

CLHO Update – Title X & Reproductive Health  
March 15, 2018

PE 41 Context:

Title X grant has been used to support RH clinical services through PE 41. PE 41 requires LPHAs to either provide clinical services directly or to sub-contract clinical services out.

Passage of HB 3391 afforded the RH Program with the opportunity to relook at all funding available through Title X, Oregon ContraceptiveCare (CCare) & new HB 3391 general funds. Result: separation of funding for clinical services from core responsibilities for LPHAs.

New PE approved by CLHO in February 2018 with a focus on assurance of access to clinical services. LPHAs continuing to provide clinical services through a separate contract (Medical Services Agreement/MSA) and fee-for-service claims payment. New CLHO-approved PE, including new funding formula, to go into effect July 1, 2018.

Title X Grant – Context:

RH Program applied for three year grant in 2017, with a July 1<sup>st</sup> start date. In July, Office of Population Affairs/OPA (federal Title X office) notified all grantees that grants would end June 2018 regardless of original grant period (i.e. one-year grant award for Oregon).

Release of new Title X funding opportunity delayed for months at federal level and just released February 23<sup>rd</sup>. Given late release, OPA designated September 1, 2018 tentative start date. Grantees given the opportunity to request an extension of current grant through August 2018 (i.e. two-month extension for Oregon).

Challenge:

The use of Title X funds to support PE's new focus (assurance of access to clinical services) and the change in payment mechanism for clinical services to fee-for-service reimbursement is contingent upon approval by OPA. With the delay in the funding opportunity announcement, Oregon's application describing the new model will not be reviewed and approved for a July 1<sup>st</sup> start. Instead, Oregon will be allowed to continue its current approved-work plan for the two-month extension period (July and August).

Plan:

Now: Seek approval from OPA to continue scope of current Title X grant through existing PE 41 (support for provision of clinical services). Use current funding formula to allocate funds for two-months to current sub-recipients (amendment process). RH Program will hold back a small amount of funds to cover Title X fee-for-service claims (e.g. those individuals and services not covered by HB 3391 or CCare).

September 1<sup>st</sup> (tentative): Retire current PE 41 and begin new CLHO-approved PE for all LPHAs. New funding formula to be utilized starting with September payments. New funding and local program plan will cover remaining ten months of the year (September 2018 through June 2019).

NET RESULT:

Maintain status quo with PE 41 until September 1<sup>st</sup>. This is in addition to any FFS reimbursement for clinical services that LPHAs may receive (starting April 1 for agencies with executed MSAs). More overall funds allocated through PE process for FY19 than originally anticipated. LPHAs will have two separate allocations: one for July and August and then a different one for September through June.