



REQUEST FOR FLEX FUNDS

Today's Date: _____

Requestor's Name: _____

Amount Requested: _____

Flex Fund Category:

- Training or Education for health improvement/management
- Self-help or support groups
- Care coordination, navigation or case management activities
- Home/living environment items or improvements
- Transportation (Not otherwise covered by OHP)
- Programs to improve general community health
- Housing supports
- Assistance with food or social resources
- Other

What will the funds cover?

How these funds impact the client:

What other resources have you researched or attempted to use?

Do you anticipate this as a one-time fund or recurring? It is a yearly fee.

- One Time Recurring

Has the client received flex funds before?

- Yes No

Employee Signature: _____ Date: _____

Manager Signature: _____ Date: _____

Patient Name: _____

Date of Birth: _____

Medicaid ID Number: _____

RN Assigned to Case: _____

Date Case Opened: _____

Who Referred Client: _____

Contact information of person referring: _____

Patient Care Plan/ Case Notes must be attached for request to be considered.

Please fax completed forms to 503-376-7424

For Official Use Only:

- Request for Funds Accepted Request for Funds Denied



Yamhill Community Care Organization

POLICY:

Yamhill Community Care Organization (YCCO) delegates all or part of this function or process. Through the oversight, YCCO will insure compliance with all applicable federal, state, contractual rules and regulations and requirements.

The goal of Health-Related Services (HRS) is to offer a cost-effective alternative that promote the efficient use of resources and addresses members' social determinants to improve health outcomes, alleviate health disparities and improve overall community well-being. Health-Related Services are non-covered/not encounterable services under the Oregon Health Plan (OHP) and provided as an adjunct to traditional billing or encounter codes. HRS include Flexible Services and Community Benefit Initiatives. To be considered an HRS, the service must meet the requirements as defined in 45 CFR 158.150 or 45 CFR 158.151.

HRS include activities that improve health care quality and should be primarily designed to meet at least one of the following criteria:

- Intended to improve health outcomes compared to a baseline and reduce health disparities of OHP members.
- Prevent avoidable hospital readmissions through a comprehensive program for hospital discharge.
- Improve patient safety, reduce medical errors and lower infection and mortality rates.
- Implement, promote and increase wellness and health activities.
- Support expenditures related to health information technology and meaningful use requirements necessary to accomplish the activities laid out above.

HRS are funded from the Yamhill Community Care Organization (YCCO) Global Budget. There are no additional funds allocated to HRS by the Oregon Health Authority (OHA). Since they are included in the basic service capitated OHP funds, they are subject to all applicable rules and regulations for Medicaid expenditures. OHP funded HRS may only be provided to YCCO members (not to other clinic patients) except where it is a group educational or treatment and a majority of the group participants are YCCO members.

HRS have been defined as in-lieu of traditional benefits, non-State Plan services intended to improve care delivery, enrollee health and lower costs. HRS are a key lever for health system transformation; they are defined as:

- a. Not covered benefits under Oregon's State Plan (OHP)
- b. Lacking billing or encounter codes
- c. Consistent with the member's treatment plan as developed by the member, the member's primary care team, and documented in the member's medical record
- d. Likely to be cost-effective alternatives to covered benefits and likely to generate savings

Likely to improve health outcomes, prevent or delay health deterioration.

For Official Use Only:

Request for Funds Accepted

Request for Funds Denied