Oklahoma Health Care Authority

SoonerCare 1115(a)
Research and Demonstration Waiver
Amendment Request 2019-01

Project Number: 11-W-00048/6

Submitted 2/25/2019

Section 1 Executive Summary

Background

The Oklahoma Health Care Authority (OHCA) is the state's single state Medicaid agency. OHCA operates the SoonerCare Choice and Insure Oklahoma programs under 1115(a) demonstration authorities. On August 31, 2018, the Centers for Medicare and Medicaid Services (CMS) approved OHCA's request to extend Oklahoma's SoonerCare 1115(a) waiver. The current demonstration is approved for the period of August 31, 2018 through December 31, 2023.

On December 7, 2018 OHCA submitted a waiver amendment to CMS that requests incorporation of Community Engagement requirements as a condition of eligibility for applicable covered populations. Consideration of this amendment request is not dependent on a decision on the prior amendment, from the state's perspective.

Health Management Program

Since 2008, one feature of Oklahoma's 1115(a) demonstration waiver has been its Health Management Program (HMP), operated in accordance with the Special Terms and Conditions (STCs) issued by CMS. The HMP was developed in response to a state mandate found at Oklahoma Statute Title 56, Section 1011.6, which seeks to improve the quality of care and reduce cost of care for SoonerCare members with chronic conditions.

OHCA operates a managed care delivery system named SoonerCare Choice, which is a network of primary care case management providers. As the HMP has developed into a robust care coordination model to support SoonerCare Choice, the state has periodically sought amendments to update the language in the STCs to reflect current practices. With this amendment, the state respectfully requests that CMS amend the STCs to reflect an updated definition of the HMP and description of services that will provide for the sustainability of the program throughout the remainder of the currently approved waiver period.

Section 2 Waiver Amendment Description and Goals

The state asks for an amendment to the waiver STCs with an effective date no later than July 1, 2019, as follows:

- The "Health Management Program Defined" section will be revised to provide more options for data analytics beyond the current HMP predictive modeling software. The additional data sources include, but are not limited to the Medicaid Management Information System (MMIS) claims, Health Information Exchange Information, provider referral and other sources.

- In addition, the HMP "Services" section will be revised to focus more broadly on interventions used in HMP and remove limitations that refer to settings, and to

allow for new approaches in practice facilitation to address emerging health trends. These interventions include but are not limited to health coaching, practice facilitation, health navigation, performance improvement projects and assistance with transitions of care.

- The OHCA also proposes to add a sentence to the description regarding the length of time a member may be served in HMP, as follows: Maximum benefit is determined individually for each member served, and considers diagnoses, goals and progress achieved.

Section 3 Waiver List

With this waiver amendment, no changes to the waiver list are requested.

Section 4 Expenditure Authority
With respect to expenditure authority, no changes are requested.

Section 5 Member Impact
These proposed changes to the STCs language will ensure that members continue to receive a full array of appropriate care coordination services that are grounded in interventions that respect the member, address health literacy and are evidence-based. Further, the effectiveness of the HMP will continue to be examined in the waiver Evaluation Design and reporting as noted below.

Section 6 Budget Neutrality
The state proposes a modest increase in funding for HMP. For the six months of 2019 impacted by the waiver amendment July through December, the state proposes an increase of $2 million over current funding. Calendar Year 2020 is projected with an additional $4 million in expenditures, and successive years are increased by three percent for growth and utilization as in the currently approved waiver. See Attachment 1 Budget Neutrality worksheets for additional documentation.

Section 7 Required Elements of Waiver Amendment Process
OHCA has conducted an extensive and transparent public process for this waiver amendment in accordance with federal and state requirements. For OHCA, this begins with Tribal Consultation to invite our tribal partners to give feedback over a 60-day period on the proposed waiver amendment. The in-person Tribal Consultation meeting that also provided for call-in participation from throughout the state was held at OHCA at 11 a.m., Tuesday, September 4. OHCA also fulfilled the requirement for presenting the proposed amendment at two public meetings. These were:

OHCA Medical Advisory Committee
Thursday, September 20, 2018
1:00 p.m.
Oklahoma Health Care Authority Board Room
4345 N. Lincoln Boulevard
Oklahoma City, OK 73105

Child Health Group
Tuesday, October 9, 2018
5:00 p.m.
University of Oklahoma Bird Library, with remote participation by telephone or Web to allow statewide accessibility to the meeting
1105 N. Stonewall Avenue
Oklahoma City, OK 73117

Additionally, on October 1, 2018, a description of the proposed HMP waiver amendment was posted on the OHCA Public Notice section of the agency web page. It provided instructions for those wishing to offer comments regarding the proposed amendment. No questions or public comments have been received in response to either the public notice or the presentations of the proposed changes during the meetings referenced above.

Section 8 CHIP Allotment Worksheet
As CHIP funds are not used for HMP, the worksheet has not been modified.

Section 9 Monitoring and Evaluation of Waiver Amendment
OHCA proposes to continue the currently approved monitoring and evaluation components identified in the STCs. The hypotheses and measures provided in the current evaluation design remain applicable with the following correction to **STC 85. Evaluation of the Health Management Program**

d) *Impact on Health Outcomes:* Use of ~~disease registry functions~~ data analytics by the health coach will improve the quality of care delivered to beneficiaries as measured by changes in performance on the initial set of Health Care Quality Measures for Medicaid-Eligible adults or CHIPRA Core Set of Children's Healthcare Quality Measures.

Section 10 Conclusion
OHCA proposes to continue to carry out its mission with waiver programs, and particularly the newly amended HMP program.

Section 11 Attachments
1. Budget Neutrality Worksheets