

Health-Related Services Bulk Purchase Funding Request Instructions

Health-Related Services Bulk Policy

Bulk Services: These services are provided instead of, or in addition to, CCO covered Oregon Health Plan benefits and follow the same eligibility requirements as other flexible services. Bulk purchase items are available to help clinics and providers ensure a constant supply of commonly needed items. The current list of approved bulk purchase items is available on the [CareOregon](#), [Columbia Pacific CCO](#), and [Jackson Care Connect](#) Provider Support pages.

Process for Request & Fulfillment of Bulk Purchase Items

There are two types of bulk purchase requests:

- **Purchase type 1 - Supply order:** Requester submits request for CareOregon to purchase items for direct delivery to requester. TEMPORARILY UNAVAILABLE
- **Purchase type 2 - Reimbursement:** Requester purchases approved bulk items themselves and requests reimbursement by CareOregon. See next page for reimbursement details.

Purchase type 1 - Supply order: TEMPORARILY UNAVAILABLE

1. Requester submits HRSF Bulk Purchase Request Form by the 15th of the month prior to when items are needed.
 - Requests may take up to 14 business days for review and approval.
 - Shipment and delivery of requested items is dependent on supply chains.
 - Items are purchased by CareOregon through Project Access NOW (PANOW) and delivered to the address requester identifies. In some cases, items may be picked up from PANOW. Please ask if that is an option for your order, otherwise items will be delivered to the address you specify.
 - This should be a clinic or agency address, not individual member addresses.
2. HRSF Bulk Purchase Tracker should be submitted by the 15th of each month to CareOregon. The tracker should reflect any items that have been distributed since the last month. If none have, please let us know.
 - New orders for items not previously requested can be submitted at any time.
 - We will not accept orders for an item you have in stock until submitted tracking indicates an inventory of 5 or fewer of that item.
 - CareOregon will send a “Supply Request ID” in the confirmation that items have been ordered. Please include this on the tracking form when you submit it.
 - The dollar amount column is not required for this purchase type.

Purchase type 2 - Reimbursement requirements:

1. Requester purchases approved bulk items listed on the bulk form and submits the following documentation by the 15th of the month following the transaction:
 - HRSF Bulk Purchase Request Form
 - HRSF Bulk Purchase Tracker, to indicate which members received items purchased
 - Itemized invoice and receipt
2. CareOregon reviews documentation and reimburses requester for all eligible members and items.
 - Reimbursement will not be approved for any items distributed to ineligible members.
 - Reimbursement for new orders will not be approved without complete documentation from previous orders.
 - Supply Request ID field on tracker is not required for this purchase type.
3. Each reimbursement request must wholly reconcile the relevant invoices and receipts. The dollar values for the invoice, the member tracker, and the sum of the submitted receipts must all be in alignment, for the reimbursement to be funded.

Medical Record Documentation

Healthcare providers and clinical teams are no longer required to document health-related service requests or bulk purchase items supplied in the member's medical record, per OAR 410-141-3845. However, providers must ensure that any request or item distributed to a member aligns with the member's treatment plan.

Flex funds are not intended as long-term monthly solutions to member's needs. Given this, providers are asked to attest that the member's care plan includes working towards self-sufficiency. Examples of this might include applying for a lifeline phone or transitioning over to using the NEMT benefit.

Incomplete Requests

Any incomplete request will not be reviewed for fulfillment or reimbursement. Some examples of incomplete forms are, but not limited to:

- Request form does not contain complete requester information
- Request form is missing any required vendor information (if applicable)
- Required values/fields in form are left blank
- Request form is not signed by a supervisor or manager
- HRSF Bulk Purchase Tracking Form was not submitted, or was submitted without complete information

Handwritten form submissions must be legible and clear.

Fax completed forms to: **ATTN: HRS Flex at 503-416-4728**

Or by mail to: **ATTN: HRSF Clinical Operations Team
CareOregon
315 SW Fifth Ave
Portland, OR 97204**

Health Related
Services Voicemail: **503-488-2808**