

Strategy Conditions that favor success	Objective What does success look like?	Activities Who will contribute what?	Status
	la. Create a toolkit for ITU's (including a document to tell ITUs how they can benefit from participating, create a one pager explaining the program, create a 'wrap around education' - feedback from OHCA as to what is working and what is not working, sharing success with the tribes not participating).	OHCA - Will create the listed materials and add to a toolkit to share with ITU's. Tribal PartnersWill share information with staff and provider network.	
I. ITU's are aware and fully comprehend the program to the point of implementation.	1b. Increase from 3 to 5 the number of participating ITUs in the Shared Savings Program from July 1, 2023 to June 30, 2024.	OHCA - Will recruit 2 more ITUs to the program by increasing our outreach & meetings with the goal to contact all ITUs with the calendar year. Tribal PartnersBe willing to learn more and meet with OHCA.	
	1c. Increase from 0 to 2 trainings on Shared Savings Program & offer an overall walkthrough training.	OHCA - Will offer training frequently to educate tribes and leaders on FMAP, post dates in toolkit. Tribal Partners Will reach out to OHCA for specific training topics and to ensure all team members are included.	Offered an overall walkthrough training in provider training on 3/23/2023.
	1d. Create from 0 to 1 a system for mapping progress to share with ITUs.		





	2a. Identify FMAP designee.	OHCA - Technical support housed with OHCA or	
		SPTHB.	
		Tribal Partners Will determine one main point of	
2 Creating ways to increase		contact for FMAP.	
capacity for CCA's.	2b. Share providers that are already participating in the	OHCA - Recognizing tribes with agreements in place,	
	program.	asking them to share with tribes beginning the	
		process.	
		Tribal Partners Will communicate agreement	
		partners with oncoming tribes.	



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	1a. TGR will establish working with our MCO's tribal liaisons on how to educate ITU's and Al/AN's who opt in	OHCA - TGR will work with our MCO's potential tribal liaisons on how to educate ITU's and Al/AN's who opt in. Tribal Partners Will disseminate communication tool to staff and provider network and will communicate to OHCA any issues due to MCO transition.	
potential MCO's tribal iaison's to ensure smooth transitions for all AI/AN's Ic. TGR will establish a workgr with an appointed representa	1b. OHCA will educate the ITU's on the overall process as it unfolds.	OHCA - TGR will work with our MCO's potential tribal liaisons on how to educate ITU's and Al/AN's who opt in. Tribal Partners Will disseminate communication tool to staff and provider network and will communicate to OHCA any issues due to MCO transition.	
	Ic. TGR will establish a workgroup this fall (October) with an appointed representative from each tribal partner to discuss key issues and insights that may arise during implementation.	OHCA - TGR will establish a workgroup in fall. Tribal Partners Will select a key representative and inform OHCA of selected representative with contact info.	



3. Action Item:Preventive HealthReimburse I/T/Us preventive health services at the OMB rate			
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partners to locate and	service that is currently FFS to the OMB rate between now and FY 2024.	OHCA - Will research what services can be moved to the OMB rate and under what authority. Tribal Partners Will inform OHCA on what services they would most liked move to the OMB rate and provide examples from other states.	



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working towards improving healthcare in tribal	OHCA to cover specific provider types. Examples: The Role of Nationally Certified Personal Trainer and/or Certified Life Coaches in a Health Center and Coverage for Pharmacist Education	OHCA - Will continue to work with Tribal partners to advocate provider type coverage. Tribal PartnersWill inform OHCA on what provider types they would like to see covered by OHCA/Medicaid.	



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1a di ht 1. Traditional Healing services that are based in culture and cures can provide much needed and the enhanced recovery for ar	1a. Meet with Oklahoma tribal health leadership and/or directors of existing programs that use "traditional healing practices" that could possibly be used under the medical and/or behavioral therapy (PT/ST/OT) umbrella.	OHCA - Will set up at least 3 meetings with ITU's to document current traditional healing practices that might be considered as therapy including PRSS. Tribal PartnersBe willing to look at current programs already in place that have the potential of covered services.	
	1b. Develop a working document of what other states are currently doing to support traditional tribal healing programs.	OHCA - Will conduct research from at least 3 states and chart the types of traditional healing programs covered and share with OK tribal partners. Tribal Partners Be willing to review OHCA results as it becomes available and review to see match ups, additions, courses of action (if any) for tribes to consider with the potential of covered services.	
2. IHS seeks to utilize Community Health Aide Program (CHAP) to expand increased health services for Al/AN's in the lower 48 states with Oklahoma showing a significant interest in participating.	2a. Research and follow similar legislation in OK and other states focusing on areas of nurse practitioner and physicians assistants.	OHCA - Will conduct research from at least 3 states and	
	2b. Continue to participate in the CHAP workgroup meetings with tribal partners.	OHCA - Will continue to lead the monthly CHAP workgroup meeting, provide minutes, research, and respond to inquiries that come out of meeting. Tribal PartnersBe willing to provide examples from other states and provide a point of contact.	lst Wed of every month @ 11am



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I. OHCA would like to partner with tribal organizations to see how to best address elder care in tribal communities.	1. Increase tribal participation in the Pathways to Community Living program from 4 to 6.	 OHCA - Will continue to provide outreach and education to Tribal organizations about OHCA's long- term care and support programs. Tribal Partners Will share best practices, and current elder care challenges in their community. Partners will have a better understanding of tribal long-term care programs. 	