MARION COUNTY BOARD OF COMMISSIONERS

Work Session Summary Minutes

Medicare Opioid Use Disorder (OUD) Program Billing Discussion

September 30, 2025. 1:30 PM
Courthouse Square, 555 Court St. NE, Salem
5th Floor, Suite 5232, Commissioners Board Room

ATTENDANCE:
Commissioners: Danielle Bethell, Kevin Cameron, and Colm Willis.
Board's Office: Trevor Lane, Matt Lawyer, Heather Inyama, and Toni Whitler.
Legal Counsel: John Pettifer.
Health and Human Services: Ryan Mattews, Rhett Martin, Mai Cao, and Bridget Vazquez

Commissioner Kevin Cameron called the meeting to order at 1:30 p.m.

Discussion:

- Focused on Medicare OUD Program and recent billing issues discovered by the county.
- In 2020, Medicare expanded coverage to include opioid use disorder treatments, including methadone:
    - Prompting county to implement new billing codes based on federal guidance.
- Internal audit revealed that two specific billing codes for opioid treatments were being used incorrectly:
    - Resulted in double billing for certain services between January 2020 and April 2025.
- Overbilling amounted to about $593,000 over this period:
    - Compared to $6.5 million in total fee-for-service deposits in 2024 alone.
- Error involved billing both a weekly bundle code (which included medication) and a takeout code (for additional medication) each week.
- Issue was self-identified through internal audits:
    - Promptly self-reported to the Medicaid administrator.
- County has reprocessed claims for 2023, 2024, and 2025, with 2022 claims currently being addressed:
    - Process for correcting older claims differs from recent ones.
- Correct billing codes have been added to the system, staff have been retrained, and internal review processes have been strengthened to prevent future errors.
- Financially, the overbilled funds were accrued and adjusted in the county's fiscal year-end close:
    - Ensure repayment will not require additional resources or impact the general fund.
- County will process repayments upon receiving formal demand letters:

- Ensure equitable treatment compared to other providers who may have made similar errors.

Other:

- Overbilling issue was not unique to the county:
  - Similar mistakes occurred nationwide due to unclear/delayed federal guidance.
- County's approach in identifying and correcting the issue was proactive.
- Monitor how other jurisdictions are treated in terms of repayment.
- Need fairness in federal clawbacks so the county is not treated differently from other providers under similar contracts.
- Overbilled funds are available for repayment and adjustment has already been reflected in the county's financial records.
- Volume of claims processed by the billing team was noted:
  - Such an error could occur over several years.

Next Steps:

- Monitor the repayment process and ensure the county is treated equitably compared to other providers who may have made similar billing mistakes.
- Implement additional internal reviews and double-checking of the billing team's work to prevent similar issues in the future.
- Continue reprocessing the claims for 2022 and complete the process within the next few months.
- Only process repayments upon receipt of formal demand letters from the appropriate authorities.
- Maintain ongoing staff training and updated billing guidance to ensure compliance with federal requirements.

Adjourned – time: 1:51 p.m.
Minutes by: Mary Vityukova
Reviewed by: Gary L. White