## Oklahoma Health Care Authority MEDICAL ADVISORY COMMITTEE

September 10, 2020 1:00 PM – 3:30 PM Teleconference OKC, OK

#### **AGENDA**

I. Welcome, and Roll Call: Chairman, Jason Rhynes, O.D.

#### **Teleconference Participants**

Ms. Lois Baer – WebEx Teleconference	Ms. Sarah Baker – WebEx Teleconference
Ms. Debra Billingsley – WebEx Teleconference	Ms. Joni Bruce - WebEx Teleconference
Mr. Terry Bryce – WebEx Teleconference	Dr. Joe Catalano – WebEx Teleconference
Mr. Victor Clay - WebEx Teleconference	Dr. Steven Crawford – WebEx Teleconference
Ms. Terrie Fritz - WebEx Teleconference	Ms. Wanda Felty – WebEx Teleconference
Ms. Allison Garrison – WebEx Teleconference	Mr. Steve Goforth – WebEx Teleconference
Ms. Lindsay Hanna – WebEx Teleconference	Ms. Sandra Harrison – WebEx Teleconference
Dr. Lori Holmquist-Day – WebEx Teleconference	Ms. Tina Johnson - WebEx Teleconference
Mr. Mark Jones - WebEx Teleconference	Dr. Craig Kupiec – WebEx Teleconference
Ms. Annette Mays – WebEx Teleconference	Ms. Melissa Miller – WebEx Teleconference
Dr. Daniel Post – WebEx Teleconference	Ms. Toni Pratt-Reid – WebEx Teleconference
Dr. Jason Rhynes - WebEx Teleconference	Ms. Katie Roberts – WebEx Teleconference
Mr. Rick Snyder - WebEx Teleconference	Dr. Dwight Sublett – WebEx Teleconference
Mr. William Whited – WebEx Teleconference	Dr. Whitney Yeates – WebEx Teleconference

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Telephone: 1-415-655-0002

- II. Action Item: Approval of Minutes of the May 14<sup>th</sup>, 2020: Medical Advisory Committee Meeting
- III. Public Comments (2 minute limit)
- IV. MAC Member Comments/Discussion
- V. Financial Report: Tasha Black, Senior Director of Financial Services
- VI. SoonerCare Operations Update: Melinda Thomason, Senior Director for Stakeholder Engagement
- VII. <u>Legislative Update: Christina Foss, Legislative Liaison</u>

September 10, 2020

## Oklahoma Health Care Authority MEDICAL ADVISORY COMMITTEE

- VIII. <u>Proposed Rule Changes: Presentation, Discussion, and Vote:</u> Sandra Puebla, Director of Federal & State Authorities
  - IX. <u>New Business:</u> Chairman, Jason Rhynes
  - X. <u>Future Meeting:</u> November 12, 2020
  - XI. <u>Adjourn</u>

#### I. Welcome, Roll Call, and Public Comment Instructions:

Chairman, Dr. Jason Rhynes called the meeting to order at 1:00 PM.

**Delegates present were:** Ms. Debra Billingsly, Ms. Kristi Blackburn, Mr. Victor Clay, Ms. Wanda Felty, Dr. Arlen Foulks, Ms. Terrie Fritz, Ms. Allison Garrison, Dr. Lori Holmquist-Day, Ms. Tina Johnson, Ms. Melissa Miller, Ms. Toni Pratt-Reid, Dr. Jason Rhynes, Dr. Dwight Sublett, Mr. Jeff Tallent, Mr. William Whited, and Dr. Whitney Yeates.

Alternates present were: Mr. Tony Fullbright providing a quorum.

**Delegates absent without an alternate were:** Ms. Sarah Baker, Ms. Mary Brinkley, Dr. Erin Balzer, Dr. Joe Catalano, Mr. Brett Coble, Dr. Steven Crawford, Mr. Steve Goforth, Mr. Mark Jones, Ms. Annette Mays, Mr. James Patterson, Dr. Daniel Post, Dr. Raymond Smith, Mr. Rick Snyder, and Dr. Paul Wright.

Mr. Kevin Corbett, CEO of the OHCA, spoke briefly to the committee members. Mr. Corbett started with recognizing the team at OHCA, being able to continue the service levels during COVID 19. We have been working for the past several months in anticipation of expansion July 1, 2020. Our readiness for that was completed, and we were ready. We also have been working on some things in the context of a difficult situation that was shared with the Board. We are finishing 2020 but we are moving into FY21 with some particularly strong financial headwinds. We are an organization not unlike any other state agency that has been impacted by the revenue situation in the state. We have communicated that we are fortunate that the legislature had appropriated to us the same amount that we received in FY20 for FY21. The reality is that, that was on the concept that we would expand and therefore some of the revenues that expansion would have created for us, for example Insure Oklahoma would have created additional funding mechanisms for us. We will now have a reduction in our appropriation of about 2%.

## II. Approval of the May 14, 2020 Minutes

Medical Advisory Committee

The motion to approve the minutes was by Ms. Terrie Fritz and seconded by Ms. Allison Garrison and passed unanimously.

#### III. Public Comments (2 minute limit):

There were no public comments made at this meeting.

#### **IV.** MAC Member Comments/Discussion:

Ms. Melody Anthony discussed SB802 passing on June 30. The bill instructed the OHCA to submit a state plan amendment for 19-64 years old to begin Medicaid coverage to begin July 2021. We are currently having discussions with our consultant HMA to write the RFP, to go with our third party managed care. Our policy team has a timeline on how to submit the SPA within 90 days that we were required to do, while also making sure we have all of our Federal authorities in place, so we can launch expansion in July of 2021. The RFP will be available to bid mid-October of this year. The agency will then have the evaluation towards December, with hopes of having our Managed Care partners selected by February 1<sup>st</sup> 2021. This allows the agency and Medicaid partners to have six months or more to go through readiness reviews and enrollment of the populations that will transition and make sure that when we go live, the members have a smooth transition.

#### V. <u>Financial Report:</u>

Aaron Morris, Chief Financial Officer

Mr. Morris presented the financial report ending in May 31, 2020. OHCA is .8% under budget in revenues and 1.4% under budget in expenditures with the result that our budget variance is a positive \$27,271,954. The budget variance is primarily attributed to the following: Medicaid Program Variance is a positive 23.7 million state dollars, and administration is a positive 3.9 million state dollars. Drug Rebate is 0.9 million state dollars under budget. Taxes and Fees, which also included tobacco tax is 0.6 million state dollars under budget. For more detailed information, see item 5 in the MAC agenda. For more detailed information, see item 5 in the MAC agenda.

#### VI. <u>SoonerCare Operations Update:</u>

Melinda Thomason, Senior Director for Stakeholder Engagement

Ms. Thomason presented the SoonerCare Operations update to the committee. Information is based on data for May 2020. Patient Centered Medical Home enrollment is at 557,651 which is up by 11,445. Sooner Care Traditional has a current enrollment of 245,134 which is 145 less than the previous month. SoonerPlan is up by 199 giving a total number of 30,517. Insure Oklahoma has a total enrollment of 23,484 of which 14,141 are in the Employee Sponsored Plan, and 9,343 are in the Individual Plan. In total, SoonerCare enrollment is at 856,756. Total in-state providers is up 366 giving a total of 44,717. For more detailed information see agenda item 6 in the MAC agenda.

Ms. Thomason also went over a 2020 Telehealth Summary. She discussed how many members used telehealth, how many visits were conducted, and the average reimbursement per member. Ms. Thomason also discussed where telehealth and what telehealth services we used. For more detailed information please see item 6 in the MAC agenda.

### VII. <u>DME Update:</u>

Jimmy Witcosky, Director of Financial Management

Mr. Witcosky stated that After receiving feedback on the rate proposal for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies that was presented and approved at the May 2020 OHCA Board Meeting, agency staff have completed a thorough provider-specific analysis and will recommend modifications to the proposal. This proposal is contingent upon SPARC, Board, and CMS approval. The original proposal was the lowest Medicare rate (typically non-rural), and the updated proposal is using the non-rural or rural rate based on the member's zip code (based on Medicare criteria) at the time a claim is filed.

DME Category	Original Proposal	Updated Proposal
Complex Rehab Technology (Power Wheelchair	100%	70%
Complex Rehab Technology (Accessories)	100%	100%
Equipment/Appliances	100%	100%
Enteral Food	150%	125%
Orthotics	70%	70%
Prosthetics	70%	70%
Parenteral	70%	70%
Supplies	80%	100%
	Lowest Medicare Rate	Rural or Non-Rural Rates

There were six items that were identified, but more commodity items that mainly go to large national providers, that were going to see price increases to 100%. We priced those between 60% - 75% of Medicare, which will still see increases from our current pricing. OHCA would like to thank the DME community and stakeholders for voicing their concerns and engaging in this process. Input from our provider community is important and helps OHCA to be good stewards of state and federal taxpayer dollars, while maintaining access to life sustaining equipment and supplies.

#### VIII. Legislative Update:

Christina Foss, Legislative Liaison

Ms. Foss presented a legislative update for the committee members. She discussed that there were 1000 bills still active at the last deadline which was March 12<sup>th</sup>, before the Legislature adjourned on the 17<sup>th</sup> of March, of which only 161 were signed by the Governor. A lot of policy bills were dropped off, because there was not a lot to report. The bill that raised the SHOPP fees was vetoed, so as we look towards next session, we will be looking at different funding mechanisms for expansion. There was a bill that allowed us some additional flexibility with our rate preservation fund, in case that is

needed. HB8527 creates some internal process for the organization as far as public posting of different changes in possibly PA's and guidelines.

#### IX. <u>New Business:</u> Chairman, Jason Rhynes, O.D.

No new business was identified.

#### X. Future Meetings

September 10, 2020 November 12, 2020

#### XI. Adjournment

Chairman Rhynes asked for a motion to adjourn. Motion was provided by Dr. Arlen Foulks and seconded by Ms. Annette Mays. There was no dissent and the meeting adjourned at 1:56pm.





## FINANCIAL REPORT

For the Fiscal Year Ended June 30, 2020 Submitted to the CEO & Board

- Revenues for OHCA through June, accounting for receivables, were \$4,534,554,381 or 1.7% under budget.
- Expenditures for OHCA, accounting for encumbrances, were \$4,443,881,322 or 2.5% under budget.
- The state dollar budget variance through June is a positive \$37,150,306.
- The budget variance is primarily attributable to the following (in millions):

Expenditures:	
Medicaid Program Variance Administration	30.4 5.5
Revenues:	
Drug Rebate	1.3
Medical Refunds	(0.6)
Taxes and Fees	0.5
Total FY 20 Variance	\$ 37.1

#### **ATTACHMENTS**

Summary of Revenue and Expenditures: OHCA	1
Medicaid Program Expenditures by Source of Funds	2
Other State Agencies Medicaid Payments	3
Fund 205: Supplemental Hospital Offset Payment Program Fund	4
Fund 230: Quality of Care Fund Summary	5
Fund 245: Health Employee and Economy Act Revolving Fund	6
Fund 250: Belle Maxine Hilliard Breast and Cervical Cancer	
Treatment Revolving Fund	7

## OKLAHOMA HEALTH CARE AUTHORITY Summary of Revenues & Expenditures: OHCA SFY 2020, For the Fiscal Year Ended June 30, 2020

TAULEO	FY20	FY20		% Over/
ENUES CONTROL OF THE	Budget YTD	Actual YTD	Variance	(Under)
State Appropriations	\$ 1,000,039,368	\$ 1,000,039,368	\$ -	0.0
Federal Funds	2,810,155,050	2,730,905,921	(79,249,129)	(2.8)
Tobacco Tax Collections	44,111,504	47,359,086	, , ,	7.4
Quality of Care Collections	86,386,763	83,527,309		(3.3
Prior Year Carryover	20,110,285	20,110,285	( , , , ,	0.0
Federal Deferral - Interest	335,461	335,461		0.0
Rate Preservation Fund	29,360,748	29,360,748	-	0.
Drug Rebates	383,160,877	387,176,812		1.
Medical Refunds	35,559,788	33,667,234	, , , ,	(5.3
Supplemental Hospital Offset Payment Program	175,670,819	175,670,819		0.
GME Federal Disallowance Repayment - OU/OSU	17,503,932	17,503,932		0
Other Revenues	8,714,519	8,897,405	182,886	2
TOTAL REVENUES	\$ 4,611,109,115	\$ 4,534,554,381	\$ (76,554,734)	(1.
	FY20	FY20		% (Over
ENDITURES	Budget YTD	Actual YTD	Variance	Under
ADMINISTRATION - OPERATING	\$ 60,626,136		\$ 6,611,767	10
ADMINISTRATION - CONTRACTS	\$ 158,992,292			7
MEDICALD DOCUMANO				
MEDICAID PROGRAMS				
Managed Care:	45.050.047	44 404 400	700.044	
SoonerCare Choice	45,258,047	44,491,402	766,644	1
Acute Fee for Service Payments:				
Hospital Services	1,043,097,549	1,017,627,855	25,469,693	2
Behavioral Health	18,899,692	18,586,546		1
Physicians	405,994,799	385,544,760	20,450,039	5
Dentists	123,645,842	119,972,420	3,673,422	3
Other Practitioners	58,377,181	52,752,325	5,624,856	9
Home Health Care	30,312,340	29,396,016	916,323	3
Lab & Radiology	29,310,220	26,611,786	2,698,433	9
Medical Supplies	58,150,391	57,327,019	823,372	1
Ambulatory/Clinics	268,804,782	258,442,160	10,362,622	3
Prescription Drugs	680,445,343	667,068,107		2
OHCA Therapeutic Foster Care	225,148	304,016		
Other Payments:				
Nursing Facilities	665,982,688	658,779,390	7,203,298	1
Intermediate Care Facilities for Individuals with Intellectual Disabilities Private	65,290,429	66,177,254	, ,	(1.
Medicare Buy-In	184,231,373	186,107,830	, ,	(1.
Transportation	80,440,598	77,073,098		4
•	322,609			39
Money Follows the Person-OHCA		194,435		
Electronic Health Records-Incentive Payments	776,273	776,273		0
Part D Phase-In Contribution	101,493,792	101,842,015	(348,223)	(0.
Supplemental Hospital Offset Payment Program	465,695,481	465,695,481	-	0
Telligen	11,123,978	8,222,261	2,901,717	26
Total OHCA Medical Programs	4,337,878,553	4,242,992,450	94,886,103	2
			00.000	0
OHCA Non-Title XIX Medical Payments	89,382	-	89,382	U

\$ 53,522,753 \$

90,673,059 \$ 37,150,306

REVENUES OVER/(UNDER) EXPENDITURES

#### **OKLAHOMA HEALTH CARE AUTHORITY**

# Total Medicaid Program Expenditures by Source of State Funds SFY 2020, For the Fiscal Year Ended June 30, 2020

			Health Care	Quality of		SHOPP	ВСС	Other State
Category of Service	Total		Authority	Care Fund	HEEIA	Fund	Revolving Fund	Agencies
SoonerCare Choice	\$ 44.592.646	\$	44.482.065	\$ -	\$ 101.244	\$ -	\$ 9.337	\$ -
Inpatient Acute Care	1,186,777,141	Ψ	658,002,821	486,687	3,269,603	356,501,780	1,121,988	167,394,261
Outpatient Acute Care	452,961,378		352,200,964	41,604	5,031,565	89,913,454	5,773,792	-
Behavioral Health - Inpatient	72,989,211		10,317,610		536,952	17,599,488	-	44,535,161
Behavioral Health - Psychiatrist	9,949,694		8,264,794	_	-	1,680,758	4,142	- 1,000,101
Behavioral Health - Outpatient	17,742,717		-	_	_	-,000,.00	.,	17,742,717
Behaviorial Health-Health Home	20,353,759		_	_	_	_	_	20,353,759
Behavioral Health Facility- Rehab	225,741,591		_	_	_	_	125,710	225,741,591
Behavioral Health - Case Management	3,840,052		_	_	_	_	-	3,840,052
Behavioral Health - PRTF	12,407,504		_	_	_	_	_	12,407,504
Behavioral Health - CCBHC	90.413.705		_					90.413.705
Residential Behavioral Management	17,875,962		-	-	-	-	-	17,875,962
Targeted Case Management	66,006,413		_	_	_	_	_	66,006,413
Therapeutic Foster Care	304.016		304.016	_	_	_	_	-
Physicians	474,151,247		381,819,123	58,101	5,264,406	_	3,667,536	83,342,081
Dentists	120,011,330		119,960,182	-	38,910	-	12,238	-
Mid Level Practitioners	2,398,925		2,381,608	-	16,077	-	1,240	-
Other Practitioners	50,900,704		49,820,479	446,364	531,226	-	102,634	-
Home Health Care	29,404,700		29,390,352	· -	8,683	-	5,664	-
Lab & Radiology	27,396,633		26,429,691	-	784,847	-	182,095	-
Medical Supplies	57,607,770		54,582,763	2,711,532	280,751	-	32,724	-
Clinic Services	260,260,691		251,977,474	· · ·	2,061,698	-	246,254	5,975,265
Ambulatory Surgery Centers	6,386,032		6,210,218	-	167,600	-	8,213	, , , <u>-</u>
Personal Care Services	10,253,678		-	-	· -	-	-	10,253,678
Nursing Facilities	658,779,541		423,161,449	235,617,452	151	-	488	-
Transportation	76,904,408		73,855,353	2,750,914	119,904	-	178,237	-
IME/DME/GME	75,808,101		-	-	-	-	-	75,808,101
ICF/IID Private	66,177,254		54,303,366	11,873,888	-	-	-	-
ICF/IID Public	25.670.316		_	_	_	_	_	25,670,316
CMS Payments	287,949,845		287.513.571	436,274	_	_	_	-
Prescription Drugs	681,835,108		664,442,852	-	14,767,001	-	2,625,255	-
Miscellaneous Medical Payments	288,593		278,880	_	-	_	9,713	_
Home and Community Based Waiver	217,562,854		· -	-	-	-	· -	217,562,854
Homeward Bound Waiver	77,895,948		_	_	_	_	_	77,895,948
Money Follows the Person	194,435		194,435	-	-	-	-	-
In-Home Support Waiver	25,281,290		· -	-	-	-	-	25,281,290
ADvantage Waiver	164,477,304		_	-	_	-	-	164,477,304
Family Planning/Family Planning Waiver	3,622,442		-	-	-	-	-	3,622,442
Premium Assistance*	55,473,238		-	-	55,473,237.87	-	-	· · ·
Telligen	8,222,261		8,222,261	-	-	-	-	-
Electronic Health Records Incentive Payments	776,273		776,273	-	-	-	-	-
Total Medicaid Expenditures	\$ 5,687,646,711	\$	3,508,892,602	\$ 254,422,816	\$ 88,453,857	\$ 465,695,481	\$ 14,107,261	\$1,356,200,404

 $<sup>^{\</sup>star}$  Includes \$54,988,934.39 paid out of Fund 245

## OKLAHOMA HEALTH CARE AUTHORITY

#### Summary of Revenues & Expenditures: Other State Agencies

SFY 2020, For the Fiscal Year Ended June 30, 2020

REVENUE	Actual YTD
Revenues from Other State Agencies	\$ 490,018,70
Federal Funds	940,781,2
TOTAL REVENUES	\$ 1,430,800,0
EXPENDITURES	Actual YTD
Department of Human Services	0.47.500.0
Home and Community Based Waiver	217,562,8
Money Follows the Person	77 005 0
Homeward Bound Waiver In-Home Support Waivers	77,895,9
ADvantage Waiver	25,281,2 164,477,3
Intermediate Care Facilities for Individuals with Intellectual Disabilities Public	25,670,3
Personal Care	10,253,6
Residential Behavioral Management	10,608,3
Targeted Case Management	57,771,6
Total Department of Human Services	589,521,4
State Employees Physician Payment	
Physician Payments	83,342,0
Total State Employees Physician Payment	83,342,0
Education Payments	
Graduate Medical Education	31,622,6
Indirect Medical Education	35,874,6
Direct Medical Education	8,310,8
Total Education Payments	75,808,1
Office of Juvenile Affairs	
Targeted Case Management	2,342,2
Residential Behavioral Management	7,267,63
Total Office of Juvenile Affairs	9,609,8
Department of Mental Health	
Case Management	3,840,0
Inpatient Psychiatric Free-standing	44,535,1
Outpatient	17,742,7
Health Homes	20,353,7
Psychiatric Residential Treatment Facility	12,407,5
Certified Community Behavioral Health Clinics	90,413,7
Rehabilitation Centers Total Department of Mental Health	225,741,5 <b>415,034,4</b>
15th Bopa thon of montal routh	410,004,1
State Department of Health Children's First	1,117,6
Sooner Start	1,977,7
Early Intervention	3,357,8
Early and Periodic Screening, Diagnosis, and Treatment Clinic	1,305,4
Family Planning	348,2
Family Planning Waiver	3,262,29
Maternity Clinic Total Department of Health	11,369,3
County Health Departments	E70.0
EPSDT Clinic	576,80
Family Planning Waiver Total County Health Departments	11,88 <b>588,6</b> 9
·	
State Department of Education Public Schools	107,8 1,309,1
Medicare DRG Limit	153,740,2
Native American Tribal Agreements	2,115,2
Department of Corrections	3,965,5
JD McCarty	9,688,4
Total OSA Medicaid Programs	\$ 1,356,200,4
	\$ 94,644,6

### **OKLAHOMA HEALTH CARE AUTHORITY**

#### **SUMMARY OF REVENUES & EXPENDITURES:**

Fund 205: Supplemental Hospital Offset Payment Program Fund SFY 2020, For the Fiscal Year Ended June 30, 2020

	FY 20
REVENUES	Revenue
SHOPP Assessment Fee	175,501,077
Federal Draws	\$ 316,753,452
Interest	169,742
Penalties	-
State Appropriations	(30,200,000)
TOTAL REVENUES	\$ 462,224,271

EXPENDITURES	Quarter	Quarter	Quarter	Quarter	E	FY 20 expenditures
Program Costs:	7/1/19 - 9/30/19	10/1/19 - 12/31/19	1/1/20 - 3/31/20	4/1/20 - 6/30/20		
Hospital - Inpatient Care	85,252,282	101,785,980	82,341,671	87,121,848	\$	356,501,780
Hospital -Outpatient Care	23,774,225	26,396,190	19,435,660	20,307,378		89,913,454
Psychiatric Facilities-Inpatient	4,602,238	6,087,933	3,355,142	3,554,176		17,599,488
Rehabilitation Facilities-Inpatient	383,416	456,157	408,477	432,709		1,680,758
<b>Total OHCA Program Costs</b>	114,012,161	134,726,259	105,540,950	111,416,110	\$	465,695,481

Total Expenditures	\$ 465,695,481

CASH BALANCE \$ (3,471,21)
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<sup>\*\*\*</sup> Expenditures and Federal Revenue processed through Fund 340

# OKLAHOMA HEALTH CARE AUTHORITY SUMMARY OF REVENUES & EXPENDITURES:

Fund 230: Nursing Facility Quality of Care Fund SFY 2020, For the Fiscal Year Ended June 30, 2020

REVENUES	Total Revenue	State Share
Quality of Care Assessment	\$ 83,475,069	83,475,069
Interest Earned	52,241	52,241
TOTAL REVENUES	\$ 83,527,309 \$	83,527,309

EXPENDITURES	FY 20 Total \$ YTD	S	FY 20 State \$ YTD	S	Total State \$ Cost
Program Costs					
Nursing Facility Rate Adjustment	\$ 231,907,034	\$	73,586,503		
Eyeglasses and Dentures	275,918	\$			
Personal Allowance Increase	3,434,500	\$	1,093,179		
Coverage for Durable Medical Equipment and Supplies	2,711,532	\$	861,996		
Coverage of Qualified Medicare Beneficiary	1,032,756	\$	328,313		
Part D Phase-In	436,274	\$	436,274		
ICF/IID Rate Adjustment	5,271,790	\$	1,677,584		
Acute Services ICF/IID	6,602,097	\$	2,095,976		
Non-emergency Transportation - Soonerride	2,750,914	\$	873,899		
Total Program Costs	\$ 254,422,816	\$	81,041,584	\$	81,041,584
Administration					
OHCA Administration Costs	\$ 583,473	\$	291,737		
DHS-Ombudsmen	200,967		200,967		
OSDH-Nursing Facility Inspectors	180,709		180,709		
Mike Fine, CPA	 13,800		6,900	_	
Total Administration Costs	\$ 978,949	\$	680,313	\$	680,313
Total Quality of Care Fee Costs	\$ 255,401,765	\$	81,721,897		
TOTAL STATE SHARE OF COSTS				\$	81,721,897

Note: Expenditure amounts are for informational purposes only. Actual payments are made from Fund 340. Revenues deposited into the fund are transerred to Fund 340 to support the costs, not to exceed the calculated state share amount.

# OKLAHOMA HEALTH CARE AUTHORITY SUMMARY OF REVENUES & EXPENDITURES:

Fund 245: Health Employee and Economy Improvement Act Revolving Fund SFY 2020, For the Fiscal Year Ended June 30, 2020

REVENUES	(	FY 19 Carryover	FY 20 Revenue	Total Revenue
Prior Year Balance	\$	8,433,128		
State Appropriations		-		
Federal Draws - Prior Year		258,236		
Total Prior Year Revenue				8,691,364
Tobacco Tax Collections		-	38,951,334	38,951,334
Interest Income		-	293,681	293,681
Federal Draws		-	37,418,484	37,418,484
TOTAL REVENUES	\$	8,691,364	\$ 76,663,499	\$ 85,354,862

PENDITURES		FY ' Expend		E	FY 20 Expenditures		Total State \$ YTD
Program Costs:							¥ 1.12
	Employer Sponsored Insur	rance		\$	54,988,934	\$	54,988,934
	College Students/ESI Den	tal			484,303		153,528
Individual Plan							
	SoonerCare Choice			\$	98,595	\$	31,190
	Inpatient Hospital				3,256,477		1,011,814
	Outpatient Hospital				4,962,129		1,579,864
	BH - Inpatient Services-DF	RG			519,008		162,584
	BH -Psychiatrist				-		-
	Physicians				5,194,935		1,665,271
	Dentists				38,476		11,813
	Mid Level Practitioner				15,531		4,844
	Other Practitioners				523,705		168,124
	Home Health				8,683		2,701
	Lab and Radiology				769,693		241,504
	Medical Supplies				279,352		86,320
	Clinic Services				2,008,925		635,309
	Ambulatory Surgery Cente	er			166,296		53,747
	Skilled Nursing				151		51
	Prescription Drugs				14,605,541		4,599,501
	Transportation				118,549		37,277
	Premiums Collected						(314,883)
Total Individual Plan				\$	32,566,047	\$	9,977,033
	College Students-Service	e Costs		\$	414,572	\$	133,280
Total OHCA Program	Costs			\$	88,453,857	\$	65,252,774
Administrative Costs							
	Salaries	\$ 4	43,006	\$	2,222,723	\$	2,265,730
	Operating Costs	<b>*</b>	1,501	7	16,577	7	18,078
	E&E Development DXC		1,436		14,157		15,593
	Contract - DXC		80,233		860,565		940,798
Total Administrative (			26,176	\$	3,114,023	\$	3,240,198
Total Expenditures						\$	68,492,973
NET CASH BALANCE					8,296,702.16		16,861,890

# OKLAHOMA HEALTH CARE AUTHORITY SUMMARY OF REVENUES & EXPENDITURES:

Fund 250: Belle Maxine Hilliard Breast and Cervical Cancer Treatment Revolving Fund SFY 2020, For the Fiscal Year Ended June 30, 2020

REVENUES	FY 20 Revenue		
Tobacco Tax Collections	\$ 777,354	\$	777,354
TOTAL REVENUES	\$ 777,354	\$	777,354

EXPENDITURES	FY 20 Total \$ YTD		FY 20 State \$ YTD		Sta	Total ate \$ Cost
Program Costs						
SoonerCare Choice	\$	9,337	\$	2,081		
Inpatient Hospital		1,121,988	\$	246,586		
Outpatient Hospital		5,773,792	\$	1,267,107		
Inpatient Services-DRG		-	\$	-		
Psychiatrist		4,142	\$	942		
TFC-OHCA		-	\$	-		
Nursing Facility		488	\$	95		
Physicians		3,667,536	\$	808,566		
Dentists		12,238	\$	2,719		
Mid-level Practitioner		1,240	\$	318		
Other Practitioners		102,634	\$	22,513		
Home Health		5,664	\$	1,143		
Lab & Radiology		182,095	\$	40,521		
Medical Supplies		32,724	\$	7,179		
Clinic Services		246,254	\$	54,962		
Ambulatory Surgery Center		8,213	\$	1,969		
Prescription Drugs		2,625,255	\$	586,409		
Transportation		178,237	\$	39,131.32		
Miscellaneous Medical		9,713	\$	2,094.03		
Total OHCA Program Costs	\$	13,981,551	\$	3,084,336		
OSA DMHSAS Rehab		125,710		28,186		
Total Medicaid Program Costs	\$	14,107,261	\$	3,112,522		
TOTAL STATE SHARE OF COSTS					\$	3,112,522

Note: Expenditure amounts are for informational purposes only. Actual payments are made from Fund 340. Revenues deposited into the fund are transferred to Fund 340 to support the costs, not to exceed the calculated state share amount.

# SOONERCARE OPERATIONS UPDATE

HMP and CCU SFY2019 Independent Evaluation Outcomes / CMS Scorecard



# PROGRAM OVERVIEW

# **HEALTH MANAGEMENT PROGRAM**

- Medicaid Reform Act of 2006 (HB2842)
  - Reduce cost and improve quality of care for SoonerCare members with chronic conditions
- 1115(a) waiver authority
- Implemented in February 2008
- Administered by Telligen, selected via the procurement process

# **HMP COMPONENTS**

- Health Coaching
  - 39 registered nurses offer practice-based (face-to-face) and telephonic intervention
  - Enrollment: 5,000 6,000 members
- Practice Facilitation
  - Assist PCMH providers with implementation of best practices
- Resource Navigation
  - Screen for and address social determinants of health and community resource needs

# **CHRONIC CARE UNIT**

- In 2013, legislature awarded OHCA FTE to expand the reach of care coordination programs to members with chronic conditions
- Nurse care management
  - 4 registered nurses offer telephonic care coordination
  - Enrollment: 400 500 members
- Special populations include hemophilia, sickle cell, hepatitis C, bariatric surgery candidates, etc.
- Not limited to SoonerCare Choice members

# PROGRAM OBJECTIVES

Improve member self-management skills

Reduce avoidable acute care services and cost

Address physical and behavioral health needs of members with chronic conditions

Improve provider management of chronic conditions

# INDEPENDENT ANNUAL EVALUATION

# PACIFIC HEALTH POLICY GROUP

# **HMP OUTCOMES – SFY2019**

91% of members very satisfied with HMP

Most impressive quality improvement seen in diabetes, mental health and preventive care

Actual inpatient days for health coached members was 50% of forecast

# HMP RETURN ON INVESTMENT SFY2014 - SFY2019

 HMP generated a return of 289.6% or approximately \$2.90 in net medical savings for every \$1 in administrative expenditures

Exhibit 9-1 - SoonerCare HMP ROI (State and Federal Dollars)

Component	Medical Savings	Administrative Costs	Net Savings	Return on Investment
Health Coaching	\$114,058,162	(\$40,108,345)	\$73,949,817	184.4%
Practice Facilitation	\$131,452,748	(\$22,908,457)	\$108,544,291	473.8%
TOTAL	\$245,510,910	(\$63,016,802)	\$182,494,108	289.6%

# CCU OUTCOMES - SFY2019

92% of members very satisfied with CCU

Most impressive quality improvement seen in diabetes and preventive care

Actual inpatient days for participating members was 49% of forecast

# CCU RETURN ON INVESTMENT SFY2014 - SFY2019

 CCU generated a return of 496.6% or approximately \$5.00 in net medical savings for every \$1 in administrative expenditures

## Exhibit 5-1 - SoonerCare CCU ROI (State and Federal Dollars)

Medical Savings	Administrative Costs	Net Savings	Return on Investment
\$20,551,230	(\$3,444,899)	\$17,106,331	496.6%

# CMS SCORECARD

# **CMS SCORECARD**

- NAMD input and leadership
- Anticipated October 2020
- <a href="https://www.medicaid.gov/state-overviews/scorecard/index.html">https://www.medicaid.gov/state-overviews/scorecard/index.html</a>
- Components
  - National Context
  - State Health System Performance
  - State Administrative Accountability
  - Federal Administrative Accountability



# **GET IN TOUCH**

4345 N. Lincoln Blvd. Oklahoma City, OK 73105

okhca.org mysoonercare.org Agency: 405-522-7300 Helpline: 800-987-7767







## September MAC Proposed Rule Amendment Summary

A face-to-face tribal consultation regarding the following proposed change was held on Tuesday, July 7, 2020 in the Charles Ed McFall Boardroom of the Oklahoma Health Care Authority (OHCA).

The following work folder was posted on the OHCA public website for a public comment period.

**APA WF # 20-11 Medicare Part C (Medicare Advantage) —** AMENDING agency rules at **Oklahoma Administrative Code (OAC) 317:30-3-25** will standardize the language in policy regarding the payment of Medicare deductibles, coinsurance, and copays between Medicare Part A, Part B, and Part C.

**Budget Impact: Budget neutral** 

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

#### SUBCHAPTER 3. GENERAL PROVIDER POLICIES

#### PART 1. GENERAL SCOPE AND ADMINISTRATION

# 317:30-3-25. Crossovers (coinsurance and deductible) (deductibles, coinsurance, and copays)

- (a) **Medicare Part BA**. Payment is made for Medicare <del>deductible and coinsurance</del> deductibles, coinsurance, and copays on behalf of eligible individuals according to the methodology outlined in the Oklahoma Medicaid State Plan.
- (b) **Medicare Part AB**. Payment is made for Medicare deductible and coinsurance deductibles, coinsurance, and copays on behalf of eligible individuals according to the methodology outlined in the Oklahoma Medicaid State Plan.
- (c) Medicare Advantage Plans. Payment is made for Medicare HMO copayments. For services offered by Medicare Advantage Plans that revert to traditional Medicare type benefits, payment is made for coinsurance and deductibles according to subsection (a) and (b) in this section.
- (c) Medicare Part C (Medicare Advantage Plans). Payment is made for Medicare deductibles, coinsurance, and copays on behalf of eligible individuals according to the methodology outlined in the Oklahoma Medicaid State Plan.