee-for-service drug coverage to the CWM benefit plan. In most cases, OHA will require prior authorization (PA) to verify the drug qualifies for coverage. CWM drug coverage is limited to:

- Drugs to treat cancer or related conditions to help the patient tolerate or complete cancer therapy
- Short-term behavioral health drugs following a crisis episode
- Immunosuppressants for kidney transplant

Why is this happening?

As of January 1, 2022, the Oregon Legislature authorized additional funds to expand emergency services to CWM members. This expansion included limited drug coverage for cancer, immunosuppressants for kidney transplant, and short-term behavioral health drugs following a crisis episode.

What should you do?

Verify CWM eligibility. To do this, enrolled Oregon Medicaid providers can:

- Visit the **MMIS Provider Portal** at <https://www.or-medicaid.gov>. After login, click "Eligibility" to get started. Refer to the Eligibility Quick Reference at <https://apps.state.or.us/Forms/Served/he3161.pdf>; or
- Call the **Automated Voice Response** line at **866-692-3864**. After login, press 1 for Recipient Eligibility

For covered prescriptions written for CWM members:

- Include the diagnosis on the prescription.
- For behavioral health drugs, indicate whether it is related to a behavioral health crisis episode.
- Request PA. PA requests should document:
 - A covered diagnosis (i.e., cancer, kidney transplant, or a recent behavioral health crisis episode)
 - For cancer treatment, attestation that the condition relates to treating cancer or related conditions to help the patient tolerate or complete cancer therapy.
 - Chart notes for some drugs with clinical PA criteria (including some provider-administered drugs). Visit <https://www.oregon.gov/oha/HSD/OHP/Pages/Policy-Pharmacy.aspx> to view specific criteria (you will need to scroll down to the PA section).

Providers can submit PA requests three ways:

1. Call the Oregon Pharmacy Call Center at 888-202-2126;
2. Submit via the secure MMIS Provider Portal at <https://www.or-medicaid.gov>; or
3. Fax to 888-346-0178. Use the form at <https://apps.state.or.us/Forms/Served/he3978.pdf>.

For other prescriptions written for CWM members, please inform the patient that their Medicaid benefit may not cover the drug.

Questions?

- **About pharmacy point of sale and prior authorizations for fee-for-service prescriptions:** Call the Oregon Pharmacy Call Center at 888-202-2126.
- **Patient questions or concerns:** Please share our Client Services toll-free number with OHP patients: 800-273-0557. Representatives are available Monday through Friday, 8:00 a.m. to 4:45 p.m.