

From: NASHP News <Newsletter@nashp.org>  
To: Kester, Tonykester@aging.sc.gov  
Date: 10/13/2015 1:37:33 PM  
Subject: NASHP News: New Brief on Defining Medical Necessity, Lowering Costs in Oregon and Conference App

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## Newsletter

October 13, 2015

### [New Brief: State Strategies for Defining Medical Necessity for Children and Youth with Special Healthcare Needs](#)

This [brief](#) takes a fresh look at the current issues affecting the state EPSDT and CHIP officials who implement medical necessity policy, and looks ahead to new and emerging issues that may affect state EPSDT policy in years to come. It captures key themes that emerged during a May 2015 teleconference of state EPSDT coordinators and CHIP directors convened by NASHP with the support of the U.S. Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA)'s Alliance for Innovation on Maternal and Child Health (AIM). See the [full brief here](#).

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### [Blog: To Improve Health and Lower Costs, Oregon Gets Flexible](#)

Oregon recognizes that the [essential ingredients](#) for health are often not found in a hospital or provider's office. Through its [1115 demonstration](#), Oregon's [Coordinated Care Organizations](#) can pay for non-medical services that improve the health of their members while lowering costs—often by

addressing the social determinants of health.

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