

MINUTES OF A REGULARLY SCHEDULED BOARD MEETING
OF THE OKLAHOMA HEALTH CARE AUTHORITY BOARD
Held at Comanche County Memorial Hospital
Lawton, Oklahoma
September 13, 2007
1:00PM

Manner and Time of Notice of Meeting: A public notice was placed on the front door of the Oklahoma Health Care Authority on September 10, 2007.

Pursuant to a roll call of the members, a quorum was declared to be present, and Chairman Roggow called the meeting to order at 1:00pm.

BOARD MEMBERS PRESENT:

Member Roberts, Vice-Chairman
Hoffman, Member Miller, Member
Langenkamp, Governor Anoatubby,
Member McFall, and Chairman Roggow

OTHERS PRESENT:

Becky Mantle, OUMC
Bill Lance, Chickasaw Nation
Al Terrill, CC/HMO
Addi AbuelShar, CCMH
Tanya Case, CCMH
Randy Siegler, CCMH
Terrie Fritz, OHCA

Member McFall introduced Randy Seigler, CEO of Comanche County Memorial Hospital welcomed OHCA to Lawton. Randy Seigler introduced Tanya Case, Case Manager, Managed Care, and Member McFall introduced Dr. Addi AbuelShar.

MEDICAID DIRECTOR'S UPDATE

Lynn Mitchell, M.D., Director of Medicaid/Medical Services

Dr. Mitchell stated that under tab 2a is the routine reports and the enrollment numbers. This is the fifth month that we have stayed about the same with some variation of 600 in enrollment between June and July. The trend graph also shows a relatively steady stay through June and July but increased over the last year in July. In August we do expect to see a small decline in the program with September showing some increase. Dr. Mitchell then reported on the various Fast Facts. The September O-EPIC numbers represent 1 person over 4,000 which include both ESI and the IP Program. She stated that the Provider Fast Facts shows that about 400 new providers have come into the program in the last few months. Currently, OHCA has 20,133 providers that cover all provider types. Dr. Mitchell reported on the NASMD Executive Committee meeting held in DC last Tuesday via conference call. Dennis Smith, CMS spoke mainly regarding SCHIP, he urged states to carry on with business as usual prior to September 30th. Mr. Smith/CMS also spoke extensively about what to do about SCHIP reauthorization, and extensively about tamper resistant prescription pad issue which Mr. Smith stated the date can not be stalled because it is in law and a congressional issue not a CMS issue. Dr. Mitchell reported that provider training is being done tomorrow at OHCA with regard to the tamper resistant prescription pad.

O-EPIC MARKETING UPDATE

Nico Gomez, Director of Communication Services

Mr. Gomez reported on the feedback from the focus groups regarding O-EPIC advertising campaign. He stated that the groups felt that the marketing was not hard hitting enough, too fluffy; Off target with the message; Needed to be known that it was Tobacco Tax supported; Income guidelines were not clear; Timing is issue; 250% of FPL will be an enhancement; Understanding acronyms; Name change for better marketing purposes; and noting that it is a Health Insurance Subsidy. Mr. Gomez noted that OHCA is waiting till mid - October or early November to launch campaign due to the dollar amount for advertising.

Mr. Fogarty discussed the handouts which consisted of the United Way Campaign Results, Vocabulary of "Healthcare not Welfare", Federal Poverty Level Chart, "Fall" Provider Update, Fast Facts, and Provider Fast Facts.

ITEM 3 - PRESENTATION OF HEALTH CARE FOR ALL OKLAHOMANS: READY OR NOT?

Mike Fogarty, CEO

Mr. Fogarty stated that the presentation "Health Care: Ready or Not" was presented to the University of Oklahoma, College of Public Health Grand Rounds, on August 30th. A copy of the slides is in your board packet for quick reference. Mr. Fogarty presented the following slides and took questions:

1992 Public Policy Issues Oklahoma Medicaid Near Collapse; OHCA Created: Average SoonerCare Per Member (SFY1997-SFY2007) Cost Compared to SFY 1997 Sooner Care Cost Trended Forward Using National Health Insurance Inflation; OHCA Mission and Vision; Goals; Elements of Health Care Reform; Cost Containment; Implementation of Managed Care; Quality; Communication with Providers: Provider Profiles; Communication with Members: Member Profiles; Well-Child Visits: Ages 0-15 months; Access to Care: 12-24 months; Children's Dental Visits; Access to Care: Ages 20-44 years; HEIDIS: Comprehensive Diabetes Care; Coverage; SoonerCare Enrollment, A Ten Year Perspective; Timeline of Coverage; Health Care for All Oklahomans: Ready or Not?; Oklahoma's Uninsured "Who are talking about?"; A Matter of Affordability "Where's the Cliff?"; Insured Children "Approaching the Summit"; Uninsured Adults "Climbing the Cliff"; Uninsured Adults "The Whole Cake"; Adult Uninsured Rate by Age Range; Distribution of Uninsured Adults; "After expansion...who's left?"; and Health Care for All Oklahomans.

ITEM 4A/RECOMMENDATION REGARDING CONFLICTS OF INTEREST PANEL REGARDING RULES

Howard Pallotta, Director of Legal Services

Mr. Pallotta stated the Conflicts of Interest Panel met and found no conflict with Item 4A and Item 4B.

ITEM 4B/CONSIDERATION AND VOTE UPON DECLARATION OF EMERGENCY RULES A-F

Cindy Roberts, Director of Program Integrity and Planning

Ms. Roberts presented the following rules for declaration of emergency.

I. **Items subject to the Administrative Procedures Act (Emergency).**

A. **CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE**

Subchapter 5. Individual Providers and Specialties

Part 17. Medical Suppliers

OAC 317:30-5-210. [AMENDED]

(Reference APA WF # 07-48)

FINDING OF EMERGENCY: The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rule revisions to allow SoonerCare contracted providers of durable medical equipment, prosthetics, orthotics and supplies an obtainable deadline for attaining accreditation by a Medicare deemed accreditation organization. The deadline of January 1, 2008, previously set by the agency will not be met by many current SoonerCare providers due to the inability of the accreditation organizations to complete the lengthy, cumbersome process by the end of the year deadline for the number of providers who currently have requested accreditation. If the accreditation requirement is not postponed, SoonerCare members may experience difficulty in obtaining needed services.

B. **CHAPTER 35. MEDICAL ASSISTANCE FOR ADULTS AND CHILDREN-ELIGIBILITY**

Subchapter 6. SoonerCare Health Benefits for Categorically Needy Pregnant Women and Families with Children

Part 3. Application Procedures

OAC 317:35-6-15. [AMENDED]

Subchapter 7. Medical Services

Part 3. Application Procedures

OAC 317:35-7-15. [AMENDED]

(Reference APA WF # 07-25)

FINDING OF EMERGENCY: The Agency finds that imminent peril exists to the preservation of the public health, safety, or welfare which necessitates promulgation of emergency rules and requests emergency approval of rule revisions that allow the acceptance of facsimile signatures on all SoonerCare applications. Without these revisions, SoonerCare members could experience a delay in accessing needed medical attention.

C. **CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE**

Subchapter 5. Individual Providers and Specialties

Part 18. Genetic Counselors

OAC 317:30-5-219. through 317:30-5-223. [NEW]

(Reference APA WF # 07-41)

FINDING OF EMERGENCY: The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rule revisions that add Licensed Genetic Counselors (LGCs) to individual providers and specialties who provide health care to SoonerCare members. The field of genetics has developed tests and procedures that have significant impact on perinatal care. Genetic counselors interpret complex test results, analyze inheritance patterns and reoccurrence risk, as well as provide supportive counseling. The addition of LGCs will increase access to genetic counseling services for pregnant/postpartum SoonerCare members and

allow women/couples, who have been told their pregnancy is at an increased risk for a birth defect or genetic condition, to choose a course of action appropriate for them in view of their risk, their family goals, and their ethical and religious standards. If revisions are not made, SoonerCare members will not have the benefit of these services which are vital to the understanding of congenital birth defects.

D. CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

Subchapter 5. Individual Providers and Specialties

Part 20. Lactation Consultants

OAC 317:30-5-230. through 317:30-5-234. [NEW]

(Reference APA WF # 07-42)

FINDING OF EMERGENCY: The Agency finds that imminent peril exists to the preservation of the public health, safety, or welfare which necessitates promulgation of emergency rules and requests emergency approval of rule revisions that add Registered Lactation Consultants (RLCs) and International Board Certified Lactation Consultants (IBCLCs) to individual providers and specialties who provide health care to SoonerCare members. Research has confirmed the importance of breastfeeding and breast milk for the optimal health of infants, children and mothers. The addition of RLCs and IBCLCs will increase access to lactation services for pregnant/postpartum SoonerCare members and increase the number of SoonerCare members who breastfeed. Without these revisions, the SoonerCare program will be unable to impact the number of SoonerCare members who elect to breastfeed.

E. CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

Subchapter 5. Individual Providers and Specialties

Part 16. Maternal and Infant Health Licensed Clinical Social Workers

OAC 317:30-5-204. through 317:30-5-209. [NEW]

(Reference APA WF # 07-40)

FINDING OF EMERGENCY: The Agency finds that imminent peril exists to the preservation of the public health, safety, or welfare which necessitates promulgation of emergency rules and requests emergency approval of rule revisions that add Maternal and Infant Health Licensed Clinical Social Workers (MIHLCSWs) to individual providers and specialties that provide health care to SoonerCare members. Services provided by MIHLCSWs consist of supportive counseling, education, and case management toward the goal of reducing poor perinatal outcomes. The addition of MIHLCSWs will increase access to counseling services for pregnant/postpartum SoonerCare members who may be at risk due to drug/alcohol use, domestic violence, and/or problems in the post partum environment that interfere with infant health and bonding. If revisions are not made, SoonerCare members will not have the benefit of these services which are vital to improving perinatal outcomes and optimizing early maternal infant health.

F. CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

Subchapter 5. Individual Providers and Specialties

Part 1. Physicians

OAC 317:30-5-22. [REVISED]

OAC 317:30-5-22.1. [NEW]

(Reference APA WF # 07-38)

FINDING OF EMERGENCY: The Agency finds that imminent peril exists to the preservation of the public health, safety, or welfare which necessitates promulgation of emergency rules and requests emergency approval of rule revisions that add enhanced services for medically high risk pregnancies and allow additional reimbursement to an obstetrical care provider treating a member who is confirmed to be medically/obstetrically "high risk". Enhanced services will be available for pregnant women eligible for SoonerCare and will be in addition to services for uncomplicated maternity cases. The additional reimbursement and services will increase access to Maternal and Fetal Medicine Specialists and ensure high risk pregnant SoonerCare members receive appropriate prenatal care and services. If revisions are not made, SoonerCare members will not have the necessary access to these specialists and services.

MOTION:

Member McFall moved that the Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of Rules A-F. Member Roberts seconded.

FOR THE MOTION:

Member Roberts, Vice-Chairman Hoffman, Member Miller, Member Langenkamp, Governor Anoatubby, Member McFall, and Chairman Roggow

ITEM 5B/CONSIDERATION AND VOTE UPON DECLARATION OF SUBSTANTIVE RULES A-F
Cindy Roberts, Director of Program Integrity and Planning

Ms. Roberts presented the following rules A-F for substantive changes.

A. CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

Subchapter 5. Individual Providers and Specialties
Part 17. Medical Suppliers
OAC 317:30-5-210. [AMENDED]
(Reference APA WF # 07-48)

SUMMARY: Agency rules are revised to delay the SoonerCare requirement of accreditation by a Medicare deemed accreditation organization for quality standards for providers of durable medical equipment, prosthetics, orthotics and supplies (DMEPOS). In May, 2007, the agency revised rules effective July 1, 2007, to require this accreditation by January 1, 2008; however, it has now been determined that the accreditation organizations will be unable to complete the accreditation process for current SoonerCare contracted providers for two more years. Therefore, the deadline for DMEPOS providers to obtain this accreditation in order to receive reimbursement from SoonerCare is being delayed until January 1, 2011.

B. CHAPTER 35. MEDICAL ASSISTANCE FOR ADULTS AND CHILDREN-ELIGIBILITY

Subchapter 6. SoonerCare Health Benefits for Categorically Needy Pregnant Women and Families with Children
Part 3. Application Procedures
OAC 317:35-6-15. [AMENDED]
Subchapter 7. Medical Services

Part 3. Application Procedures
OAC 317:35-7-15. [AMENDED]
(Reference APA WF # 07-25)

SUMMARY: Application procedure rules for medical assistance are revised to allow the acceptance of facsimile signatures on all SoonerCare applications and would not require an original signature to follow. There is no current rule in policy which speaks to obtaining original signatures on SoonerCare applications; however, current practices require caseworkers to obtain original signatures on applications. Not allowing facsimile signatures may delay the processing of SoonerCare applications, impeding members from accessing needed medical attention.

C. **CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE**
Subchapter 5. Individual Providers and Specialties
Part 18. Genetic Counselors
OAC 317:30-5-219. through 317:30-5-223. [NEW]
(Reference APA WF # 07-41)

SUMMARY: Rules are revised to add Licensed Genetic Counselors (LGCs) to individual providers and specialties that provide health care to SoonerCare members. The field of genetics has developed tests and procedures that have significant impact on perinatal care. Genetic counseling is a process by which critical family history, patient history, and other factors are gathered, analyzed and shared with the member in order to help them understand and adapt to the medical psychosocial and familial contributions to potential or realized birth defects. Proposed rule revisions are a result of the Oklahoma State Department of Health and Oklahoma Health Care Authority Perinatal Task Force. The focus of this task force is to study issues concerning pregnant women covered by SoonerCare and other public funding sources and to develop programs and plans to target those areas for positive outcomes. This revision to rules will allow Genetic Counselors to contract directly with the OHCA and expand the number of providers allowed to provide services to SoonerCare members.

D. **CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE**
Subchapter 5. Individual Providers and Specialties
Part 20. Lactation Consultants
OAC 317:30-5-230. through 317:30-5-234. [NEW]
(Reference APA WF # 07-42)

SUMMARY: Rules are revised to add Registered Lactation Consultants (RLCs) and International Board Certified Lactation Consultants (IBCLCs) to individual providers and specialties that provide health care to SoonerCare members. Research has confirmed the importance of breastfeeding and breast milk for the optimal health of infants, children and mothers. Professional lactation services provide counseling or behavioral interventions to improve breastfeeding outcomes. Currently, access to lactation education and counseling is limited for SoonerCare members. Proposed rule revisions are a result of the Oklahoma State Department of Health and the Oklahoma Health Care Authority Perinatal Task Force. The focus of this task force is to study issues concerning pregnant women covered by SoonerCare and other public funding sources and to develop programs and plans to target those areas for positive outcomes. This revision to rules will allow Lactation Consultants to contract directly with the OHCA and will

increase access to lactation services for pregnant/postpartum SoonerCare members.

E. CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

Subchapter 5. Individual Providers and Specialties

Part 16. Maternal and Infant Health Licensed Clinical Social Workers

OAC 317:30-5-204. through 317:30-5-209. [NEW]

(Reference APA WF # 07-40)

SUMMARY: Rules are revised to add Maternal and Infant Health Licensed Clinical Social Workers (MIHLCSWs) to individual providers and specialties who provide health care to SoonerCare members. Services provided by MIHLCSWs consist of supportive counseling, education, and case management toward the goal of reducing poor perinatal outcomes and optimizing early maternal infant health, attachment and bonding. The emphasis is on providing support, motivation, education and assistance in accessing appropriate care. The addition of MIHLCSWs will increase access to counseling services for pregnant/postpartum SoonerCare members who may be at risk due to drug/alcohol use, domestic violence, and/or problems in the post partum environment that interfere with infant health and bonding. Proposed rule revisions are a result of the Oklahoma State Department of Health and the Oklahoma Health Care Authority Perinatal Task Force. The focus of this task force is to study issues concerning pregnant women covered by SoonerCare and other public funding sources and to develop programs and plans to target those areas for positive outcomes. This revision will allow MIHLCSWs to contract directly with the OHCA and expand the number of providers allowed to provide services to SoonerCare members.

F. CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

Subchapter 5. Individual Providers and Specialties

Part 1. Physicians

OAC 317:30-5-22. [REVISED]

OAC 317:30-5-22.1. [NEW]

(Reference APA WF # 07-38)

SUMMARY: Rules are revised to add enhanced services for medically high risk pregnancies and allow additional reimbursement to an obstetrical care provider treating a member who is confirmed to be medically/obstetrically "high risk". Enhanced services are available for pregnant women eligible for SoonerCare and are in addition to services for uncomplicated maternity cases. Women deemed high risk based on criteria established by the OHCA may receive prior authorization for medically necessary enhanced benefits which include prenatal at risk ante partum management, non stress test(s), and additional ultrasounds not covered under routine obstetrical care. Proposed rule revisions are a result of the Oklahoma State Department of Health and the Oklahoma Health Care Authority Perinatal Task Force. The focus of this task force is to study issues concerning pregnant women covered by SoonerCare and other public funding sources and to develop programs and plans to target those areas for positive outcomes. These rule revisions will ensure high risk pregnant SoonerCare members receive appropriate prenatal care in an effort to significantly reduce the possibility of poor birth outcomes.

MOTION: Governor Anoatubby moved for approval of the substantive rules A-F as presented. Member Roberts seconded.

FOR THE MOTION: Member Roberts, Vice-Chairman Hoffman, Member Miller, Member Langenkamp, Governor Anoatubby, Member McFall, and Chairman Roggow

ITEM 5/DISCUSSION ITEM - PROPOSED EXECUTIVE SESSION AS RECOMMENDED BY THE DEPUTY COUNSEL III AND AUTHORIZED BY THE OPEN MEETING ACT, 25 OKLA.STATE.§307(B)(1),(4), AND (7)

Howard Pallotta, Director of Legal Services

MOTION: Vice Chairman Hoffman moved for executive session. Member McFall seconded.

FOR THE MOTION: Member Roberts, Vice-Chairman Hoffman, Member Miller, Member Langenkamp, Governor Anoatubby, Member McFall, and Chairman Roggow

Chairman Roggow called the meeting back into open session.

NEW BUSINESS

None.

ADJOURNMENT

MOTION: Member McFall moved for adjournment. Member Roberts seconded.

FOR THE MOTION: Member Roberts, Member Hoffman, Member Miller, Member Langenkamp, Governor Anoatubby, Vice-Chairman McFall and Chairman Roggow