

Member Advisory Task Force

Co-Chairs: SoonerCare Member and Staff Member

MATF Notes

April 14, 2018

Members Present: 8

Steering Committee Present: 12

Item	Notes	Recommendations / Golden Nuggets
Welcome, Consent Agenda, Recognition (Co-Chair)	Welcome and participants' introductions. Please review the notes and if there is a point that is missed please follow-up so that we get the highlights of the notes. This is how we track the progress and the impact of the MATF. There are many people who have filed for legislative offices. While they are new, before the primaries, they are extremely approachable. This is our opportunity to teach them who we are. Invite them to your home or meet you for coffee. They will listen to your story. Don't wait until after they win the primary. While they are running, we should personally invite them to sit and listen to the MATF. What their perception is of people who are on SoonerCare is not a reality around this table. This is our opportunity to expose them to what true SoonerCare members are not that biased perception that they have. Update from OHCA CEO: OHCA is unable to invite those running for office to meetings.	Golden Nugget: Tips: List of those running for office: https://www.ok.gov/elections/support/ok_filing_2018.html Invite those running to your home. Handwrite your invitation to meet with you Include a picture of your family Send this week Separate visits, to speak with them one-on-one Give them a time that works with your time schedule Keep track of who is running

Budget and Legislative Update (Legislative Liaison)

Many of the bills we spoke about last time are dead.

The bill to lower the parent/caretaker poverty level 20% is dead.

Work requirements – HB 2932 and SB 1179 are both going through the process. There was an executive order by the Governor directing OHCA to develop proposals for work requirements and submit them to her and the legislature within the next 6 months. OHCA Policy Department is working to develop a waiver proposal. There are several exceptions that will be outlined in the proposal. They are looking to mirror the work requirements to SNAP. Exceptions being looked at are: parents with children of disabilities, those who are pregnant or disabled, those who may be in treatment for drug and alcohol addiction, and possibly others.

Adults who could be affected by the work requirement are adults who are on SoonerCare because their child is on SoonerCare. Concern was expressed for families with children having behavioral health or mental health issues being affected by this work requirement. Also concern for families who have child support and kids who have 1 parent that has died and receive SSD. They may not qualify as well.

The House Bill is expected to be heard on the Senate floor Monday afternoon.

HOPE Act – HB 1270, voted and signed by governor. Requires OHCA to make eligibility data checks via private vendors. Work groups are being developed to look at how to implement this. Report due by May, 2019.

April 26 is the deadline for all bills except revenue and appropriation bills must be heard on the floor in the opposition chambers.

The budget is looking a little brighter. There is still about \$8.9 million short this year of having a balanced budget. OHCA will delay ½ of a claims payment into next fiscal year. April numbers will reveal if it can be brought back into this fiscal year. In October the federal match will increase, helping budget constraints.

RECOMMENDATION: Policy needed for families of children on IEP's with primary diagnosis of emotional disturbance. Concern that parents will not qualify and it is very difficult to work as schools send students home often or force home/online schooling.

Golden Nugget:

Income guidelines are on the OHCA website under "How to apply".

	The remaining part of session in April will be heavily focused on appropriations and budget numbers for next year. The legislature is hoping to have agencies remain flat and to finish early.
donita for en	Prior Authorizations are needed for root canal, crown, partial, orthodor

Orthod Childre (Dental Dept.)

OHCA staff include: 2 dental consultants who are licensed in the state of Oklahoma: 1 orthodontist also licensed in the Oklahoma: 3 dental analysts; 1 manager; and 1 administrative assistant.

Authorizations are screened by the office assistant, reviewing for proper documentation. If not, she electronically requests necessary information from provider's office. Once complete, it is forwarded to the analysts. If it is okay, it is forwarded to the dentists. The dentists or the orthodontist compare policy according to the request. It is not uncommon that individuals who appear to need braces from an aesthetic perspective, do not meet guidance.

If considered medically necessary, the dentist's office is notified and the patient receives a notification letter which is sent to the address on file. If it is denied the dentist's office is notified and the patient receives a denial letter. If the family does not understand the denial, the first step is to call the dentist or the orthodontist. If they cannot explain it to you, call OHCA. When approved, the patient must schedule the dental appointment. There will be no out of pocket cost to the patient, unless you ask for something that is not covered. Example: teeth whitening, it is cosmetic and is not covered.

In order to qualify for orthodontia, the member must be cavity free for 1 year prior to the visit and have good oral health. Good oral health means that they do not need a deep clean, can brush their teeth well, and there are no cavities. Good oral health also includes not having a lot of plaque and the child is able to brush and floss their teeth well. The only exception is if a child has a cleft palate.

RECOMMENDATION For the

Newsletter: Understanding the Referral to an Orthodontist.

Golden Nugget:

A child must be cavity free for one year before considered a medical necessity. Examples of those who may qualify: Cleft Palate, (exception to cavity free policy), cross bit, overbite. Child must have good oral health, low plaque, etc.

RECOMMENDATION:

Language in the policy under (a) (3) member has demonstrated competency in maintaining an appropriate level of oral hygiene, be restated member or caregiver has demonstrated competency in maintaining an appropriate level of oral hygiene.

OHCA established this policy to assure that the patient can maintain good oral health while they have braces.

If your child does qualify for an orthodontist consultation, they receive a referral and the appointment is set. At the appointment, the orthodontist will have the score sheet OHCA provides to them. If they tell you that you don't meet the guidelines for SoonerCare and you don't agree with them and you say I really would like you to send it in. They will. Policy does not allow orthodontists to take x-rays and photos, etc. if there is low likelihood of qualifying for SoonerCare. Qualifying is based on the clinical findings. If you are denied you can appeal. There are directions on the denial letter on how to do it. It will go through the legal division and is based on policy.

A list of dentists and orthodontists is published on line and is alphabetized by county.

See Attachment: OHCA Policies and Rules

Upcoming Rules to be Reviewed: Policy Dept.

What we are looking at today is our SIF Summary (Single Intake Form). This form is completed when the Governor has a request, or if we need to work on a policy or an idea from medical or provider services or provider contracts. It describes why we need to look at the issue, system, change, benefit change, program change or compliance issue, etc. A team of staff review the form and decides if it is a good idea. The project management team is assigned. They will meet with interested parties who want to have input on the SIF. A blue print is developed and sent to the executive staff, once they give the green light we begin working on the policy.

The MATF can give your opinions today and Ty or Sasha will take it back to the team.

OHCA has emergency (need to change right away due to compliance with federal law, budget savings or something detrimental to members)

RECOMMENDATION: A list of area dentists provided to students when seen at school for follow up care.

and a permanent policies. OHCA writes an emergency justification for the Governor's office which allows for increased process speed. Each emergency policy will be taken through the permanent round to make it a permanent rule later.

See Attachment (This lists of each SIF and description) SIF 233 – Out of State Process Development –

May make part of it as Emergency

The agency is exploring ways to improve out of state services and other issues including: members receiving services; contractor requirements. There are multiple items being reviewed.

<u>SIF 96 – School-based Dental Prevention Programs</u> – The agency is exploring establishing guidelines and limits for dental services provided in the school-based on setting and/or establishing a program policy to guide the delivery of school-based services.

<u>SIF 241 – Institutional Providers</u> – ACA Screening Fee – Emergency The agency will define in policy what an "institutional provider" is based on federal regulations. Once defined, institutional providers will be responsible for application fees (based on federal requirements) at the time of their new and revalidation (renewal) enrollment-policy and the State Plan will be updated accordingly. There is a list of the provider types subject to this fee listed in the attachment. Will not affect members.

<u>SIF 254 – Therapy Assistants</u> – The agency will review policy, and look at all therapy assistants, what is federally required, levels they can do, certification, qualifications that they need. Example: speech language assistant provide services to member, but we do not have a contract, do we pay them the same.

<u>SIF 212 – Adult Outpatient Lab/Radiology Services Limitations</u> – The agency is exploring placing limitations on outpatient laboratory services, outpatient radiology and "machine testing" for adults (similar to Arkansas Medicaid Policy). This would restrict a monetary limit of \$500 for

RECOMMENDATION: Use true outpatient labs versus those tied to hospitals for cost savings.

RECOMMENDATION:

This should be addressed as an emergency.

outpatient services for adults; once this cap is met, any further services would require review or prior authorization for payment.

SIF 211 – Laboratory Services Policy Update – The agency is exploring updating our laboratory to include some of the wording that is found in the urine drug screening and testing policy. Medically indicated and order by physician or physician assistant.

This SIF 211 – goes with SIF 212 and will probably be one SIF eventually.

<u>SIF 248 Work Requirements for Medicaid Members</u> – Looking at to make sure the rules are good.

SIF 190 - Chapter 35 Language Update

Update policy for OHCA's Breast and Cervical Cancer to change the word from women to individual.

<u>SIF 230 – Applied Behavioral Analysis (ABA) request process via EPSDT</u> The agency will explore ways to track, determine medical necessity and payment for when ABA request is received. This service is currently not a compensable service.

<u>SIF 250 – Individual Treatment by Physician Timeline Change</u>
Proposed a policy change which will require that individual treatment by a physician in an Acute II and psychiatric residential treatment facility (PRTF) setting is performed within 60 hours of admission (currently is 24).

SIF 236 Insure Oklahoma Special Terms and Condition (STC) Changes See attachment for details of this SIF. It is currently going through the process.

SIFs can be submitted every week.

Over the next couple of weeks, if you have an additional thought about what has been discussed by Ms. Teel please send to Joni and she will forward on to her that can be added to their discussion.

RECOMMENDATION: Make SIF 190 an emergency rule.

RECOMMENDATION: ABA should be considered for sensory issues with ID in addition to those with Autism.

Topical Discussion:

Virtual visits Provider Services

Tele-a-Health is a covered service for SoonerCare members based on the type of service you need and the provider providing you the service. It has to be for a service where you see the person you are talking to in order to be compensated, not a phone call. In 2017 OHCA paid out \$2 million. There were 36,000 providers that touched 18,000 members. The largest users are behavioral health. Tribal partners are 2nd largest users.

Policy says to us that as a payer it doesn't matter to us whether you are in a physician office remotely or your home being seen. The provider that you are discussing your medical services with is responsible to assure the device they use is HIPPA compliant which means it is secure and has to be the most appropriate device for the service that you need. You both have to agree that it is the safest, most quality way for you to be seen via a device. Behavioral health is our largest user because of lack of physiatry across the state. Tribal partners are our second highest user.

There is no real way to verify services were actually rendered over the phone. From a medical perspective you don't get the same interaction over the phone.

The member does not have to be HIPPA compliant the provider has to be.

Challenge for providers to do virtual visits is paying for equipment.

Speech/Language Pathology is available in schools via Tel-a-Health.

Pharmaceuticals in unique situations Dental Dept.

Health Care Authority administers the pharmacy program.

Process 6 million prescriptions a year.

Contract with OUHSC to do the help desk, the drug utilization program.

RECOMMENDATION:

Newsletter topic regarding IPad and Behavioral health. A lower level provider takes the IPad to a home and they set it up to connect with a psychiatrist. SoonerStart was looking at this several years ago. This would be a good for speech/language pathology and maybe other areas.

RECOMMENDATION:

Make available for well checkups during flu season, especially for those with special health needs.

Golden Nugget:

If medication is stolen, a police report must be prepared. Replacement will go toward the monthly prescription allotment.

	See Attachment OHCA Pharmacy FAQs The pharmacy does have text capability, they should send out information that would be helpful to the members. Example: Hours of operation, there is a help desk available and the phone number, etc. Pharmacy Helpline: 800-522-0114 option 4	13 are available for those on the Advantage or DD Waiver Programs. The HELP Desk will assist with staggering prescriptions. Diabetic supplies do not count toward limits. Golden Nugget:
	Monday-Friday 8am-7pm, Saturday 9am to 5pm, Sunday 11am to 5pm. Email: pharmacy@okhca.org	No compounding fees charged to patients via SoonerCare.
	There have been changes to the over the counter medications that are available via SoonerCare. Check the web site for more information or email: nancy.nesser@okhca.org	RECOMMENDATION: Override for 1 year for special needs such as liquid for young adult/adolescent child with special health care needs/disabilities.
Lunch and Follow- up discussion: Co-Chair • Joining Forces	Joining Forces – in the afternoon the different agencies had a breakout session. The OHCA session included a number who are not MATF members. Ty and Becky were there, and when Ty opened the web page she discovered it was a challenge to navigate.	RECOMMENDATION: Web page: when add something new, a note on the home page that will tell you. "New" "Check It Out" would be helpful.
Follow-up	Home page – more options under individuals. There is a list of forms and newsletter sign up and more topics (listed alphabetically in reverse). Conversation included that appeal form name does not fit so is difficult to find. Outcome from JF: moved form to individual drop down menu.	,
	Discussion included how to get information out, similar to MATF discussions. What's covered, not covered, services that are available. It was a good opportunity to hear from the community.	
 Has anyone experienced: Co-pay is 	No one has. The division has done a good job getting the information out to providers.	
requested by provider in error	There were 3 who had been asked for their card for services - Mental Health Provider, MRI, and eye glass provider.	

~SoonerCare Card required for visit ~TEFRA renewal and application concerns	The providers can look it up and print it out if they need it. The in-house representative is retiring, and they do not know who will be doing TEFRA. They are looking at the process and coordination. Follow up with prior authorization. When a child is on a transplant list the preauthorization is good for 1 year. If they have not received the transplant and the preauthorization expires, they are kicked off the wait list for an organ, and have to wait up to a month before they can get back on. Would it be possible to have the preauthorization process begin 2 months or so before it would expire in order to assure that the child would still be able to receive the transplant if it became available? Need follow-up from Population Care Management.	RECOMMENDATION: TEFRA should be an online process, as well as all D cases. Documentation could be uploaded and a checklist that shows what has been provided and what the applicant is missing should be included. They should be able to stop and go back later to complete. RECOMMENDATION: Lori should come to June MATF Meeting to update changes with new staff, process. RECOMMENDATION: Begin to prepare preauthorization for transplant
		at least two to three months prior to end of year so it does not lapse. This will ensure better care for members and less stress for family.
Wrap-Up	Possible Agenda Item: Velvet Brown (Sickle Cell Contract) Overview of barriers/challenges for access to care of SC, Beth Van Horn on Strategic Plan update, TEFRA renewal and application process concerns, may need additional SoonerCare Members to attend for discussion.	Toda di dad tar tarriny.
	Future MATF Meetings: June 16; August 4 (may have to adjust); October 6; December 1. Board of Directors: May 10 1-3 pm; August 9 1-3 pm; Sept. 13 1-3 pm; Oct. 11 1-3 pm; Nov. 8 1-3 pm; Dec. 13 1-3 pm Meeting adjourned 1:18 pm	