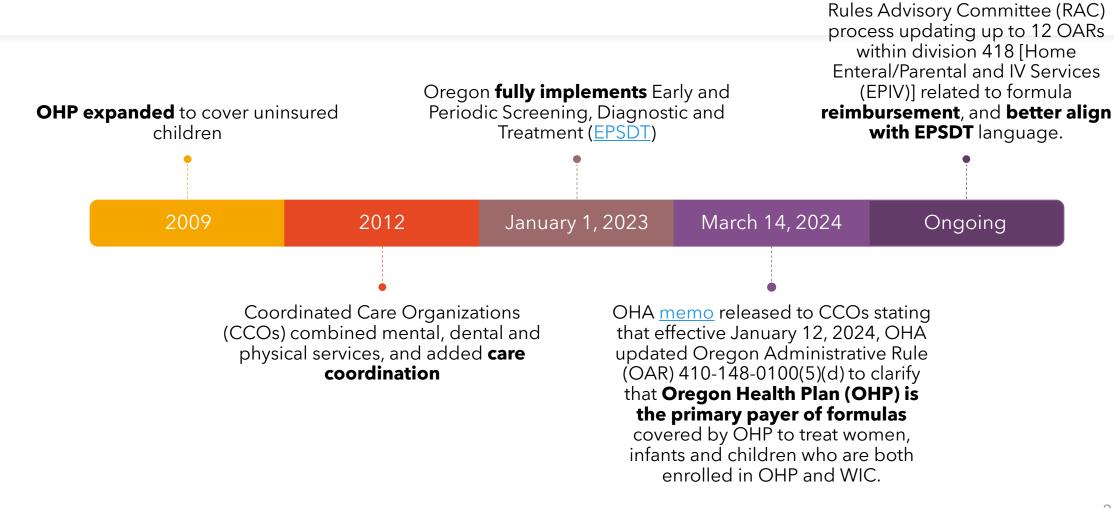
Medicaid Coverage of Medical Formulas

OWCA - Friday, April 19th

Timeline



Long term impact of these changes

Any non-bid formula that is medically necessary and appropriate is a covered benefit under Medicaid/OHP and is required by EPSDT. Additionally, CCOs are no longer able to give blanket denials for formula requests. Patients must receive written notice of denials under EPSDT.

What does this mean for WIC services?

Ensure families have full access to meeting their child's medical nutrition needs.

- ✓ Continue providing bid formula
- ✓ Continue issuing medical formulas according to policy
- ✓ Initiate referrals to the Ombuds Program and coordinate with Innovator Agents to support family needs.

How might this change WIC clinic processes?

Local agency WIC clinics may see a decrease in the number of requests for medical formulas.

 Specialty clinics (NICU, GI, renal) or other healthcare provider will complete paperwork to provide the formula and/or complete the CCO prior authorization form.

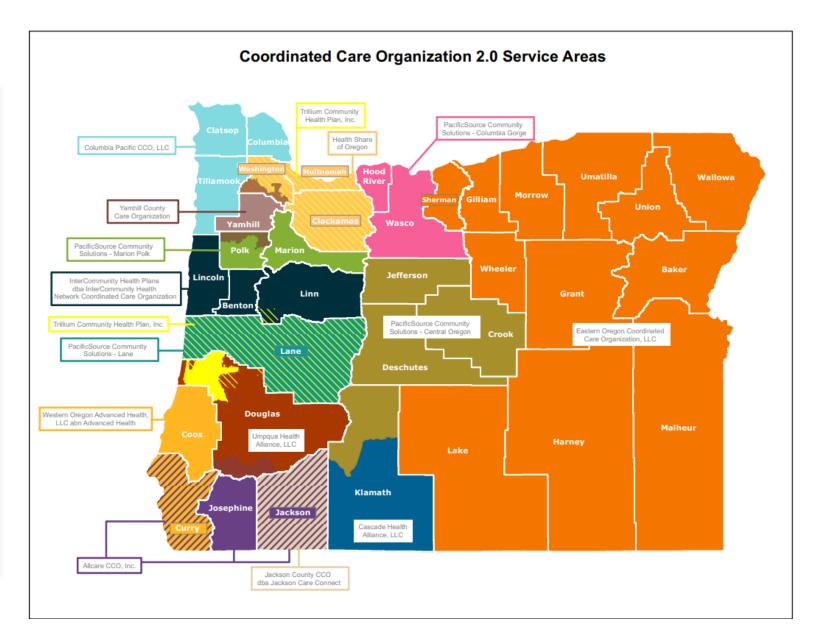
Certifiers may learn of formula being provided by an outside source during a WIC appointment.

 Provide details in progress note - what is the formula and who is providing the formula.

Referencing the change in (OAR) 410-148-0100(5)(d) may be helpful when communicating with OHP health care providers or CCOs regarding medical formula coverage for WIC participants.

Coordinated Care Organizations (CCOs)

- 16 CCOs in Oregon
- Care coordinators
- Approval/denials of medical formula
- Prior authorization process



Important Contact Information

OHA Ombuds Program:

• Message line: 877-642-0450

• Email: <u>OHA.OmbudsOffice@oha.oregon.gov</u>

- If WIC RDs hear about OHP denials for formula, they can connect directly to Ombuds who will advocate on the participant's behalf with the participant's permission. When emailing Ombuds, also cc the Innovator Agent for that CCO.
- Provide Ombuds with full name (spelled correctly as in MMIS) and birthday or OHP ID number (8 digits). Bonus info: name of CCO, denial letter from CCO and name of DME supplier (if known).

Innovator Agents:

- Phone and email for Innovator Agents (IA) are on the OHA website
- IAs are assigned to CCOs and can confirm a participant's/family's participation in a particular CCO, support the immediate needs of the shared family and connect the family with their CCO care coordinator.
- Provide IA with OHP number (8 digits), brief history of WIC participant/family.

Important Contact Information continued

CCO (or Open Card) Care Coordinators:

- Care coordinators can support medically complex patients help to identify all possible resources and referrals the family may be eligible for.
- CCO Care Coordinator contact list can be found in "WIC Nutritionists" Basecamp group.
- Provide the care coordinator with OHP number, brief history of WIC participant/family, formula needs, etc.

The state team is here to support you!

- Notify your nutrition consultant when:
 - A family reports that Medicaid denied a medical formula.
 - A family reports that Medicaid is not providing formula for tube feedings.
 - You need assistance connecting to Ombuds, the correct Innovator Agent for your family, or finding the correct contact information for the family's Care Coordinator.
 - You have any questions about Medicaid coverage of medical formulas.

Discussion Questions

- 1. What are the questions that come up for you?
- 2. What is positive?
- 3. What are the challenges?
- 4. How can we help you operationalize this?

Thank you!

For embracing change and continuing the amazing work that you provide to families every day.