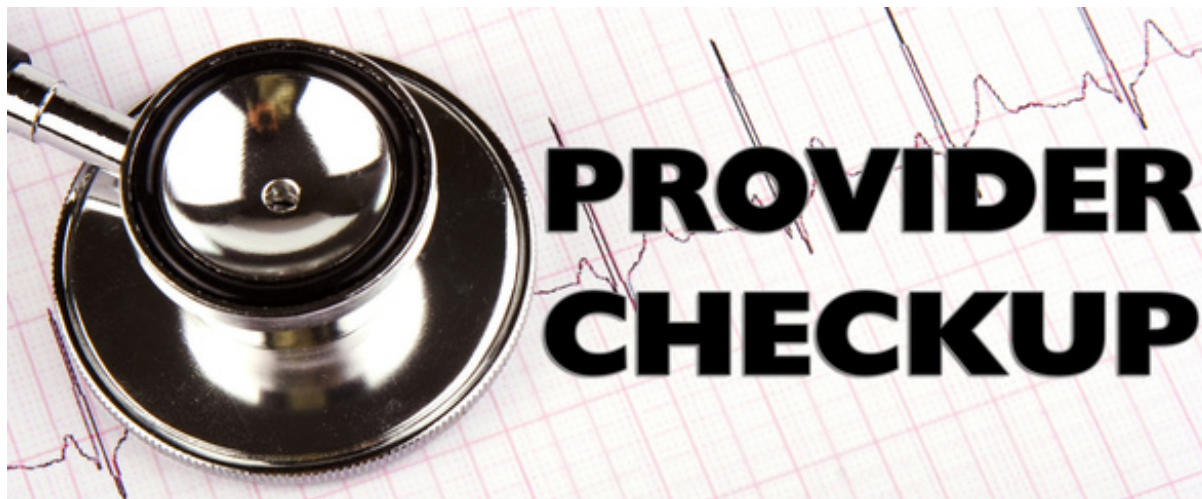


Sick of feeling left out of the loop?

Oklahoma Health Care Authority sent this bulletin at 07/29/2015 02:57 PM CDT

OHCA Provider Checkup, Summer 2015



- [About the budget](#)
- [OHCA Strategic Planning Conference 2015](#)
- [Insure Oklahoma funded through 2016](#)
- [Care Coordination Models for Aged, Blind and Disabled Persons](#)
- [ATTENTION: ALL PROVIDERS](#)
- [Pharmacy](#)
- [Dental](#)
- [Durable Medical Equipment \(DME\)](#)
- [Behavioral Health](#)
- [Diabetes resources](#)
- [New on OKHCA.org](#)
- [OHCA dentist selected to lead national organization](#)

- [OHCA dates to remember](#)
- [Resources for you](#)
- [Pass it on!](#)

About the budget

The Oklahoma Health Care Authority's (OHCA) SFY 2016 appropriation reflects an increase of \$18 million new state dollars in addition to the base budget of \$953,050,514. OHCA is humbled and appreciative of the Governor's and legislative leadership's support of this program as a priority.

Although this budget scenario is favorable to what could have been a more difficult position for our SoonerCare members and providers, we were still faced with difficult decisions. The OHCA had to make targeted budget cuts amounting to \$36.4 million state dollars to offset changes in federal funding and to cover the cost of medical inflation.

State Fiscal Year 2016 Proposed Budget Reductions	Total Annual	State Fiscal Year 2016
Administrative Reductions		
Overall administrative cut (5% of appropriated dollars)		2,900,000
Targeted Program Changes Effective July 1, 2015		
DRG Hospital	35,142,386	12,510,962
Hospital Readmissions (reduce payment for hospital readmission occurring w/in 30 days)	1,571,145	607,719
Mutual savings items:	33,571,241	11,903,243
Reduce Outlier payments (Increase threshold to \$50,000)		
Pay lesser of billed charges or DRG amount		
Transfers pay lesser of transfer fee or DRG base (no outlier payment allowed for transfers)		
Physician	7,376,605	2,615,498
Pay like Medicare for physicians services performed in a facility	7,376,605	2,615,498
Eliminate payment for removal of benign skin lesions for adults	61,489	21,802
Eliminate reimbursement for outpatient clinic / treatment room fee	1,226,019	434,705
High Risk OB Program Changes (new limits on included services)	292,433	103,687
Nursing Homes (Reduce payment for coinsurance and deductible by 25%, currently pay 100%)	6,179,930	2,191,197
Eliminate Reimbursement for Sterile Water and Gloves	464,000	164,519
Eliminate Adult Sleep Studies	1,459,302	517,420
Eliminate Adult continuous positive airway pressure (CPAP)	506,630	179,634
Urine Drug Testing (restrict codes)	11,703,400	4,149,635
Reduce payment for polycarbonate lens for eyeglasses to \$10	4,150,150	1,471,505
Spine Surgery (improve PA process)	2,669,826	946,631
Hospital	2,287,051	810,912
Physician	382,775	135,719
Timely filing requirement change from 12 months to 6 months (\$33.3M times 10%)	3,330,000	1,288,044
Targeted Program Changes Effective October 1, 2015		
Dental	8,589,441	2,214,931
Restoration Replacement	5,897,247	1,520,703
Orthodontic Services	2,384,550	614,896
Sealants	260,166	67,088
Anterior Endodontics	47,478	12,243
Allergy & Immunotherapy (provider qualifications)	11,273,925	2,907,169
Subtotal of Targeted Program Changes	94,425,535	31,717,340
Total with Administrative Reductions	94,425,535	34,617,340

The change in federal funding is a result of the decline in the Federal Medical Assistance Percentage (FMAP) used to determine the amount of federal matching funds for state Medicaid expenditures. For the second consecutive year, it will continue its downward trend for Oklahoma by decreasing from the current rate of 62.30 percent to 61.25 percent (effective October 1). This follows a reduction of 1.72 percentage points in SFY 2015 and creates a need for \$39 million in additional state funds. FMAP is

the federal funding formula based on a state's per capita income relative to that of other states using a three-year rolling average.

OHCA staff met with numerous stakeholders over several months to ensure broad input as potential cuts were considered. We thank each of you for your time and investment in the SoonerCare program.

A balanced budget was submitted to and approved by the OHCA board of directors on June 25, 2015.

As always, we encourage you to submit ideas for potential cost savings to the program. You may submit your ideas individually to ProviderNews@okhca.org.

Budget Reduction Policy Changes

As of July 1, 2015, several policy changes were implemented as a result of OHCA's budget reduction. Among them were:

- The addition of agency rules to change the timely filing for reimbursement claims from 12 months to six months
- Policy regarding the re-submission of claims was revised to update the deadline from 24 months to 12 months

Timely filing for crossover claims will remain one year.

To view these changes and get more information that may affect your practice, please see OHCA 2015-09 in the [Provider Letters](#) section of our website.

OHCA Strategic Planning Conference 2015

Be sure to mark your calendar for the OHCA Strategic Planning Conference, Aug. 12 - 14, at the Embassy Suites Oklahoma City Downtown/Medical Center (741 N. Phillips Ave., 73104).

Strategic Planning Conference Times:

Wednesday, Aug. 12: 2:30 - 5 p.m.

Thursday, Aug. 13: 8:30 a.m. - 5 p.m.

Friday, Aug. 14: 8:30 a.m. - 12 p.m.

Please visit our [website](#) to register.



Insure Oklahoma funded through 2016

OHCA is pleased to announce that federal funding for the Insure Oklahoma program has been secured through the end of 2016.

Insure Oklahoma is the state's premium assistance program that helps businesses and their modest and low-income employees afford health insurance coverage. The program, which has been in operation since November 2005, currently serves 17,923 Oklahomans with more than 3,700 businesses participating.

Insure Oklahoma is funded by state tobacco tax matched by federal Medicaid dollars. OHCA received notification from the Centers for Medicare & Medicaid Services (CMS) advising that federal funding for the program would continue through 2016.

"We want Oklahomans to know that Insure Oklahoma is open for business and we stand ready to help with their insurance needs," said OHCA Chief Executive Officer Nico Gomez. "I appreciate our Insure Oklahoma and other OHCA employees for keeping this program moving forward and available for many working Oklahomans."

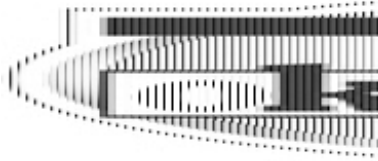
Insure Oklahoma currently has two options. The employer-sponsored insurance (ESI) plan pays at least 60 percent of the premiums for private market health insurance policies. Participating employers pay at least 25 percent of the qualified employee's monthly premiums, and the employee pays no more than 15 percent of their health premium. The program also assists with premiums for the employee's spouse.

The Insure Oklahoma Individual Plan (IP) is for Oklahomans working for small businesses that do not have access to group coverage and who earn less than the federal poverty level, as well as those who are temporarily unemployed and seeking work. The IP can also help hardworking college students stay healthy. Low copays and monthly premiums make it a great option for a student on a budget.

The secured funding for an additional year will provide state leaders time to continue the discussion for a long-term funding agreement. More information about Insure Oklahoma is available at www.insureoklahoma.org.

2015 Spring Provider Training Workshop archives

Did you or your staff miss out on the Spring Provider Training Workshops? All training materials from the classes are now available for the following classes:





- Dos, Don'ts and Did You Knows of Oklahoma SoonerCare
- Navigating the OHCA Public Website
- Understanding and Correcting Claim Denials
- Electronic Referrals
- DMEPOS Pricing, Policy and Process Changes
- Patient-Centered Medical Home Compliance Review Updates 1915(c) and Living Choice Updates
- Medication Policy Updates
- Tobacco Cessation

Check out the complete list here: <http://www.okhca.org/classes>

Care Coordination Models for Aged, Blind and Disabled Persons

Pursuant to HB 1566 passed by the Oklahoma Legislature in 2015, it is the intent of the OHCA to issue a Request For Proposal (RFP) for care coordination model(s) for the Aged, Blind and Disabled populations. To comply with the direction of the bill, the OHCA will solicit information and input from a wide variety of stakeholders including but not limited to members, advocates, providers, health care systems, and the general public through a Request For Information (RFI) process, for the development and requirements of the RFP.

A complete timeline, details and related documents can be found on our [website](#). If you are a stakeholder wanting to be involved in the discussions, click [here](#) to submit your contact information.

ATTENTION: ALL PROVIDERS

HMO Claims Billing Now Available via SoonerCare Provider Portal

Effective June 18, 2015, providers are able to submit HMO claims using the SoonerCare Provider Portal. Paper submission will no longer be required for these claims. These will be region 94 claims and must be billed for the copay amount (rather than billing for the total charges) and an EOB must be attached. When submitting a claim on the Provider Portal you will find a drop-down box labeled "HMO Copay," this box will need to be changed to "yes" when billing the claim as an HMO.

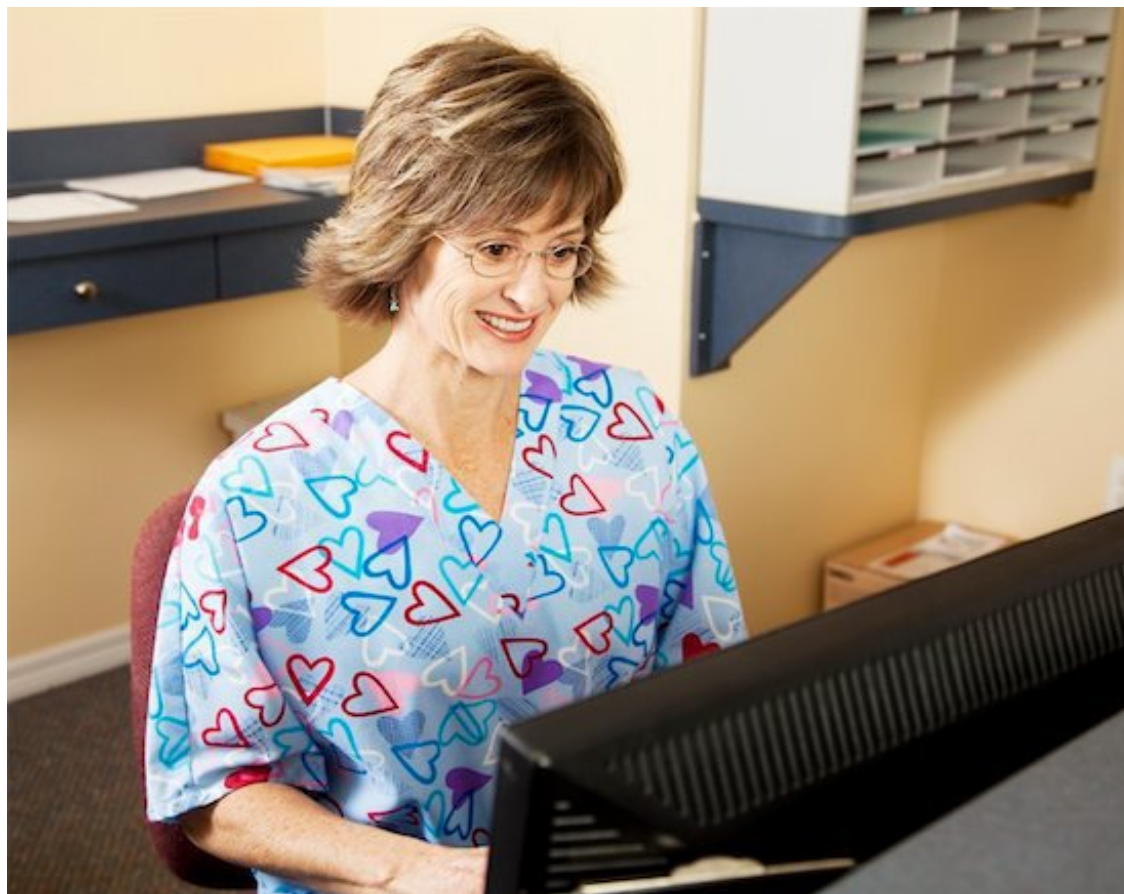
New Fee Schedule

Remember that we update our [fee schedule](#) every July to rebase to the new Medicare RVUs. The new fee schedule is available on our public website at <http://www.okhca.org/feeschedules>.

Dates of service prior to July 1, 2015, are paid at last year's rate and dates of service after July 1, 2015, are paid at the new rate.

Pharmacy

Mirena® and Liletta® Billing Changes



Effective 8/1/15, OHCA will require a change in the billing of the hormonal intrauterine device (IUD) Mirena®. Currently J7302, levonorgestrel-releasing intrauterine contraceptive system, 52 mg, describes both Mirena® and Liletta® products. **The billing modifier U6 will now need to be added to J7302 on claims for Mirena®.** J7302, without the modifier, remains the billing code for Liletta®. Claims billed for either product still require the appropriate NDC information.

The reimbursement rate for Mirena® will be \$855.89, while the reimbursement rate for Liletta® will be \$660. These rates are subject to change based on information OHCA gathers.

Dental

Ortho care referrals

A friendly reminder to all dental providers: Please use the current [DEN-2 form](#) when referring a member for comprehensive orthodontics. The DEN-2 Form can be accessed on the [OHCA public website](#).



Durable Medical Equipment (DME)

Continuous Positive Airway Pressure Devices

As of July 1, 2015, coverage for continuous positive airway pressure devices (CPAP) was restricted to children only.

ALERT - - - This coverage change applies to new requests by adult members (21 and over) submitted July 1, 2015, or later.

The Provider Portal may show that the CPAP is covered for ages 0-999. This is to allow for the grandfathering of members whose CPAPs were covered prior to July 1, 2015. This age range will be changed in 2016 to show only ages 0-20, after all grandfathered members have completed their rental cycle.

If you have any questions about this change, please contact Stan Ruffner, DMEPOS director, at stan.ruffner@okhca.org.

Incontinence supplies

Effective July 1, 2015, SoonerCare will pay for incontinence supplies (diapers, pull-ons, underpads and wipes) for children ages 4 through 20. These supplies must be medically necessary.

Members will no longer contact their case managers or current durable medical equipment (DME) provider for these supplies. [People First Industries](#) (PFI) will be the only SoonerCare provider of

incontinence supplies for these members.

PFI participates in the [State Use Program](#), meaning that the organization keeps Oklahomans with severe disabilities in the workforce, employing some of the very same people that we serve.

Behavioral Health

Important notice: New prior authorization (PA) form

A new Therapy Management Authorization Form for occupational therapy, physical therapy and speech therapy services delivered in outpatient and school settings will be required effective June 15, 2015. The previous PA form will NOT be accepted.

IMPORTANT CHANGES TO THE FORM (also applies to WEB submission):

- CPT code section: Units requested should be the total number of units per CPT code for the duration of care requested
- Specialty Therapy modifiers must be submitted (include additional modifiers as necessary):
Speech Therapy – GN; Occupational Therapy – GO; Physical Therapy - GP
- “TM” modifier must be included if services will be provided in a school setting
- Modifiers must be billed in the same sequential order as authorized to receive payment
- Duration of care is required; referring provider section: OHCA ID is not required

Failure to complete this new form in full will result in processing delays.

The instructional guide can be used as a resource in completing the form. Please visit our website at <http://www.triadhealthcareinc.com/soonerare> to download the form and instructions.

If you have any questions regarding the new Therapy Management prior authorization form, please contact the Provider Engagement team at providerengagement@medsolutions.com.

Diabetes resources

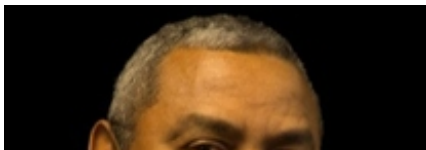


[SoonerCare's Health Management Program](#) (HMP) has produced a video with information and tips you can share with your patients on diabetes. A link to the video can be found [HERE](#), or you can request a copy of the 10-minute video from your provider representative, if you would like to show it in your offices. There are also additional diabetes educational resources for your patients at www.okhca.org/diabetes.

New on OKHCA.org

- [Provider Letters](#)
- [Global Messages](#)
- [News Releases](#)

OHCA dentist selected to lead national organization



Leon Bragg, DDS, Chief Dental Officer for the Oklahoma Health Care Authority, was recently named President of the Medicaid/Children's Health Insurance Program (CHIP) State



Dental Association during their annual conference in Washington, D.C.

The national organization serves to develop and promote evidence-based Medicaid/CHIP oral health best practices and policies. Dr. Bragg has served the organization as vice-president since 2013.

In February 2004, Dr. Bragg became the OHCA's first full-time dentist. As Chief Dental Officer, he has helped develop program policy for dental care for SoonerCare members, established benefits standards for quality and assisted with utilization review for the program. Dr. Bragg also serves as a liaison between the state agency and its dental providers.

OHCA dates to remember

- August 12 [OHCA Board meeting](#)
- September 1 [Tribal Consultation meeting](#)
- September 9 [Drug Utilization Review \(DUR\) Meeting](#)
- September 10 [OHCA Board Meeting \(Lawton\)](#)
- September 17 [Medical Advisory Committee \(MAC\) meeting](#)

To access the complete calendar, click [here](#).

Resources for you

- [OHCA Quick Reference Guide](#) (PDF)
- [Provider Resources](#): Useful contact information
- [Web Alerts](#): Register for the latest OHCA updates of your choice
- [EVS Guide](#): Oklahoma Client Eligibility Verification System
- [ePocrates](#): Oklahoma SoonerCare drug list and Medicare Part D formularies
- [Medicaid on the Web](#): Oklahoma Medicaid Management Information System (OKMMIS) Provider Training Manual

- [Provider Directory](#): PDF for members in patient-centered medical homes
- [Additional provider directories](#): Behavioral Health, Dental, Vision, DME, etc.
- [Online provider training](#): Webinars, provider workshop schedules, etc.
- [Statistics & Data](#): Access Fast Facts on providers and services
- [Printer-friendly provider newsletters](#)
- [Free OHCA publications](#): Ordering from our website

OHCA Provider Helpline: 800-522-0114

Pass it on!

OHCA works to keep providers and their staff informed about the latest happenings in SoonerCare. Be sure to check that all health care providers, administrative staff, business departments and other appropriate parties have access to this E-newsletter by forwarding it today!

Information contained within is subject to change. Be sure to check OHCA Provider Letters, Global Messages and [Web Alerts](#) at www.okhca.org for the most up-to-date information.

Our vision is for Oklahomans to enjoy optimal health status through access to quality health care regardless of their ability to pay.

The Oklahoma Health Care Authority does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services.

Please submit any questions, comments or story suggestions to Kelli Brodersen (kelli.brodersen@okhca.org) at the OHCA's Office of Creative Media & Design at 405-522-7504.



**4345 N. Lincoln Blvd.
Oklahoma City, OK 73105**

Chief Executive Officer	Nico Gomez
Medicaid Director	Garth L. Splinter, M.D., MBA
Managing Editor	Kelli Brodersen Public Information Representative
OHCA Board of Directors	Ed McFall, chairman <i>Porum</i>
	Anthony Armstrong, vice chairman <i>Muskogee</i>
	Carol Robison <i>Oologah</i>
	Melvin R. McVay, Jr. <i>Oklahoma City</i>
	Marc Nuttle <i>Norman</i>
	Ann Bryant <i>Enid</i>
	Tanya L. Case <i>Duncan</i>

Powered by **govDELIVERY.** 