



Tribal Consultation Meeting Agenda
11 am, July 6th, 2021
Online Microsoft Teams Meeting

1. Welcome— Dana Miller, Director of Tribal Government Relations
2. Proposed Rule, State Plan, Waiver, and Rate Amendments— Dana Miller,
Director of Tribal Government Relations

Proposed Rule, State Plan, and Waiver Amendments

- **Purchasing Rules Revisions**
 - **Grievance Procedures and Process Rules Revisions**
 - **Chiropractor and Physical Therapy Services for Adults**
 - **Non-Payment of Provider Preventable Conditions**
 - **Adult Expansion ABP Service Delivery System Update**
 - **Adult Dental Services Copays**
 - **Appeals to the Chief Executive Officer (CEO)/Administrative Law Judge (ALJ)**
 - **Ensuring Access to Medicaid Act**
 - **Hospital Presumptive Eligibility for Expansion Adults**
 - **Money Follows the Person (MFP) Program Member Transitions**
 - **Indian Health Service, Tribal and Urban Indian (I/T/U) Shared Savings Program**
3. Other Business and Project Updates- Dana Miller, Director of Tribal Government Relations
 - Expansion Update
 - I/T/U Patient Centered Medical Home
 - Provider Rep Update – Ashley Johnson, Provider Engagement Manager
 4. Adjourn—Next Tribal Consultation Scheduled for 11 AM, September 7th, 2021



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Kevin Corbett | Chief Executive Officer

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Proposed Rule, State Plan, and Waiver Amendments

Purchasing Rules Revisions — The proposed revisions will make Agency-specific rules for purchasing and procurement more comprehensive. Revisions include provisions related to procurement definitions, procurement ethics and prohibited conduct, conflicts of interest, and procurement of goods and service and professional services. **This item requests an expedited fourteen-day (14-day) review and comment period.**

Grievance Procedures and Process Rules Revisions — The proposed revisions will revise existing appeals rules to clarify appeals related to the aged, blind, and disabled populations. The proposed rules will also establish appeals rules related to Agency-level appeals for providers and beneficiaries whose initial grievance and/or appeal occurs with an agency contractor. Additional revisions will clarify contract award protest process based on whether the OMES Director considers the appeal or assigns the appeal to an administrative law judge. **This item requests an expedited fourteen-day (14-day) review and comment period.**

Chiropractor and Physical Therapy Services for Adults — The Oklahoma Health Care Authority is amending federal authorities, including the Alternative Benefit Plan (ABP), and Agency rules to establish coverage and reimbursement for chiropractor services and physical therapy services for the treatment of pain management for SoonerCare adult members. The proposal will define provider participation and credentialing requirements, medical necessity, coverage and service limitation guidelines, and reimbursement methodology. Reimbursement for chiropractic and physical therapy services will follow the Agency's existing rate methodology that is used for physician services which are updated annually, per the current State Plan. **This item requests an expedited thirty-day (30-day) review and comment period.**



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Non-Payment of Provider Preventable Conditions — The Agency seeks to update non-payment policies for provider preventable conditions (PPCs), including health care-acquired conditions (HCACs) and other provider-preventable conditions (OPPCs), for inpatient, outpatient, and long-term care services as required by Section 2702 of the Affordable Care Act of 2010.

Adult Expansion ABP Service Delivery System Update — The Oklahoma Health Care Authority (OHCA) seeks to add the current Primary Care Case Management (PCCM) service delivery system, the Patient Centered Medical Home (PCMH), to the Adult Expansion Alternative Benefit Plan (ABP). As part of the SoonerCare Choice coordinated care delivery system, all new Expansion Adult members will select a PCMH for primary care and care coordination. Additionally, expansion adult members will be eligible to receive Health Management Program (HMP) and Health Access Network (HAN) support based on their health status and coordinated care needs. Benefits will be reimbursed through the State's fee-for-service (FFS) methodology and providers will be eligible to receive a per member per month (PMPM) care coordination payment. Expansion adults will be a mandatorily enrolled population, other than during a period of presumptive eligibility. American Indian/Alaskan Native (AI/AN) members will be a voluntary PCCM enrollment population that may choose not to opt-in to the service delivery system. The Agency intends to submit a State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) on or after July 1, 2021. **This item requests a 14-day expedited tribal consultation.**

Adult Dental Services Copays — The OHCA is seeking authority to establish copay amounts for adult dental services. The State will establish a \$4 copay per visit for dental services for non-exempt individuals. The new copay amount will not apply to exempt individuals nor services as described in 42 CFR 447.56. The Agency intends to submit a SPA to the Centers for Medicare & Medicaid Services (CMS) on or after July 1, 2021. **This item requests a 14-day expedited tribal consultation.**



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Appeals to the Chief Executive Officer (CEO)/Administrative Law Judge (ALJ) — The proposed changes will revise policies regarding appeals to the Agency's CEO to comply with Senate Bill 207 (SB 207). The changes will note that the CEO may only designate an ALJ at another state agency that is established in the State Medicaid Plan and approved by the Centers for Medicare and Medicaid Services (CMS).

Ensuring Access to Medicaid Act - The proposed policy changes will comply with Senate Bill 131 (SB131), otherwise known as the "Ensuring Access to Medicaid Act" by addressing the specific requirements that are outlined throughout the bill. These requirements include, but are not limited to, enrollment and voluntary enrollment into an alternative delivery model, developing specific network adequacy standards, prior authorization requirements, and developing requirements for appeals and hearings. **This item requests a 14-day expedited tribal consultation.**

Hospital Presumptive Eligibility for Expansion Adults – The Agency seeks to update the hospital presumptive eligibility training for participating hospitals to include expansion adults. The change is needed to comply with federal regulation as expansion adults are a mandatory population eligible for hospital presumptive eligibility.

Money Follows the Person (MFP) Program Member Transitions — The proposed revisions will add language that allows the Developmental Disabilities Services Division (DDSD) to transition members, who have been a resident in a private Medicaid Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), into a community setting. The proposed revisions also change the required transition date criteria from at least ninety (90) consecutive days to sixty (60) consecutive days prior to transition date. Additional revisions will remove outdated language to reflect current business practices.



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OKLAHOMA
Health Care Authority

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Indian Health Service, Tribal and Urban Indian (I/T/U) Shared Savings Program — The proposed revisions are to comply with Senate Bill 434, which directs the Oklahoma Health Care Authority (OHCA) to create an I/T/U shared savings program and shared savings revolving fund. The proposed rules outline participation requirements and specifications, distribution of funds from the I/T/U shared savings program to participating I/T/U facilities, and how any remaining derived savings will be handled within the revolving fund. Finally, this change will prohibit I/T/U shared savings revolving funds to be used to replace other general revenues funded by the legislature.

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