

**MEDICAL ADVISORY COMMITTEE MEETING**  
**Draft Meeting Minutes**  
**July 16, 2009**

**Members attending:** Ms. Bates, Ms. Bellah, Dr. Bourdeau, Dr. Cavallaro, Dr. Crawford, Ms. Patti Davis, Ms. Sherry Davis, Mr. Goforth, Mona Spivey for Drs. Grogg and Ogle, Ms. Harrison, Ms. Holliman, Gerald Duehning for Mr. Machtloff, Dr. Post, Dr. Rhoades, Dr. Rhynes, Dr. Simon, Dr. Strom-Aulgur, Mr. Tallent, Rebecca Moore for Mr. Unruh, Dr. Wells, Mr. Gross for Commissioner White and Ms. Slatton-Hodges, Dr. Wright,

**Members absent:** Ms. Case, Dr. Kasulis, Dr. Woodward, Dr. McNeill,

**I. Welcome, Roll Call, and Public Comment Instructions**

Dr. Crawford welcomed the committee members and called the meeting to order. Roll call established the presence of a quorum and there were no requests for public comment. Dr. Crawford asked the clinicians to stay for the sub-committee. New members, Dr. Rhynes, Dr. Cavallaro and Dr. Strom-Aulgur, were introduced.

**II. Approval of minutes of the May 21, 2009 Medical Advisory Committee Meeting**

Ms. Holliman made the motion to approve the minutes as written. Dr. Wright seconded the motion. Motion passed.

**III. MAC Member Comments/Discussion - None**

**IV. Legislative Update: Nico Gomez, Deputy Chief Executive Officer**

Mr. Gomez reviewed the 2009 Legislative Summary. For more detailed information refer to the MAC information packet. Mr. Gomez explained that one-third (\$300,000,000+) of OHCA's SFY'2010 current budget has been funded with one-time money which will eventually have to be made up in FY2011 or '12.

**V. Financial Report: Carrie Evans, Chief Financial Officer**

Ms. Evans reviewed the Financial Report for the ten months ended April 30, 2009. For more detailed information see MAC information packet. OHCA was notified in June that we had to take a 1.4% cut and in April Oklahoma was notified that we would receive the second tier of unemployment which increases our FMAP to 75.83% .

Ms. Patti Davis asked "if 1/3 of the OHCA budget is funded with one-time money then shouldn't the MAC need to know the budget impact of the rules being voted upon?"

Dr. Mitchell stated that this was certainly within the realm for MAC to know this information and that all future meetings the fiscal impact of each rule will be included.

**VI. FY'2010 Budget Work Program, Juarez McCann, Chief Budget Officer**

Mr. McCann explained that he would review only those categories which had major increases: 8% increase in Medical; (however, SoonerCare Choice had a 52.3% decrease shifting from PCCM to Medical Home) 4% increase in Hospital due to growth & utilization, 26% increase in Physicians due to medical home, Medicare budget neutral rebase, and growth & utilization in the program; 10% increase in Dental due to growth and utilization in program. Expect to spend approximately \$108 million in Insure Oklahoma for SFY'10 For more detailed information see MAC information packet.

**VII. Program Operations & Benefits Update: Becky Pasternik-Ikard, Chief Operating Officer**

Ms. Pasternik-Ikard reported that enrollment from April through June 2009 showed an increase of approximately 10,000. She also reported on the following: SoonerRide, SoonerCare Helpline, DTaP Bonus History, EPSDT Bonus Payments, Dental Benefits, SoonerCare Programs and Insure Oklahoma. For more detail see the MAC information packet.

Dr. Wright asked about ER utilization. Ms. Pasternik-Ikard stated that there were still approximately 39,000 individuals who have not chosen a PCP, but outreach is continuing. There will be an ER Utilization report at the next meeting in September.

**VII. Provider Services Support Update: Paul Keenan, MD, Chief Medical Officer**

Dr. Keenan reviewed the Provider FastFacts for May 2009. For more detail see MAC information packet.

He reported that the Fall training will begin in September and October. SoonerExcel will be paid quarterly and Insure Oklahoma will be counted for SoonerExcel payments. He also reported that on-line provider enrollment will be available by the end of July and the secure website will have 2 new features as of August: Dental History and on-line submission of Medicare crossovers which is approximately 36% of all paper claims

**VIII. ARRA Opportunities and HIT Loan Adoption Program**

Mr. Calabro discussed the handout regarding the ARRA Health Information technology: State EHR Adoption Loan Program. One aspect of this program promotes the use of information technology into medical practices. There is \$2 billion in appropriated funds to support a series of grants, loans, and technical assistance programs to support data exchange at the regional level. For more detailed information see handout.

**IX. Action Items: Brent Johnson, Sr. Policy Specialist**  
**OHCA Initiated**

- 1. 09-04 Self Directed Services: Agency Model** - This rule standardizes the operation of all self directed service programs implemented through the SoonerCare program. The rule sets forth minimum requirements that all self directed service programs must adhere to. Self direction is a method of service delivery that allows members to determine what services and supports they need to live successfully in a home and community based setting. ***TABLED UNTIL FUTURE MEETING***
- 2. 09-10 Metabolic Disorders** - Rules are revised to provide clarification and consistency with practices for coverage for certain nutritional formulas and bars for children diagnosed with certain metabolic disorders. Currently rules only indicate nutritional formula and bars are covered for persons diagnosed with PKU. OHCA practice is that certain nutritional formulas and bars are covered with the diagnosis of certain metabolic disorders and prior authorization. ***BUDGET NEUTRAL***
- 3. 09-19 Member Responsibilities** - The purpose of this rule is to clarify SoonerCare member responsibilities regarding the reporting of third party liability, utilization of private insurance and notification to medical providers of SoonerCare coverage. Additionally, the rule revision provides notification to members of their agreement to allow sharing of medical information, if needed, to State or Federal agencies, medical providers, or an OHCA designee upon their acceptance of medical services provided through the SoonerCare program. ***BUDGET NEUTRAL***

4. **09-28 General Coverage Revisions** - General coverage rules are revised to make OHCA rules consistent with reimbursement practices and make coverage rules more consistent throughout policy. Revisions include allowing separate payment for the insertion and/or implantation of contraceptive devices during a physician office visit, the removal of physician supervision of hemodialysis or peritoneal dialysis as a general coverage exclusion for both adults and children, the clarification of intent in regards to general coverage and general coverage exclusions for both adults and children, the removal of follow-up consultations, the removal of tympanometry as a general coverage exclusion for children, the clarification of covered critical care guidelines, and general policy cleanup as it relates to these sections. **BUDGET NEUTRAL**

5. **09-29 PRTF Exemption** – Behavioral Health rules are revised to allow licensing requirements exceptions for hospitals and residential psychiatric treatment centers that are operated by the state mental hospital. Persons between the ages of 18-21 currently are eligible to receive residential psychiatric treatment services but the licensing agency in Oklahoma is only able to license facilities for persons up to the age of 18. OHCA rules deem that facilities have to be licensed. Title 63 O.S. § 63-1-702 exempts hospitals operated by the federal government, state mental hospitals and community-based structured crisis centers from licensing requirements.

***Ms. Patti Davis asked for OHCA to look at if there would be the ability to expand to non-state owned facilities.***

6. **09-32 DME Clarification** - DME rules are revised to make OHCA rules consistent with reimbursement practices and provide consistency throughout policy. Revisions include clarifying the intent of wheelchair coverage for members residing in a long term care facility or ICF/MR and the elimination of the OHCA Certificate of Medical Necessity (CMN) as a document requirement for requesting prior authorization or determining medical necessity for wheelchairs. **BUDGET NEUTRAL**

7. **09-34 – Observation/Treatment Clarification** – Agency rules are modified to provide clarification for providers billing for observation/treatment services. The modification provides examples of outpatient observation services that are not covered when they are provided. This change provides clarification and education to providers. **BUDGET NEUTRAL**

8. **09-37 Chapter 1 Clean-up** – Rules are revised to remove policy regarding certain federal civil rights requirements, to correct references to federal laws and state statutes, amend policy on open records requirements and include the process for ensuring proper review and approval / disapproval of rate methodologies by the State Plan Amendment Rate Committee (SPARC). **BUDGET NEUTRAL**

9. **09-38 Prenatal Assessment Form** - Rules are being revised to allow flexibility in the types of prenatal assessment forms that may be used. Currently rule specifies that American College of Obstetricians and Gynecologist (ACOG) assessment form must be used. **BUDGET NEUTRAL**

10. **09-43 Irrevocable Burial to 10,000** - SoonerCare eligibility rules are revised to comply with Senate Bill 987 of the 1<sup>st</sup> Session of the 52<sup>nd</sup> Oklahoma Legislature (2009) by increasing certain burial trust account thresholds from \$7,500 to \$10,000 effective November 1, 2009. Oklahoma law provides that a purchaser of a prepaid funeral contract may elect to make the

contract irrevocable. Current rules stipulate that the face value amount in an irrevocable contract cannot exceed \$7,500 plus accrued interest. When the amount is in excess of \$7,500, the individual is ineligible for SoonerCare. Senate Bill 987 increases the irrevocable burial contract limit from \$7,500 to \$10,000 effective November 1, 2009.

Motion to approve rules 2 – 10 made by Dr. Post. Dr. Cavallaro seconded the motion. Motion passed.

IX. New Business - **None**

X. Adjourn

Next Meeting: September 17th