

## **MATF Notes**

August 5, 2017

Item	Notes	Recommendations/ Golden Nuggets
Welcome, Consent Agenda	Welcome and participants introductions were done.  Reminder Notes from the last meeting were sent out, be sure to read and provide any feedback from them.	
Rules Update Mental Health and other policy changes and impact on families	2016 Permanent Rules – the Governor did sign all permanent rules on June 13, 2017, and will become effective September 1.  Letters were sent to all our Providers and included a link for them to see the rules. The rules on the website will not be available to see until they are effective September 1.  One rule (APA WF 16-03) directly affecting members that will become effective September 1. Changes our policy and system to mirror federal regulations for cost sharing. The aggregate limit on premiums and cost sharing incurred by all members in the Medicaid household should not exceed five percent of the family's income applied on a monthly basis. This typically affects only adults.  Two Provider letters were sent out:	

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- 1. Provider Letter 2017-12 Requires Prior Authorization for Electroencephalographic (EEG) Monitoring Termninology (CPT) codes: 95950, 95953, and 95956 became effective August 1, 2017.
- 2. Provider Letter 2017-24 Requires Prior Authorization for following molecular pathology CPT codes: 81400, 81401, 81402, 81403, 81404, 81405, 81406, 81407, 81408, 81479, and 81599 which will become effective September 1, 2017.

Update on the 2017 Emergency Rules presented at the last MATF.

17-01 - Policy Revision to Comply with Fairness in Medicaid Supplemental Needs Trust Act, and 17-04 A&B A&B - Money Follows the Person Demonstration for Psychiatric Residential Treatment Facility Wraparound Services were presented to the Medical Advisory Board and the Oklahoma Health Care Authority Board. They have been submitted to the Governor and are currently pending.

Rule changes within work folders 17-05 - A&B Medical Identification Card Policy Revisions and 17-06 - Pharmacy Revisions were presented to the Medical Advisory Committee on Thursday, July 20, 2017 and they are scheduled to be presented to the Oklahoma Health Care Authority Board on Thursday, August 24, 2017.

Rule 17-09 Behavioral Health Case Management Limits is an Oklahoma Department of Mental Health and Substance Abuse Services. Presented to the Medical Advisory Committee on Thursday, July 20, 2017 and scheduled to be presented to the Oklahoma Health Care Authority Board on Thursday, August 23, 2017.

CHIP funding expires at the end of September. Unsure of what may or may not happen on the federal level. What could happen is that they don't take up that funding until December. The states may use the remainder of their allotments to continue their program until Congress acts. Oklahoma's allotment will allow the program to continue until mid-February or early March.

Oklahoma has a combination program operating under a maintenance of effort that continues until September 2019. We may seek more state dollars.

See attachments.

**Golden Nugget:** a compound prescription may be difficult to have filled if it is a Friday afternoon because of prior authorization.

**Recommendation:** On the website list current pharmacies working with Soonercare that can provide compound prescriptions.

## **Golden Nugget:**

There is a state board of pharmacy rule that any approved FDA product that can be received from a manufacturer cannot be compounded and sold by a pharmacy.

## **Recommendation:**

A MATF meeting to provide information on behavioral health

		(answer questions, give strategies to intervene, mobile crisis team). Steering committee to followup.
MATF Outcomes Log Review and Determine Agenda items for FY 2018?	See notes below.	
Lunch and Log Review /Set Agenda Items, September, April and June Dates	See notes below.  Next Meetings: September 16: Telling Your Story Training, Quotes and Videos of MATF Members  December 2: Agenda to be determine, possible update from Strategic Planning Meeting	

These notes were added to log. (additional attachment)

**Row 1 – MATF Role** - MATF Policy – current knowledge of Sooner Care; what kind of guidelines should we have for attendance if they are a MAFT member? Steering committee will discuss and draft an overview and bring back to next meeting. Suggestions: If they miss two in a row, member submit explanation for absences and why / if they want to continue on the committee. Once a year members to sign a commitment letter?

**Row 1 – Program Changes -** Members encourage families with PDN to make recommendations to agencies serving kids. Hold on this one until we remember which discussion this was about.

**Row 1 – Communication – SoonerCare** Awareness/Discussion on change of policy regarding lodging/upfront per diem. Member Handbook to include an explanation of per diem; how it's figured and what's included etc.

## Row 1 – Communication – Improve Health – Fulfilled

**Row 1 – Provider/Member Relationship –** SoonerFit – members can submit artwork theme centered. Follow up to see why / logic of why children under kindergarten not included? Maybe could send out through the text-for-kids.

**Row 1 – Member Satisfaction -** Follow-up to be completed on this, a way to recognize an employee who went beyond and above to assist the person calling with a concern or need.

**Row 1 – Shared Responsibility with other HHS agencies –** Follow up with Provider Services to see if they know of practices that may have developed an agreement that is working for them. Bring Medical Agreement for review by MATF to an upcoming meeting.

**Row 2 – MAFT Role –** Majority of new members have not been through an orientation. Maybe having an orientation and training in October/November which would include: Overview of SoonerCare, Telling Your Story, and revisit the commitment agreement.

Row 2 - Program Changes - Tell Your Story in 1 minute. This will go into the training in #1

**Row 2 – Communication – SoonerCare –** Quick Start Handbook (very few printed now) – suggestion # 1 a digital form so it could be printed; suggestion # 2 maybe the same technology as the after-hours care website can be used to develop a Quick Start Handbook website.

Row 2 – Communication – Improve Health – Protocol for filling prescriptions under special circumstances. Ex. Discharged afterhours, went to pharmacy to have prescription filled. This particular prescription was a controlled substance and there was a 48 hour hold rule so the pharmacy could not fill. Calls were made and help given so the member was able to have the prescription filled for their child. However, for those people who do not know someone to call or are in a rural area, how we can assure that the prescription can be filled. Suggestion: if it is a hospital discharge may have the hospital pharmacy fill the prescription. Marlene will follow up.

Row 2 Provider/Member Relationship – MATF Members send e-mail to legislator(s) regarding cigarette tax. Some did MATF Members provide comments or concerns on-line or present information at public hearing.

MATF Members review New Hampshire's website and provide input. A&D Portal

Row 2 Member Satisfaction - Family tell stories at board meetings – Would be good at the Stragetic Forum in October

MATF members who have experience with Managed Care contracts for Care Coordination should contact individuals in other states who are doing and find out how it is working then connect to families who are using. Tabled based on funding. Encourage all members to still research so that when and if this comes back up members will be knowledgeable and able to provide input.

**Row 2 Shared Responsibility** - Raise awareness of the need for PDN, can OHCA help in raising awareness of need via use of their social media or PR contacts? However, we are still working on this and will be meeting with a representation from the Home Health Agencies. Also, OHCA will follow up.

Row 3 Communication - General - Legislation - MATF should review bills and let legislator know - Ongoing

**Row 3 Communication – Improve Health –** Newsletter – recommendation for newsletter for summer - Fulfilled.

Recommendation – how to remove ticks; maybe once a year may have staff person come for a discussion of Hot Topics for the newsletter.

**Row 3 Provider/Member Relationship** – how to print member card ID; there will be videos on MySoonerCare.org Suggestion – maybe a Facebook post regarding the changes coming

**Row 3 Member Satisfaction** – create a video to show how to access messages, will follow-up to see if that is a video in process or can be done in the future. Arrange a meeting with the IT team to express concerns and suggestions that would make it easier for the families to use.

Give in-person and off sight opportunities for members to review publications during the process of development or updating publications, instead of only OHCA staff. At the Health Department, there is a review committee that has to review every document created and then has to be reviewed every 3 years by the committed. This committee is made up of family members, nurses, and other professionals.

Stopped feedback on log.

Next meetings: September 16; December 2. OFN - 20 year celebration is September 9<sup>th</sup>.

Meeting adjourned 1:59