

Improving Health Outcomes by Streamlining Life and Coverage Transitions



Providing OHP members the coverage and services they need, when they need it

When people go through major life transitions, like leaving prison, being discharged from Oregon State Hospital, or losing housing, they often lose access to their health care providers, leading to worse health outcomes. These transitions are even more difficult for people experiencing behavioral health conditions or crises.

People lose care during these times because they are often left to navigate “the system” on their own. The system includes many separate supports, like Oregon Health Plan (Medicaid), food assistance (SNAP), and more. The Oregon Health Authority wants to close gaps in coverage and care, as well as provide defined packages of services and supports for health-related social needs. By providing these supports, Oregon Health Plan (OHP) members will experience fewer gaps in care, which will mean better health outcomes.

Potential strategies for creating an equity-centered health system

Below are some strategies the Oregon Health Authority plans to ask the federal government for permission to do:

1. Waive the federal rule preventing a person in custody from accessing Medicaid benefits

Right now, when OHP members enter state custody (like prison or the Oregon State Hospital) they lose Medicaid coverage. When they’re released, it can take up to two weeks to get covered again, which often means weeks without care (doctor appointments, medicine, etc). To help fix this, Oregon wants to:

- Provide coverage to eligible young people, even if they’re in the juvenile correction system. For many young people, this will mean *staying* on OHP.
- Provide OHP coverage or appropriate CCO transition services to OHP members, even when they’re in the Oregon State Hospital, psychiatric residential facilities, and prison. For people in prison and the state hospital, coverage would start 90 days before their scheduled release.
- Provide OHP benefits and CCO enrollment for OHP members in county jail or local correctional facilities, including people waiting for their court date.

Facility types

Juvenile correction: A place where young people convicted of crimes go for rehabilitative services.

Prison: A place where people serve time after being convicted of crimes.

Jail: A place where people who are awaiting trial are held.

2. Provide OHP and transition supports to Youth with Special Health Care Needs (YSHCN) up to age 26.

This strategy aims to set YSHCN up for success as they transition into adulthood. For young adults with special health care needs, effective transition from pediatric to adult health care results in:

More:	Less:
<ul style="list-style-type: none"> • Regular care • Patient satisfaction • Quality of life • Self-care skills 	<ul style="list-style-type: none"> • Gaps in care • Barriers to care • Hospital admission rates • Length of hospital stays

3. **Provide social supports to members experiencing life transitions.** Many life events, like losing housing or being impacted by extreme weather, can cause members to lose coverage or lose contact with their health care providers. To help members keep their coverage, stay in touch with their health care providers, and stay healthy, Oregon wants to provide social supports to members as they experience these types of events. Transitions supports include services related to:



4. **Cover more providers outside the medical model.** Providers outside the medical model include traditional and community health workers, personal health navigators, peer wellness and support specialists, and doulas. These service providers often live and work in the same communities as OHP members, which means they can deeply understand what OHP members experience. By ensuring the state pays them enough for the services they provide, OHP members will receive more culturally responsive care.
5. **Invest in Community-Based Organizations (CBOs).** Community-based organizations often best understand the needs of the community members they serve. They are therefore able to provide culturally-responsive services in people’s preferred languages and connect them to resources. Oregon plans to invest money in CBOs, so they can help more OHP members.

What this means for OHP members

Under the new waiver, OHP members will get to keep coverage, care, and services, in more situations. Some of these situations include:

- Leaving Oregon State Hospital, other psychiatric residential facilities, or prison.
- Youth with Special Health Care Needs will get to keep their coverage until age 26 instead of losing it at 18.
- People at risk of extreme weather events
- Youth in foster care
- Elderly adults who have both Medicaid and Medicare health insurance

You can get this document in other languages, large print, braille or a format you prefer. Contact the Community Partner Outreach Program at community.outreach@dhsosha.state.or.us or by calling 1-833-647-3678. We accept all relay calls or you can dial 711.