



STATE OF OKLAHOMA
OKLAHOMA HEALTH CARE AUTHORITY

Tribal Consultation Meeting Agenda
11 AM, September 4th
Board Room
4345 N. Lincoln Blvd.
Oklahoma City, OK 73105

1. Welcome— Dana Miller, Director of Tribal Government Relations
2. Proposed Rule, State Plan, Waiver, and Rate Amendments—Sandra Puebla, Federal & State Authorities Director

Proposed Rule, State Plan, and Waiver Amendments

- Program for All-Inclusive Care for the Elderly (PACE)
 - Exclusion of Certain Underpayments from Resources
 - Inpatient psychiatric services revisions
 - Provider Rate Increase Update
 - Waiver Revisions for HMP
3. Other Business and Project Updates:
 - Autism in Indian Country - Alex Smith, Creative Director Southern Plains Tribal Health Board
 - Update on Senate Bill 972 – Marlene Asmussen, Director Population Care Management
 - PCP Change update – Ashley Johnson, Provider Representative
 - Sponsors Choice update- Dana Miller, Director of Tribal Government Relations
 - 100% FMAP Update – Dana Miller, Director of Tribal Government Relations
 4. New Business- Dana Miller, Director of Tribal Government Relations
 5. Adjourn—Next Tribal Consultation Scheduled for 11 AM, November 6th , 2018

Proposed Rule, State Plan, and Waiver Amendments

Program for All-Inclusive Care for the Elderly (PACE) — The proposed revisions to the PACE policy will update requirements for the Uniform Comprehensive Assessment Tool. These revisions are being made in order to reflect current business practices.

Exclusion of Certain Underpayments from Resources — The proposed revisions will update eligibility policy on countable income and resources, so that it is consistent with federal law. When determining the resources of an individual for eligibility for the Aged, Blind, and Disabled (ABD) program, the unspent portion of any Social Security retroactive payments are excluded for nine months.

Inpatient psychiatric services revisions — The proposed revisions will establish a prior authorization requirement for inpatient psychiatric services for adults. Revisions will also align the time requirement of the first individual treatment by the physician to the requirement of completion of the psychiatric evaluation. Other revisions will involve limited rewriting aimed at clarifying text.

Provider Rate Increase Update – Revisions are needed to increase the current reimbursement rates for all SoonerCare-contracted provider types by three percent (3%), with the following exemptions: services financed through appropriations to other state agencies, Durable Medical Equipment Prosthetics, Orthotics and Supplies (DMEPOS), non-emergency transportation capitated payments, services provided to Insure Oklahoma (IO) members, payments for drug ingredients/physicians supplied drugs, Indian Health Services/Tribal/Urban Clinics (I/T/U), Federally Qualified Health Centers (FQHCs), and Rural Health Centers (RHCs). Additionally, changes will be made to accommodate an increase to the current rates for SoonerCare-contracted long-term care facilities by four percent (4%). The 4% increase for long-term facilities is calculated only on the portion of the rate funded by state appropriations, resulting in an increase on the total rate of 3.2% for Regular Nursing Facilities and 3.5% for Regular and Acute Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs). All rate increases must comply with state and federal law as well as state cost reimbursement methodologies. This is an update to the item presented at the May 16, 2018 Tribal Consultation where a two percent (2%) rate increase for all providers (less the exemptions aforementioned) and a three percent (3%) rate increase for long-term care facilities was proposed. This item will have an expedited tribal consultation period of 14 days.

Waiver Revisions for HMP— An amendment is needed for the 1115(a) waiver for the 2019-2021 period. OHCA will ask the Centers for Medicare and Medicaid Services to revise the waiver special terms and conditions effective July 1, 2019, to reflect a more current description of the Health Management Program and its services. The HMP was developed in response to a state mandate found at 56 OS 1011.6, and seeks to improve the quality of care and reduce cost of care for SoonerCare members with chronic conditions. The “Health Management Program Defined” section will be updated to provide for more options for data analytics than the current reference to HMP predictive modeling software. 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. 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.

To provide an overview and update to the Tribal Partners on Senate Bill 972, effective 11-01-18 (passed the Senate 04-12-18, House of Representatives 04-09-18, and signed by the Governor), per Senator Frank Simpson, Senator Anastasia Pittman and Representative Pat Ownbey, that directs the Oklahoma Health Care Authority (OHCA) to;

Examine the feasibility of a State Plan Amendment (SPA) to the OK Medicaid program for Diabetes Self-Management Training (DSMT);

Requires the OHCA to submit a report by 12-01-18 to the President Pro Temp, House Speaker and the Governor, to include

- the estimated potential costs to the State,
- clinical findings,
- review of DSMT pilot projects and
- Research of other states' effects of DSMT on persons with diabetes.

Draft a SPA, beginning 07-01-19, subject to funding availability, for DSMT for persons with diabetes.

Provisions of this legislation will apply only if the report demonstrates DSMT to be evidence-based and essential to qualifying participants in the OK Medicaid program.