OKLAHOMA HEALTH CARE AUTHORITY REGULARLY SCHEDULED BOARD MEETING December 12, 2013 at 1:00 P.M. Saint Francis Health System Education Center 6161 South Yale Avenue Tulsa, Oklahoma

AGENDA

Items to be presented by Ed McFall, Chairman

- 1. Call to Order / Determination of Quorum
- 2. Action Item Approval of November 14, 2013 OHCA Board Minutes
- 3. Discussion Item Reports to the Board by Board Committees
 - a) Audit/Finance Committee Member Miller
 - b) Strategic Planning Committee Vice-Chairman Armstrong
 - c) Personnel Committee Chairman McFall

Item to be presented by Nico Gomez, Chief Executive Officer

- 4. Discussion Item Chief Executive Officer's Report
 - a) Financial Update Carrie Evans, Chief Financial Officer
 - b) Office Space Update James Smith, Chief of Staff
 - c) Medicaid Director's Update Garth Splinter, State Medicaid Director
 - 1) MyHealth Presentation CEO David Kendrick, MD, MPH of MyHealth Access Network

Item to be presented by Connie Steffee, Reporting & Statistics Director

5. Discussion Item – Presentation of the 2013 Oklahoma Health Care Authority Annual Report

Item to be presented by Chairman McFall

- 6. Discussion Item Proposed Executive Session as Recommended by the Director of Legal Services and Authorized by the Open Meetings Act, 25 Oklahoma Statutes § 307(B) (1), (4), (7) and (9)
 - a) Discussion of Pending Litigation, Investigations and Claims
- 7. Action Item Consideration and Vote upon the Oklahoma Health Care Authority Board Meeting Dates, Times and Locations for Calendar Year 2014
- 8. New Business
- 9. ADJOURNMENT

NEXT BOARD MEETING January 9, 2014 Oklahoma Health Care Authority Ponca Conference Room Oklahoma City, OK

MINUTES OF A REGULARLY SCHEDULED BOARD MEETING OF THE HEALTH CARE AUTHORITY BOARD November 14, 2013 Held at Oklahoma Health Care Authority Oklahoma City, Oklahoma

Manner and Time of Notice of Meeting: A statutorily required public meeting notice was placed on the front door of the Oklahoma Health Care Authority on November 13, 2013, 10:30 a.m. Advance public meeting notice is provided to the Oklahoma Secretary of State. In addition to the posting of the statutory public notice, the agency placed its agenda on its website on November 12, 2013, 4:30 p.m.

Pursuant to a roll call of the members, a quorum was declared to be present, and Chairman McFall called the meeting to order at 1:02 p.m.

BOARD MEMBERS PRESENT:

Chairman McFall, Vice-Chairman Armstrong, Member Miller, Member Bryant, Member Nuttle, Member Robison, Member McVay

OTHERS PRESENT:

David Dude, American Cancer Society Debbie Spaeth, Quest MHSA Jeannie Vigneron, OHCA Lisa Spain, HP Charles Brodt, HP Lisa Gifford, OHCA John Guthrie, OHCA Ashley Neel, OMES Robert Dorrell. BCBS OK Traylor Rains, ODMHSAS Trevlyn Cross, Chickasaw Nation Della Gregg, OHCA

OTHERS PRESENT:

Della Gregg, OHCA Will Widman, HP Mary Brinkley, Leading Age OK Michelle Ho, OHCA Ziva Branstetter, Tulsa World Lia Tepker, OMES

DISCUSSION AND POSSIBLE VOTE ON APPROVAL OF BOARD MINUTES OF THE REGULARY SCHEDULED BOARD MEETING HELD OCTOBER 10, 2013.

The Board routinely reviews and approves a synopsis of all its meetings. The full-length recordings of the meetings of the Board are retained at the Board Offices and may be reviewed upon written request.

MOTION:

Vice-Chairman Armstrong moved for approval of the October 10, 2013 board meeting minutes as published. The motion was seconded by Member Robison.

FOR THE MOTION:

Chairman McFall, Member Miller, Member Bryant, Member Nuttle, Member McVay

ITEM 3 / REPORTS TO THE BOARD BY BOARD COMMITTEES

Audit/Finance Committee

Member Miller stated that the Audit/Finance committee met and that they also met earlier in the month in which a list of budget reduction possibilities was reviewed. News from the federal government regarding the reduction in state matching that will come October 1st of next year seemed bleak but our staff has been working diligently in working on this issue and noted that he is encouraged after today's committee meeting. Member Miller noted that this is not just a Medicaid issue, but one that affects many programs and efforts and services that the state supplies, along with a societal problem as society changes. There is more understanding coming to light as more people become involved.

Strategic Planning Committee

Vice-Chairman Armstrong stated that the committee did meet and had a discussion relative to all of the activity that is being engaged in by staff. OHCA is trying to meet with and discuss as much as we can with all of the individuals that are involved at the state and federal level. He complimented staff for their effort and noted that we have a lot of work ahead of us and hopefully have some people join us at the table to face the common problems we have on our budget.

Legislative Committee

Chairman McFall stated that the committee met noted that he attended the legislative meeting in Tulsa last week and was a very productive meeting. Member of the house and senate attended the meeting and heard a presentation from Andy Cohen regarding how this program is being run and we are interacting with other programs. There are more meetings next week with the legislators to talk about what OHCA can do to work out our issues. He encouraged the board to attend any meetings they can.

ITEM 4 / CHIEF EXECUTIVE OFFICER'S REPORT

Nico Gomez, Chief Executive Officer

4a. ALL STARS INTRODUCTION

Nico Gomez, Chief Executive Officer

Mr. Gomez introduced OHCA Employee All-Stars for August through October 2013 as well as the Supervisor of the Quarter through his direct reports.

Dr. Splinter presented the August All Star – Tiffany Beck, Research Analyst, Electronic Health Operations Lisa Gifford presented the September All Star – Michelle Ho, DP Analyst/Planning Specialist III, Contractor Systems Carrie Evans presented the October All Star – Rob Guthrie, Finance Analyst, Third Party Liability Becky Pasternik-Ikard presented the Supervisor of the Quarter – LaDawn Fulgenzi, Manager II, Provider Services

4b. FINANCIAL UPDATE

Carrie Evans, Chief Financial Officer

Ms. Evans reported on the financial transactions through the month of September with an \$18.7 million state dollar variance that is up \$16 million from last month, with the majority of that being \$15.6 in an unanticipated federal revenue. The unanticipated federal revenue involves the federal government closing out some various old accounts that have. In these accounts Oklahoma Medicaid is owed some federal reimbursement. She noted that we continue to run under budget for our program spending, we grew for a total of \$1.4 million for our program variance. We continue to be slightly under in administration and our revenue's continue to be slightly under. Ms. Evans predicted to be slightly under in Medicaid spending and administration for the month of October. For more detailed information, see Item 4b in the board packet.

4c. MEDICAID DIRECTOR'S UPDATE

Garth Splinter, State Medicaid Director

Dr. Splinter provided a report that included a report on the number of enrollees in the Medicaid Program, a historical analysis of enrollees in Medicaid or Soonercare, a report on the number of providers and a summary of the Electronic Health Records incentive program which provides financial support to increase the medical data collection infrastructure.

4c1. COMPREHENSIVE PRIMARY CARE PRESENTATION

Melody Anthony, Provider Services Director

Ms. Anthony presented the Comprehensive Primary Care initiative (CPCi). She noted that we were chosen for this grant with CMS, Blue Cross and Blue Shield and Community Care. For more detailed information, see Item 4c.1 in the board packet.

4d. SFY 15 Budget Request Update

Nico Gomez, Chief Executive Officer

Mr. Gomez noted that it is our responsibility to advise appropriators at the state capitol what it takes to fund this program. We also have a responsibility to taxpayers who fund the program to look for efficiencies. We heard last month about the federal matching rate going down. Mr. Gomez noted that if we are short any money on the first three items of the budget, we have to find a way to balance the budget for next fiscal year. The one time federal funding that Ms. Evans mentioned will be helpful, but Mr. Gomez believes it's our job to do everything we can to reduce what we need to in order to operate the program. As the budget is today, it will take another \$149 million above our current base. Mr. Gomez stated that he won't let the problem define how we react but use it to find a solution. He noted that we can't do this alone, and will need help from the board. He would like to start meeting with our provider partners to present our current budget situation and find efficiencies. Mr. Gomez feels very confident that our appropriators are going to very diligent about doing all they can to me our requests but we will do everything we can also. For more detailed information, please see Item 4.d in the board packet.

ITEM 5 / SOONERCARE CHOICE PROGRAM INDEPENDENT EVALUATION BY PACIFIC HEALTH POLICY GROUP

Becky Pasternik-Ikard, Deputy State Medicaid Director

Ms. Pasternik-Ikard presented the SoonerCare Choice Program Independent Evaluation by Andrew Cohen at Pacific Health Policy Group. For more detailed information, please see Item 5 in the board packet.

ITEM 6 / ANNOUNCEMENTS OF CONFLICTS OF INTEREST PANEL RECOMMENDATIONS FOR ALL ACTION ITEMS Howard Pallotta, General Counsel

There were no recommendations regarding conflicts.

ITEM 7 / CONSIDERATION AND VOTE UPON THE RECOMMENDATIONS OF THE STATE PLAN AMENDMENT RATE COMMITTEE.

Cindy Roberts, Chairperson of the State Plan Amendment Rate Committee

- 7. Action Items Consideration and Vote Upon the Recommendations of the State Plan Amendment Rate Committee.
 - a) Consideration and Vote upon Recommendation to alter rate methodology for Psychiatric Residential Treatment Facility Reimbursement. The methodology change would create an *add-on payment for PRTF's*

that serve non-verbal children. This method change alters the rate paid only to non-verbal children served in facilities.

- b) Consideration and Vote upon Recommendation to alter the rates paid for Anesthesiologist Services as follows:
 - (1) an increase for the conversion factor from \$31.48/\$31.50 to \$39.00 for CPT codes 00100-001966 and 01968 to 01999,
 - (2) an increase to the flat rate under CPT 01967 from \$411.19 to \$550.00.

MOTION:Member Miller moved for approval of Item 7a as presented. The
motion was seconded by Member McVay.FOR THE MOTION:Chairman McFall, Vice-Chairman Armstrong, Member Robison,
Member Nuttle, Member BryantMOTION:Vice-Chairman Armstrong moved for approval of Item 7.b-1 and
7.b-2 as presented. The motion was seconded by Member Nuttle.FOR THE MOTION:Chairman McFall, Member Miller, Member Robison, Member
Member Nuttle.

ITEM 8 / PROPOSED EXECUTIVE SESSION AS RECOMMENDED BY THE DIRECTOR OF LEGAL SERVICES AND AUTHORIZED BY THE OPEN MEETINGS ACT, 25 OKLAHOMA STATUTES §307(B) (1), (4), AND (7). Howard Pallotta, General Counsel

Chairman McFall entertained a motion to go into Executive Session at this time.

MOTION: Vice-Chairman Armstrong moved for approval to go into Executive Session. The motion was seconded by Member Bryant.

FOR THE MOTION:

Chairman McFall, Vice-Chairman Armstrong, Member Miller, Member Nuttle, Member McVay

- 9. Discussion Item Proposed Executive Session as Recommended by the Director of Legal Services and Authorized by the Open Meetings Act, 25 Oklahoma Statutes § 307(B) (1), (4), (7) and (9)
 - a) Discussion of Pending Litigation, Investigations and Claims

ITEM 9 / NEW BUSINESS

There was no new business.

ITEM 10 / ADJOURNMENT

MOTION:

FOR THE MOTION:

Vice-Chairman Armstrong moved for adjournment. The motion was seconded by Member McVay.

Chairman McFall, Member Miller, Member Nuttle, Member Bryant, Member Robison

Meeting adjourned at 2:49 p.m., 11/14/2013

NEXT BOARD MEETING December 12, 2013 Saint Francis Health System Tulsa, Oklahoma

Lindsey Bateman <u>Board Secretary</u>

Minutes Approved: _____

Initials:_____



FINANCIAL REPORT For the Four Months Ended October 31, 2013 Submitted to the CEO & Board

- Revenues for OHCA through October, accounting for receivables, were **\$1,399,821,270** or **.6% over** budget.
- Expenditures for OHCA, accounting for encumbrances, were **\$1,342,462,737 or 1% under** budget.
- The state dollar budget variance through October is **\$22,753,652** positive.
- The budget variance is primarily attributable to the following (in millions):

Expenditures:	
Medicaid Program Variance	3.5
Administration	2.9
Revenues:	
Unanticipated Revenue	15.7
Drug Rebate	1.0
Taxes and Fees	(.2)
Overpayments/Settlements	(.1)
Total FY 14 Variance	\$ 22.8

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 Fiscal Year 2014, For the Four Months Ended October 31, 2013

ENUES	FY14 Budget YTD		FY14 Actual YTD		Variance	% Over/ (Under)
State Appropriations		\$	326,528,934	\$	-	0.0
Federal Funds	685,911,416	Ψ	676,906,697	Ψ	(9,004,720)	(1.3)
Tobacco Tax Collections	19,065,838		18,748,201		(317,637)	(1.7)
Quality of Care Collections	27,079,588		27,079,588		(017,007)	0.0
Prior Year Carryover	41,811,007		41,811,007		-	0.0
Unanticipated Revenue	-		15,683,810		15,683,810	100.0
Federal Deferral - Interest	80,224		80,224		-	0.0
Drug Rebates	77,066,170		79,711,937		2,645,767	3.4
Medical Refunds	16,186,421		16,080,863		(105,558)	(0.7)
SHOPP	192,864,246		192,864,246		-	0.0
Other Revenues	4,211,731		4,325,763		114,032	2.7
TOTAL REVENUES	\$ 1,390,805,576	\$	1,399,821,270	\$	9,015,695	0.6
	FY14		FY14			% (Over
NDITURES	Budget YTD		Actual YTD		Variance	Under
ADMINISTRATION - OPERATING	\$ 17,623,077	\$	15,538,833	\$	2,084,244	11.8
ADMINISTRATION - CONTRACTS	\$ 36,500,633		31,688,157	\$	4,812,476	13.2
MEDICAID PROGRAMS						
Managed Care:						
SoonerCare Choice	11,978,056		11,305,665		672,391	5.6
Acute Fee for Service Payments:						
Hospital Services	322,279,753		321,840,101		439,653	0.1
Behavioral Health	7,567,302		7,429,377		137,925	1.8
Physicians	171,990,909		171,104,780		886,129	0.5
Dentists	50,823,700		50,716,813		106,887	0.2
Other Practitioners	15,448,186		15,261,902		186,284	1.2
Home Health Care	7,691,421		7,195,205		496,216	6.5
Lab & Radiology	22,635,300		21,918,410		716,890	3.2
Medical Supplies	17,184,477		16,232,099		952,378	5.5
Ambulatory/Clinics	40,109,296		39,614,454		494,842	1.2
Prescription Drugs	142,361,998		142,040,107		321,892	0.2
OHCA TFC	711,098		640,025		71,073	0.0
	711,000		040,020		11,075	0.0
Other Payments: Nursing Facilities	197,072,688		196,791,687		281,001	0.1
ICF-MR Private	20,692,681		20,361,110		331,571	1.6
Medicare Buy-In	45,282,329		45,172,200		110,129	0.2
Transportation	21,187,124		20,849,320		337,805	1.6
MFP-OHCA	561,859		383,421		178,438	0.0
EHR-Incentive Payments	4,333,083		4,333,083		170,430	0.0
Part D Phase-In Contribution	26,140,462		26,110,110		30,352	0.0
SHOPP payments	175,935,878		175,935,878		- 50,552	0.0
Total OHCA Medical Programs	1,301,987,602		1,295,235,747		6,751,855	0.5
OHCA Non-Title XIX Medical Payments	89,382		-		89,382	0.0

OKLAHOMA HEALTH CARE AUTHORITY Total Medicaid Program Expenditures by Source of State Funds Fiscal Year 2014, For the Four Months Ended October 31, 2013

		Health Care			Medicaid	BCC	Other State
Category of Service	Total	Authority	Care Fund	HEEIA	Program Fund	Revolving Fund	Agencies
SoonerCare Choice	\$ 11,455,362	\$ 11,299,727	\$-	\$ 149,697	\$-	\$ 5,938	\$-
Inpatient Acute Care	231,905,433	208,059,481	162,229	3,836,052	16,913,900	801,674	2,132,098
Outpatient Acute Care	99,815,995	94,320,855	13,868	3,913,178	-	1,568,095	_, · · _ , · ·
Behavioral Health - Inpatient	8,508,503	4,496,559	-	226,925	-	, ,	3,785,019
Behavioral Health - Psychiatrist	2,932,818	2,932,818	-	-	-	-	-
Behavioral Health - Outpatient	8,713,989	-	-	-	-	-	8,713,989
Behavioral Health Facility- Rehab	92,883,453	-	-	-	-	36,319	92,883,453
Behavioral Health - Case Management	3,233,125	-	-	-	-	-	3,233,125
Behavioral Health - PRTF	32,642,178	-	-	-	-	-	32,642,178
Residential Behavioral Management	6,888,301	-	-	-	-	-	6,888,301
Targeted Case Management	21,887,234	-	-	-	-	-	21,887,234
Therapeutic Foster Care	640,025	640,025	-	-	-	-	-
Physicians	191,252,409	146,299,126	19,367	5,067,849	22,633,899	2,152,388	15,079,781
Dentists	50,752,007	48,049,866	-	35,194	2,657,784	9,164	-
Mid Level Practitioners	1,300,076	1,272,180	-	26,887	-	1,009	-
Other Practitioners	14,093,474	13,490,616	148,788	104,761	345,269	4,041	-
Home Health Care	7,195,238	7,187,891	-	33	-	7,314	-
Lab & Radiology	23,274,419	21,670,903	-	1,356,009	-	247,508	-
Medical Supplies	16,481,361	15,309,413	903,845	249,261	-	18,841	-
Clinic Services	42,044,775	36,235,169	-	529,931	-	101,147	5,178,527
Ambulatory Surgery Centers	3,462,251	3,270,613	-	184,114	-	7,525	-
Personal Care Services	4,686,633	-	-	-	-	-	4,686,633
Nursing Facilities	196,791,687	110,953,546	72,029,581	-	13,800,237	8,323	-
Transportation	20,758,911	18,781,501	889,680	-	1,067,496	20,234	-
GME/IME/DME	58,227,241	-	-	-	-	-	58,227,241
ICF/MR Private	20,361,110	16,321,950	3,754,120	-	285,040	-	-
ICF/MR Public	16,722,293	-	-	-	-	-	16,722,293
CMS Payments	71,282,310	71,007,614	274,696	-	-	-	
Prescription Drugs	148,968,363	125,661,917	-	6,928,257	15,745,682	632,507	-
Miscellaneous Medical Payments	90,488	86,790	-	79	-	3,619	-
Home and Community Based Waiver	59,026,871	-	-	-	-	-	59,026,871
Homeward Bound Waiver	31,156,965	-	-	-	-	-	31,156,965
Money Follows the Person	2,230,980	383,421	-	-	-	-	1,847,559
In-Home Support Waiver	8,309,390	-	-	-	-	-	8,309,390
ADvantage Waiver	63,712,483	-	-	-	-	-	63,712,483
Family Planning/Family Planning Waiver	4,437,792	-	-	-	-	-	4,437,792
Premium Assistance*	16,552,754	-	-	16,552,754		-	-
EHR Incentive Payments	4,333,083	4,333,083	-	-	-	-	-
SHOPP Payments**	175,935,878	175,935,878	-	-	-	-	-
Total Medicaid Expenditures	\$ 1,774,947,657	\$ 962,065,064	\$ 78,196,173	\$ 39,160,980	\$ 73,449,308	\$ 5,625,643	\$ 440,550,930

* Includes \$16,431,935 paid out of Fund 245 and **\$175,935,878 paid out of Fund 205

OKLAHOMA HEALTH CARE AUTHORITY Summary of Revenues & Expenditures: Other State Agencies Fiscal Year 2014, For the Four Months Ended October 31, 2013

REVENUE Revenues from Other State Agencies Federal Funds		FY14 Actual YTD
Federal Funds	\$	176,684,159
	Φ	283,496,657
TOTAL REVENUES	\$	460,180,816
EXPENDITURES		Actual YTD
Department of Human Services	¢	50 006 971
Home and Community Based Waiver Money Follows the Person	\$	59,026,871 1,847,559
Homeward Bound Waiver		31,156,965
In-Home Support Waivers		8,309,390
ADvantage Waiver		63,712,483
ICF/MR Public		16,722,293
Personal Care		4,686,633
Residential Behavioral Management		5,078,405
Targeted Case Management		16,759,044
Total Department of Human Services		207,299,641
State Employees Physician Payment		
Physician Payments		15,079,781
Total State Employees Physician Payment		15,079,781
Education Payments		
Graduate Medical Education		21,422,222
Graduate Medical Education - PMTC		1,655,830
Indirect Medical Education		31,088,706
Direct Medical Education		4,060,483
Total Education Payments		58,227,241
Office of Juvenile Affairs		
Targeted Case Management		1,103,736
Residential Behavioral Management		1,809,896
Total Office of Juvenile Affairs		2,913,631
Department of Mental Health		
Case Management		3,233,125
Inpatient Psych FS		3,785,019
Outpatient		8,713,989
PRTF		32,642,178
Rehab		92,883,453
Total Department of Mental Health		141,257,765
State Department of Health		
Children's First		813,170
		989,709
Sooner Start		0 405 440
Sooner Start Early Intervention		2,125,110
Early Intervention EPSDT Clinic		753,029
Early Intervention EPSDT Clinic Family Planning		753,029 (108,980
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver		753,029 (108,980 4,535,527
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic		753,029 (108,980 4,535,527 19,942
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health		753,029 (108,980 4,535,527 19,942
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments		753,029 (108,980 4,535,527 19,942 9,127,506
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic		753,029 (108,980 4,535,527 <u>19,942</u> 9,127,506 312,141
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver		753,029 (108,980 4,535,527 <u>19,942</u> 9,127,506 312,141 11,245
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments		753,029 (108,980) 4,535,527 19,942 9,127,506 312,141 11,245 323,386
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments State Department of Education		753,029 (108,980) 4,535,527 19,942 9,127,506 312,141 11,245 323,386 39,875
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments State Department of Education Public Schools		(108,980) 4,535,527 19,942 9,127,506 312,141 11,245
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments State Department of Education Public Schools Medicare DRG Limit		753,029 (108,980) 4,535,527 19,942 9,127,506 312,141 11,245 323,386 39,875 1,046,300
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments State Department of Education Public Schools Medicare DRG Limit Native American Tribal Agreements		753,029 (108,980 4,535,527 19,942 9,127,506 312,141 11,245 323,386 39,875 1,046,300 - 3,103,706
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments State Department of Education Public Schools Medicare DRG Limit		753,029 (108,980) 4,535,527 19,942 9,127,506 312,141 11,245 323,386 39,875 1,046,300 - 3,103,706 682,688
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments State Department of Education Public Schools Medicare DRG Limit Native American Tribal Agreements Department of Corrections JD McCarty		753,029 (108,980 4,535,527 19,942 9,127,506 312,141 11,245 323,386 39,875 1,046,300 - 3,103,706 682,688 1,449,409
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments State Department of Education Public Schools Medicare DRG Limit Native American Tribal Agreements Department of Corrections JD McCarty	 	753,029 (108,980) 4,535,527 19,942 9,127,506 312,141 11,245 323,386 39,875 1,046,300 - 3,103,706 682,688 1,449,409 440,550,930
Early Intervention EPSDT Clinic Family Planning Family Planning Waiver Maternity Clinic Total Department of Health County Health Departments EPSDT Clinic Family Planning Waiver Total County Health Departments State Department of Education Public Schools Medicare DRG Limit Native American Tribal Agreements Department of Corrections JD McCarty	 \$	753,029 (108,980) 4,535,527 19,942 9,127,506 312,141 11,245 323,386 39,875 1,046,300 - 3,103,706 682,688

OKLAHOMA HEALTH CARE AUTHORITY SUMMARY OF REVENUES & EXPENDITURES: Fund 205: Supplemental Hospital Offset Payment Program Fund Fiscal Year 2014, For the Four Months Ended October 31, 2013

REVENUES	FY 14 Revenue	
SHOPP Assessment Fee	\$ 80,188,5	78
Federal Draws	112,617,0	51
Interest	57,0	75
Penalties	1,5	42
State Appropriations	(15,200,0	00)
TOTAL REVENUES	\$ 177,664,2	46

EXPENDITURES	Quarter	Quarter	E	FY 14 Expenditures
Program Costs: Hospital - Inpatient Care Hospital -Outpatient Care Psychiatric Facilities-Inpatient Rehabilitation Facilities-Inpatient Total OHCA Program Costs	7/1/13 - 9/30/13 76,710,371 2,748,407 5,785,055 248,410 85,492,242	10/1/13 - 12/31/13 81,236,442 2,815,812 6,128,236 263,146 90,443,636	\$ \$ \$ \$	157,946,813 5,564,219 11,913,291 511,556 175,935,878
Total Expenditures			\$	175,935,878

CASH BALANCE

1,728,368

\$

OKLAHOMA HEALTH CARE AUTHORITY SUMMARY OF REVENUES & EXPENDITURES: Fund 230: Nursing Facility Quality of Care Fund Fiscal Year 2014, For the Four Months Ended October 31, 2013

REVENUES	Total Revenue	State Share
Quality of Care Assessment	\$ 26,128,720 \$	26,128,720
Interest Earned	15,630	15,630
TOTAL REVENUES	\$ 26,144,350 \$	26,144,350

EXPENDITURES	٦	FY 14 Fotal \$ YTD	5	FY 14 State \$ YTD	S	Total State \$ Cost
Program Costs						
NF Rate Adjustment	\$	70,785,797	\$	25,482,887		
Eyeglasses and Dentures		96,203		34,633		
Personal Allowance Increase		1,147,580		413,129		
Coverage for DME and supplies		903,845		325,384		
Coverage of QMB's		344,252		123,931		
Part D Phase-In		274,696		274,696		
ICF/MR Rate Adjustment		1,881,088		677,192		
Acute/MR Adjustments		1,873,031		674,291		
NET - Soonerride		889,680		320,285		
Total Program Costs	\$	78,196,173	\$	28,326,428	\$	28,326,428
Administration						
OHCA Administration Costs	\$	144,593	\$	72,296		
PHBV - QOC Exp	•	,		, -		
OSDH-NF Inspectors		-		-		
Mike Fine, CPA		-		-		
Total Administration Costs	\$	144,593	\$	72,296	\$	72,296
Total Quality of Care Fee Costs	\$	78,340,765	\$	28,398,724		
TOTAL STATE SHARE OF COSTS					\$	28,398,724

Note: Expenditure amounts are for informational purposes only. Actual payments are made from Fund 340. Revenues deposited into the fund are tranferred 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 Fiscal Year 2014, For the Four Months Ended October 31, 2013

REVENUES	FY 13 Carryover	FY 14 Revenue	Total Revenue
Prior Year Balance	\$ 10,427,85	50\$-	\$ 3,389,402
State Appropriations			(3,000,000)
Tobacco Tax Collections		- 15,419,680	15,419,680
Interest Income		- 81,034	81,034
Federal Draws	176,99	6 10,216,116	10,216,116
All Kids Act	(6,883,93	32) 99,572	99,572
TOTAL REVENUES	\$ 3,720,91	4 \$ 25,816,402	\$ 26,106,232

			FY 13		FY 14		
EXPENDITURES		Ex	penditures	E	xpenditures		Total \$ YTD
Program Costs:							
	Employer Sponsored Insu	rance	;	\$	16,206,269	\$	16,206,269
	College Students				120,819		120,819
	All Kids Act				225,665		225,665
Individual Plan							
	SoonerCare Choice			\$	143,634	\$	51,708
	Inpatient Hospital			Ψ	3,826,096	Ψ	1,377,394
	Outpatient Hospital				3,844,282		1,383,942
	BH - Inpatient Services-DF	RG			218,637		78,709
	BH -Psychiatrist	.0			210,007		-
	Physicians				5,012,252		1,804,411
	Dentists				24,255		8,732
	Mid Level Practitioner				26,501		9,540
	Other Practitioners				101,164		36,419
	Home Health				33		12
	Lab and Radiology				1,340,300		482,508
	Medical Supplies				246,554		88,759
	Clinic Services				519,309		186,951
	Ambulatory Surgery Cente	er			183,745		66,148
	Prescription Drugs				6,858,350		2,469,006
	Miscellaneous Medical				79		79
	Premiums Collected				-		(749,609)
Total Individual P	lan			\$	22,345,189	\$	7,294,709
	College Students-Servic	e Cos	sts	\$	212,303	\$	76,429
	All Kids Act- Service Cos			\$	50,735	\$	18,265
	•			•		•	
Total OHCA Progr	am Costs			\$	39,160,980	\$	23,942,156
Administrative Co	sts						
	Salaries	\$	7,360	\$	362,458	\$	369,818
	Operating Costs		56,861		197,242		254,103
	Health Dept-Postponing		-		-		-
	Contract - HP		267,291		327,550		594,841
Total Administrati	ve Costs	\$	331,512	\$	887,250	\$	1,218,761
Total Expenditure	S					\$	25,160,918
•						- T	.,
NET CASH BALAN	NCE	\$	3,389,402			\$	945,314

OKLAHOMA HEALTH CARE AUTHORITY SUMMARY OF REVENUES & EXPENDITURES:

Fund 250: Belle Maxine Hilliard Breast and Cervical Cancer Treatment Revolving Fund Fiscal Year 2014, For the Four Months Ended October 31, 2013

REVENUES	FY 14 Revenue	State Share		
Tobacco Tax Collections	\$ 307,752	\$	307,752	
TOTAL REVENUES	\$ 307,752	\$	307,752	

EXPENDITURES	То	FY 14 otal \$ YTD	S	FY 14 state \$ YTD	St	Total ate \$ Cost
Program Costs						
SoonerCare Choice	\$	5,938	\$	1,496		
Inpatient Hospital		801,674		202,022		
Outpatient Hospital		1,568,095		395,160		
Inpatient Services-DRG		-		-		
Psychiatrist		-		-		
TFC-OHCA		-		-		
Nursing Facility		8,323		2,097		
Physicians		2,152,388		542,402		
Dentists		9,164		2,309		
Mid-level Practitioner		1,009		254		
Other Practitioners		4,041		1,018		
Home Health		7,314		1,843		
Lab & Radiology		247,508		62,372		
Medical Supplies		18,841		4,748		
Clinic Services		101,147		25,489		
Ambulatory Surgery Center		7,525		1,896		
Prescription Drugs		632,507		159,392		
Transportation		20,234		5,099		
Miscellaneous Medical		3,619		912		
Total OHCA Program Costs	\$	5,589,324	\$	1,408,510		
OSA DMHSAS Rehab	\$	36,319	\$	9,152		
Total Medicaid Program Costs	\$	5,625,643	\$	1,417,662		
TOTAL STATE SHARE OF COSTS					\$	1,417,662

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 Programs

October 2013 Data for December 2013 Board Meeting

Delivery System	Monthly Enrollment Average SFY2013	Enrollment October 2013	Total Expenditures October 2013	Average Dollars Pe Member Per Month October 2013
SoonerCare Choice Patient-Centered Medical Home	513,315	553,455	\$158,442,378	
Lower Cost (Children/Parents; Other)		507,006	\$115,702,140	\$228
Higher Cost (Aged, Blind or Disabled; TEFRA; BCC)		46,449	\$42,740,238	\$920
SoonerCare Traditional	217,231	194,746	\$233,715,950	
Lower Cost (Children/Parents; Other)		86,674	\$62,871,930	\$725
Higher Cost (Aged, Blind or Disabled; TEFRA; BCC & HCBS Waiver)		108,072	\$170,844,019	\$1,581
SoonerPlan	48,346	52,329	\$1,091,905	\$21
Insure Oklahoma	30,202	28,099	\$10,442,335	
Employer-Sponsored Insurance	16,644	15,295	\$4,227,381	\$276
Individual Plan	13,559	12,804	\$6,214,955	\$485

The enrollment totals above include all members enrolled during the report month; therefore, some members may not have expenditure data. Custody expenditures are excluded. Non-member specific expenditures of \$161,154,800 are excluded.

Net Enrollee Count Change from	1,210
Previous Month Total	1,210

143	tempers that have no	t been entoned in	the past o month
	Monthly Average SFY2013	Enrolled October 2013	FACILITY PER MEMBER PER MONTH
Long-Term Care Members	15,674	15,473	\$4,239

New Enrollees

Dual Enrollees & Long-Term Care Members (subset of data above)

Medicare and SoonerCare		Monthly Average SFY2013	Enrolled October 2013
Dual Enrollees		108,514	109,792
	Child Adult	201 108,313	205 109,587

		Monthly Average SFY2013	Enrolled October 2013	FACILITY PER MEMBER PER MONTH
Long-Term Care Members		15,674	15,473	\$4,239
	Child Adult	64 15,610	68 15,405	

Child is defined as an individual under the age of 21.

SOONERCARE CONTRACTED PROVIDER INFORMATION

Provider Counts		Monthly Average SFY2013	Enrolled October 2013
Total Providers		36,948	38,111
	In-State Out-of-State	28,587 8,362	29,120 8,991

Provider Network includes providers who are contracted to provide health care services by locations, programs, types, and specialties. Providers are being counted multiple times if they have multiple locations, programs, types, and specialties.

Program	% of Capacity Used
SoonerCare Choice	45%
SoonerCare Choice I/T/U	17%
Insure Oklahoma IP	3%

	In-S	tate	Totals		
Select Provider Type Counts	Monthly Average SFY2013	Enrolled October 2013*	Monthly Average SFY2013	Enrolled October 2013	
Physician	7,859	8,466	12,432	13,408	
Pharmacy	901	924	1,208	1,250	
Mental Health Provider**	5,811	4,664	5,880	4,699	
Dentist**	1,205	933	1,380	1,026	
Hospital**	194	182	923	627	
Optometrist	578	562	612	590	
Extended Care Facility	362	357	362	357	
	Above counts are for	specific provider typ	es and are not all-i	nclusive.	
Total Primary Care Providers***	4,997	5,463	6,541	7,129	
Patient-Centered Medical Home	1,935	2,139	1,985	2,232	

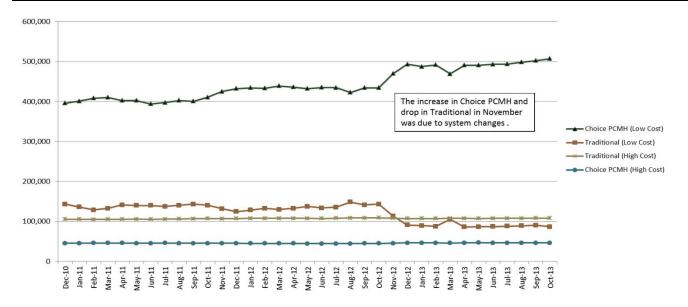
19,095

*Items shaded above represent a 10% or more increase (green) or decrease (red) from the previous fiscal year's average.

**Decrease in current month's count is due to contract renewal period which is typical during all renewal periods. Hospitals renewal started in March 2013, renewals for Mental Health Providers started in June 2013 and Dentist renewals started in October 2013.

SoonerCare Programs

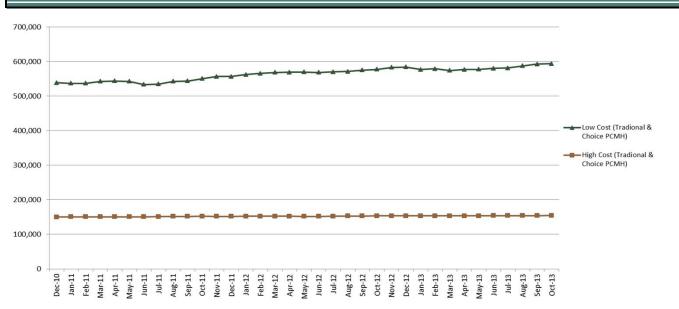
SOONERCARE ENROLLMENT TRENDS - TRADITIONAL & CHOICE PATIENT-CENTERED MEDICAL HOME



Low Cost includes members qualified under Children/Parents (TANF) and Other (DDSD State, PKU, Q1, Refugee, SLMB & STBS). High Cost members qualify under Aged, Blind or Disabled, Oklahoma Cares, TEFRA or a Home and Community-Based Services waiver.

The system changes made newborn enrollment day specific like other Choice members. Before the change, newborns were not enrolled in Choice until the following month if they were enrolled after the 15th of the month. Now there is no delay and they are enrolled in Choice the same month like the newborns enrolled before the 15th of the month and other Choice members. Some members also had delayed enrollment in Choice after selecting a PMP and were not being moved to Choice until the following month. This has also been changed so they go into Choice the following day instead of a month later.

SOONERCARE ENROLLMENT TRENDS - LOW COST & HIGH COST



Low Cost includes members qualified under Children/Parents (TANF) and Other (DDSD State, PKU, Q1, Refugee, SLMB & STBS). High Cost members qualify under Aged, Blind or Disabled, Oklahoma Cares, TEFRA or a Home and Community-Based Services waiver.

PROPOSED OHCA BOARD MEETINGS/LOCATIONS - 2014

JANUARY								
S	М	Т	W	T	F	S		
			1	2	3	4		
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	FEBRUARY							
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	MARCH								
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	APRIL							
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MAY								
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JUNE								
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29	30							

*Dates in Red are Proposed Board Dates

January 9, 2014 • 1:00 pm

Oklahoma Health Care Authority 2401 NW 23rd, Suite 1-A Oklahoma City, Oklahoma

February 13, 2014 • 1:00 pm

Oklahoma Health Care Authority 2401 NW 23rd, Suite 1-A Oklahoma City, Oklahoma

March 27, 2014 • 1:00 pm

Oklahoma Health Care Authority 2401 NW 23rd, Suite 1-A Oklahoma City, Oklahoma

April 10, 2014 • Cancelled

May 8, 2014 • 1:00 pm

Oklahoma Health Care Authority 2401 NW 23rd, Suite 1-A Oklahoma City, Oklahoma

June 26, 2014 • 1:00 pm

Oklahoma Health Care Authority 2401 NW 23rd, Suite 1-A Oklahoma City, Oklahoma

July 10, 2014 • Cancelled

August 20, 2014 • Board Meeting • 4:00 pm August Retreat 21 & 22, 2014 • 8:30 am Tulsa, Oklahoma

September 11, 2014 • 1:00 pm

Oklahoma Health Care Authority 2401 NW 23rd, Suite 1-A Oklahoma City, Oklahoma

October 9, 2014 • 1:00 pm

Oklahoma Health Care Authority 2401 NW 23rd, Suite 1-A Oklahoma City, Oklahoma

November 13, 2014 • 1:00 pm

Oklahoma Health Care Authority 2401 NW 23rd, Suite 1-A Oklahoma City, Oklahoma

December 11, 2014 • 1:00 pm Tulsa

JULY							
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SEPTEMBER								
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OCTOBER								
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NOVEMBER								
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DECEMBER									
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