Lock-In Program Promotes Appropriate Use of Resources

OHCA’s Pharmacy Lock-In program for SoonerCare members encourages appropriate use of health care resources.

Designed for members who have been associated with misuse of resources or potentially fraudulent behavior, the lock-in program provides a mechanism to detect misuse of narcotic and other medications and a procedure to “lock in” the member to one pharmacy, thereby limiting the opportunity for inappropriate behavior within the SoonerCare system.

Recently, an analysis of outcomes data for members enrolled in the program was conducted. The research studied the association of member enrollment in the lock-in program with their use of narcotics.

Help to Improve Use of Developmental Screening Available

Primary care providers (PCPs) who serve children have long recognized the value of periodic child health checkups, also known as EPSDT or well-child exams. The latest edition of Bright Futures, the American Academy of Pediatrics (AAP) publication that supplies guidelines for health supervision of infants, children and adolescents, offers recommendations regarding surveillance and screening for developmental concerns.

It has been recommended that pediatric primary care providers use an evidenced-based formal screening tool to screen infants and toddlers at 9, 18 and 24 or 30 months for developmental concerns and screen for autism spectrum disorders at 18 months. Inquiring about and quick observation of general behaviors and age-appropriate developmental milestones are considered part of each child health exam.

The AAP has reviewed the formal screening tools that have been used and studied and that meet the standards of being “evidenced-based.” Of these, three that appear
OHCA Will Miss Former Board Chairman Brickner

Dr. Theodore James (T.J.) Brickner Jr., a five-time OHCA board chairman who unselfishly devoted his time and expertise to the people of Oklahoma, died in April 2009.

Brickner was an OHCA board member since its inception in 1993. Appointed by two governors, he retired from the board in 2002 but would have served a third gubernatorial appointment had his health allowed.

Under Brickner’s guidance, the SoonerCare (Oklahoma Medicaid) program successfully contained the per-member cost to 3.3 percent annual growth, half the national average. During his tenure, the number of children in the SoonerCare program doubled, one of the highest rates of growth in the country, and it evolved to support other state initiatives. He also co-chaired the Oklahoma State Medical Association’s Task Force on Health Care Reform.

He received OHCA’s first Defender of Health Care Award, which was named in his honor. The award recognizes some of the best examples of dedication and personal commitment to the low-income, uninsured and underinsured residents of Oklahoma. It celebrates the achievements of an individual in health care or a related field who works tirelessly in the service of other people.

For more than 40 years, Brickner practiced medicine in radiology and radiation oncology. After 11 years of military service, he moved to Tulsa and chaired the Department of Radiation Oncology at Saint Francis Hospital from 1968 until his retirement.

SoonerCare Covers Stop-Smoking Products

SoonerCare coverage is available for most smoking cessation products.

Many SoonerCare members have expressed an interest in smoking cessation, in part due to recent increases in tobacco taxes.

Covered smoking cessation products include:

• Chantix®
• Commit® lozenges
• Most OTC nicotine patches and gum
• Nicotrol® inhaler and nasal spray
• Zyban®

A valid prescription is required for all smoking cessation products, including OTC nicotine replacement products. The first 90 days of therapy per year are covered without prior authorization. An additional 90 days of therapy per year can be authorized if the member enrolls in a smoking cessation program.

Free smoking cessation programs are available to SoonerCare members and all Oklahomans through the Oklahoma Tobacco Health Helpline at 800-QUIT-NOW.
Providers Must Screen for Excluded Individuals and Entities

Providers must screen employees and contractors for both excluded individuals and entities before hiring or contracting and on a periodic basis.

This is a condition of enrollment and ongoing participation in the SoonerCare and Insure Oklahoma programs.

Individuals or entities that have engaged in abuse or fraud are excluded from participation in Medicare, Medicaid and other federal health care programs. Therefore, any provider excluded by the Department of Health and Human Services Office of Inspector General (HHS-OIG) is not permitted to participate in SoonerCare or Insure Oklahoma.

Providers should search [http://www.oig.hhs.gov/fraud/exclusions.asp](http://www.oig.hhs.gov/fraud/exclusions.asp) monthly to capture exclusions and reinstatements of individuals or entities. Providers also should report any exclusion information to Justin Etchieson at 405-522-7494 or Justin.Etchieson@okhca.org.

OHCA is prohibited from making any payments for items or services furnished, ordered or prescribed by an individual or entity while being excluded from participation unless the claim for payment meets an exception listed in 42 CFR Section 1001.1901(c).

Providers found to be in violation of the HHS-OIG exclusions policy are subject to recoupment of inappropriate reimbursement. They also may face civil monetary penalties if they employ or enter into contracts with excluded individuals or entities to provide items or services to SoonerCare or Insure Oklahoma members.

All SoonerCare providers will receive a letter detailing the specifics of this policy.

For questions regarding screening for exclusions, please call Provider Services at 877-823-4529, option 2.

OHCA Receiving Inpatient Notifications

In January 2009, acute care facilities began sending OHCA inpatient admission and discharge information that is important to SoonerCare Choice providers for their members’ care coordination.

Facilities that need to participate should fax the SoonerCare member’s name and SoonerCare ID number, admitting diagnosis, and admit and discharge dates to 405-530-7236.

Facilities can either forward copies of the admission sheet or create a form that contains the required information.

For answers to specific questions, please call Provider Services staff at 877-823-4529.
SoonerScribe Electronic Prescribing Solution
Available for Providers

SoonerScribe electronic prescribing is the Oklahoma Health Care Authority’s Web-based prescribing solution that integrates prescription data into a unified view. Using this solution, prescribers can enhance the safety and efficiency of care by automating the prescribing process, completing transactions in real time and checking for clinical interactions.

SoonerScribe:
• **Is available at no cost** to SoonerCare providers.

• **Encourages cost efficiency.** It manages patient prescription costs by displaying formulary information and a list of alternatives at every step in the prescription-writing process, making it easier for prescribers to identify appropriate options.

• **Promotes increased transparency.** It includes a list of SoonerCare paid medication claims. From these claims, you will see which prescribers and pharmacies your patients are visiting along with details of prior paid prescriptions.

• **Provides interaction alerts,** highlighting medication-medications, medication-food and medication-allergy interactions.

• **Supplies reference information.** This solution presents adult and pediatric dosages, warnings, pharmacology, side effects and pregnancy and lactation safety information.

• **Requires no installation.** SoonerScribe is a Web-based solution. Once role-based login and passwords are created, your practice is ready to use SoonerScribe.

• **Delivers advanced search capabilities.** Search by brand, generic and abbreviated drug names or by medical condition or therapeutic class when ready to prescribe medication. The solution incorporates Multum’s disease treatment maps and displays a list of medications commonly prescribed for each specific condition.

• **Is a SureScripts Certified Solution.** SoonerScribe electronically sends new prescriptions to the patient’s preferred pharmacy, saving the patient time and trouble. If the pharmacy cannot receive prescriptions electronically, prescriptions are automatically sent to the pharmacy via fax.

Unlike Medicare, SoonerCare has not enacted electronic prescribing requirements. Use of SoonerScribe is optional and does not entitle providers to bonus payments, nor does non-utilization cause providers to incur penalties.

For a demonstration of or more information about SoonerScribe, please contact the SoonerScribe team at SoonerScribe@cerner.com or 816-201-7114.
OHCA Automates SoonerCare Membership Processes

OHCA is automating its system to enable Oklahomans who qualify for SoonerCare to enroll online. This follows a comprehensive automation initiative that began with the newborn registry. Now 58 state hospitals use the electronic NB-1 process, and providers have added 15,631 newborns to the system. With the adoption of automation, 86 percent of newborns are added within five days, and 80 percent of mothers receive their first choice for PCP assignments.

“The e-NB-1 accelerates how members and providers work together within that model by creating an almost immediate link between birth and after care,” said Mike Fogarty, OHCA chief executive officer. “Based on the success of the newborn enrollment process, we are extending electronic enrollment to anyone who seeks health coverage in the SoonerCare program.”

In the newborn registry automation, OHCA presented a sample application with proposed functionality and design to several hospitals and medical clinics for feedback, which solicited wording, look and feel, functionality and usability input from the experts who would use the application daily. The experience was so valuable that it became a key element in the development of the online membership application.

“Being able to elicit feedback from users prior to writing and developing the application is invaluable,” said John Calabro, OHCA chief information officer. “But it was also a chance for us to strengthen relationships with our community partners by making them a part of the process. Their assistance is critical in getting citizens to enroll for eligibility online. The user experience team was a strategic way to drive that cooperation while positioning us to providers as responsive and proactive so they will consider contracts with us.”

With 20 percent of Oklahoma’s 3.5 million citizens currently enrolled in SoonerCare, OHCA is positioned strategically to serve the nearly 20 percent who remain uninsured.

“Publicly funded health care is on the national agenda,” Fogarty said. “Our automated systems, particularly eligibility, support that evolution. There is no question that Medicaid is a critical part of the solution for reforming health care delivery and purchasing. And Oklahoma is leading the transition from welfare to health care because of the accessibility and simplicity that we’re delivering to citizens.”

For answers to specific questions, please call the OHCA Call Center staff at 800-522-0114, option 2, option 1.
Insure Oklahoma Customer Service Improves

Insure Tulsa’s campaign to enroll more qualified Tulsa-area residents in Insure Oklahoma (IO) has shown immediate results.

IO staff implemented the campaign after studying ways to improve customer service for callers contacting Insure Oklahoma. As the IO plan has grown, callers, many of them employers, have been frustrated by waits of several minutes to speak with a program representative. Most employers call for information about enrolling in the program, to verify their employee rosters and enrollment, to check on invoicing and other required documentation, for subsidy payments and to ask general questions.

With this information in mind, IO expanded the number of call representatives with a new group dedicated to taking employer calls.

“Insure Oklahoma can help tens of thousands of Oklahoma employers and employees pay for health insurance premiums,” said Mike Fogarty, OHCA’s chief executive officer. “Having health insurance means employees can take advantage of preventive care, which makes them more productive on the job. It’s a win-win for the small business, the employee and the overall economic health of our state.”

Insure Oklahoma pays 60 percent or more of health coverage premiums.

Additional information is available at www.insureoklahoma.org or by calling 888-365-3742.

Accelerated HPV Vaccine Schedule Available for Young Women

SoonerCare offers coverage of HPV vaccine (Gardasil) for females ages 9 to 26. Girls through age 18 can receive the vaccine free through the Vaccines for Children program.

The vaccine helps protect against four types of human papillomavirus (HPV). These viruses can cause cervical cancer and genital warts.

HPV vaccine is administered in three shots over a six-month period.

<table>
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<th>Recommended vaccine administration schedule</th>
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<td>Dose 1</td>
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<td>Dose 3</td>
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For young women who need the vaccine in a shorter period of time, the second dose should be administered four weeks after the first dose, and the third dose 12 weeks after the second.

OHCA Joins Statewide Care Management Oversight Project

In November 2008, OHCA joined several other state agencies to launch the Statewide Care Management Oversight Project.

Partially funded by the TSIG grant for two years, other participants include the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS), Oklahoma Federation of Families (OFF), the University of Oklahoma E-Team, the Office of Juvenile Affairs (OJA) and the Oklahoma Department of Human Services (OKDHS). Each organization is represented on the oversight committee.

Participants in this project are SoonerCare children ages 6-17 who are in parental, OJA or OKDHS custody. MEDai, OHCA’s predictive modeling program, has indicated these members to be at high risk for future hospitalization.

The project will focus on 250 participants, with 125 in the treatment group and 125 in the control group.

The University of Oklahoma’s E-Team will evaluate the project.

For a year, intensive care management will be provided regularly to the treatment group. Services provided for that group will include a review of the specific behaviors and problems of the child and his or her family, including the focus of treatment; an assessment of the child and family’s needs and availability of appropriate services within the community to meet the needs of the child and family; linking the child and family to needed resources; referrals; advocacy; and regular phone contact with the child’s family and providers.

The protocol also includes a referral to systems of care available in the member’s community.

The care management team consists of care managers Renee Long, OHCA; Danielle Fields and Ken Jones, ODMHSAS; and family engagement specialist Suzy Lawrence, OFF. Nichole Burland and Jennifer King, OHCA, are providing training in addition to regular reporting and participation on the project’s oversight committee.

The care management team participates in a weekly staffing with APS Healthcare, which includes inpatient and outpatient reviewers, the APS Healthcare medical director, board-certified psychiatrist Dr. Brent Bell, and APS Healthcare care planners.

The goals of the Statewide Care Management Project include decreasing the time frame between discharge from inpatient hospitalization and accessing initial community-based services, decreasing the number of inpatient hospital days and increasing community-based services for children and adolescents involved in the program.

Care management services are currently being delivered to the families involved, and recruitment of members continues. OHCA, ODMHSAS, OJA and OFF continue to work together to find and engage new study participants.

Should this project show the expected results, it will support efforts to expand this level of behavioral health care management to additional members.

For answers to specific questions, please call Nichole Burland at 405-522-7589 or Jennifer King at 405-522-7575.
Lock-In Program Promotes Appropriate Use of Resources
(continued from page 1)

and maintenance medications, emergency room visits, number of pharmacies and physicians used each month, and expenditures for pharmacy and emergency departments.

The analysis indicates a positive change in the behavior of the members enrolled in the lock-in program, including a decrease in use of narcotic medications, multiple pharmacies and physicians, and emergency department visits. No association between enrollment and the use of maintenance medications for these members surfaced, suggesting that the lock-in program did not affect therapies for chronic conditions.

The results suggest that the program successfully promotes appropriate use of health care resources and reduces narcotic use and SoonerCare costs.

For answers to specific questions, please call Shellie Keast at 405-271-9039, ext. 47347.

Medical Home Model Update

OHCA’s new medical home model is resulting in increased member accessibility and provider efficiency.

A recent OHCA survey identified more than 100 providers with clinic hours before 8 a.m. and after 5 p.m. This affords members the opportunity to receive non-emergency services in a setting outside the emergency room.

An additional survey identified providers who would be available to any SoonerCare member needing care after normal business hours. Members can call the SoonerCare Helpline at 800-987-7767 or Patient Advice Line at 800-530-3002 for assistance in contacting these providers. Providers wishing to participate may contact Melody Anthony at 405-522-7360.

More than 250 locations have an electronic system to document medical care. For these providers, the SC-10 SoonerCare referral form can be added to the electronic system to eliminate filling out a paper form. Since OHCA recognizes electronic signatures, the electronic version of the form is acceptable.

Transitional payments continue to decrease as providers experience increased cash flow with fee-for-service claims submission. The first SoonerExcel payments were made with more than 1,000 providers qualifying.

Methodology for the payment calculations can be found at www.okhca.org under “Patient-Centered Medical Home.”

Thank you, providers, for your support and acceptance of our new SoonerCare Choice medical home model.

For answers to specific questions, contact Provider Services at 877-823-4529.
Help to Improve Use of Developmental Screening Available
(continued from page 1)

relatively easy to use in routine practice for busy offices involve parent/guardian questionnaires that can be completed before the home or waiting room appointment.

Two of these, the Ages and Stages Questionnaire (ASQ) and the Parents’ Evaluation of Developmental Status (PEDS) can be efficiently incorporated as part of child health checkups. From surveys of SoonerCare-contracted physicians, it appears that many practices use the PEDS and/or the ASQ, although most do not.

The third is the Modified Checklist for Autism in Toddlers (M-CHAT), which is most widely suggested for screening for autism spectrum disorders.

To help practices improve their formal developmental screening efforts, OHCA has accomplished the following:

1. In 2007, OHCA began paying for structured developmental screening and any appropriate E&M codes billed for that patient visit for that day. In other words, if a child is seen for a checkup (or even for a sick visit), the parent/guardian completes the parent assessment of the PEDS or ASQ, the physician reviews it and all other requirements are met, SoonerCare will reimburse for an evidenced-based structured developmental screening. (When physicians ask questions regarding behaviors or developmental concerns as part of history or general assessment, it is considered surveillance of development and part of the E&M billing code.)

2. A developmental/behavioral screening fact sheet, developed to help answer additional physician questions, is accessible at www.okhca.org under Child Health (EPSDT) Services.

3. OHCA is pleased to collaborate with the Oklahoma State Department of Health, the Oklahoma Department of Mental Health and Substance Abuse Services and the University of Oklahoma Health Sciences Child Study Center to purchase the PEDS and ASQ for distribution to Oklahoma practices that serve as PCPs for infants and toddlers and are interested in adopting their use. In addition to receiving the screening tools without charge, upon request, a child guidance professional will assist the practice in using the tools effectively and efficiently and in referring “at-risk” infants, toddlers and young children to appropriate resources. For more information on this project, please call 888-803-6391, or 405-271-4477 in the Oklahoma City area, and mention your interest in developmental screening tools.

OHCA’s staff and partners hope that formal screening and referrals will increase early identification of potential delays and result in access to needed early intervention and other potential services. For other questions about developmental screening in SoonerCare, please call the Child Health line at 405-522-7188.

Physician Fee Schedule Update

OHCA will update the physician fee schedule effective July 1, 2009.

The new RBRVS rates will be available at www.okhca.org.

For answers to specific questions or additional information, please call Provider Services staff at 877-823-4529.
The base OHCA Fast Fact reports have now grown to more than 20 periodic statistical bulletins covering enrollment demographics, selected provider types, focused project study groups and demographic categories. OHCA staff has found these reports to be effective and consistent in communicating with the public and oversight entities in addition to serving as valuable internal resources. Since 2008, OHCA has seen a 26 percent increase in traffic to the Fast Fact Web page. To date, hundreds of people have signed up to receive Web alerts, and the Fast Fact public Web page receives more than 30 hits every day.

This information is now easily accessible in both hard copy and at www.okhca.org under Research. For answers to specific questions, please call Connie Steffee at 405-522-7238.

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<td>Provides monthly enrollment statistics for Oklahoma's perinatal dental program, which provides a dental benefit for pregnant and postpartum women 21 or older who are enrolled in SoonerCare. Information on health insurance coverage by age and services provided is included.</td>
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<td>Provider Fast Facts</td>
<td>1</td>
<td>Provides monthly enrollment statistics for providers enrolled in SoonerCare and other programs. Information on the top 15 provider types, availability of primary care provider capacity available/used and providers with NPI is included.</td>
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<td>American Indian Fast Facts</td>
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<td>Provides the number of SoonerCare members with 30 or more ER visits within three previous consecutive quarters who receive targeted outreach in the form of a letter, phone call and face-to-face contact to encourage the timely and appropriate use of primary care services in lieu of ER utilization. The reduction of ER services is listed.</td>
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<td>2</td>
<td>Provides monthly enrollment statistics on SoonerCare members using pharmacy services as well as contracted and active pharmacy providers. Information on enrollment by age group, average reimbursement per member, top 5 medications by claim and reimbursement amount, and other utilization information is provided.</td>
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<td>Focus on Excellence Fast Facts</td>
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<td>Provides quarterly provider participation statistics for Focus on Excellence, OHCA's program for Oklahoma nursing home ratings, which is designed to measure nursing home improvements in quality of life, care and services. Provides information on Focus on Excellence Quarterly Star Rating Activity. (A map is included.)</td>
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<td>Provides monthly enrollment statistics for OHCA's Dental Program, which provides a dental care benefit for some adults age 21 and older and children younger than 21 who are enrolled in SoonerCare (Traditional and Choice) programs. Information on total number of providers providing services, total number of members receiving services, number of procedures performed, average number of dental procedures per member and services provided by category is included.</td>
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<td>Provides an overview of the direction of the agency as defined and prioritized by the agency’s board of directors. The report includes a brief assessment of the environment affecting the mission of the agency and outlines action plans for the coming year(s) as identified at the annual board retreat. It is used by management to ensure that program and operations decisions made throughout the year are within the strategic objectives designated.</td>
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Please submit any questions or comments to Meri McManus in the Oklahoma Health Care Authority’s Public Information Office at (405) 522-7026.

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