

MINUTES OF A REGULARLY SCHEDULED BOARD MEETING
OF THE OKLAHOMA HEALTH CARE AUTHORITY BOARD
Held at Chickasaw Nation Headquarters
Ada, Oklahoma
October 11, 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 October 8, 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 Armstrong, Vice-Chairman Hoffman, Member Miller, Member Langenkamp, Governor Anoatubby, Member McFall, and Chairman Roggow

OTHERS PRESENT

Bill Lance, Chickasaw Nation
Anne Roberts, OICA
Becky Moore OHACP
Brent Wilborn, OPCA
Sherry Peters, Logisticare
Steven Feist, Logisticare
Patti Davis, OHCA
Joy Leuthard, Variety Health Center
Jason Doyle, OETA News

DISCUSSION AND POSSIBLE VOTE ON APPROVAL OF MINUTES OF THE REGULARLY SCHEDULED BOARD MEETING HELD AUGUST 15, 2007 AND SEPTEMBER 13, 2007
BOARD MINUTES

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:

Member Langenkamp moved for approval of the August 15, 2007 and September 13, 2007 as presented. Member McFall.

FOR THE MOTION:

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

Chairman Roggow welcomed the newest OHCA Board Member, Mr. Tony Armstrong of Muskogee.

Governor Anoatubby welcomed everyone to Ada and recognized Representative Todd Thompson of Ada.

FINANCIAL UPDATE

Anne Garcia

Revenues for OHCA through August, accounting for receivables, were **\$540,786,062** or **1.5 % under** budget. Expenditures for OHCA, accounting for encumbrances, were **\$479,993,483** or **2.9% under** budget. The state dollar budget variance through August is **\$5,710,170 positive**.

The budget variance is primarily attributable to the following (in millions):

Expenditures:	
Medicaid Program Variance	3.4
Administration	1.2
Revenues:	
Taxes and Fees	.3
Drug Rebate	1.0
Overpayments/Settlements	(.2)
Total FY 07 Variance	\$ 5.7

SCHIP UPDATE

Stephen Weiss

Mr. Weiss stated that in FFY-2007 Oklahoma officially spent \$96.1 million in federal SCHIP dollars (This is about \$4 million less than we originally projected.) These funds allowed us to serve approximately 125,000 kids in SCHIP for the year (unduplicated) and approximately 65,000 to 70,000 in any given month of the year. Oklahoma's annual federal allotment for FFY-2007 was \$70.8 and the Federal SCHIP law allows states up to 3 years to expend their annual allotments. Oklahoma was able to combine our annual federal allotment with \$59.3 million of federal carryover from the previous federal fiscal years to meet our expenditures and will carryover approximately \$34 million into FFY-2008 of federal allotment. Mr. Weiss stated that Oklahoma is estimating approximately \$122.2 million in FFY-2008 of federal SCHIP dollars will be spent. When you combine our current federal allotment of \$70.8 million with the carryover amount of \$34 million we will have \$104.8 million available to spend in FFY-2008. The difference between our estimated expenditures and our federal funds available is \$17.4 million. Mr. Weiss noted that if our federal allotment remains exactly the same in FFY-2008 as it is right now we will run out of federal SCHIP funds in the middle of the 4th quarter of FFY-2008 which is the first quarter of State FY-2009. If we do not receive any additional allotments for FFY-2008 because of the political issues occurring in Washington DC and all we have to spend is the \$34 million of carryover we will be out of SCHIP money within the first month of the second quarter of FFY-2008.

Mr. Weiss reported that Oklahoma is a SCHIP expansion state. If the federal funds are exhausted the children in the program will fall back

into our SoonerCare program at the regular FMAP rate of 65.90%. We have a budget request of \$8.6 million for SFY-2009 to make up the difference between the enhanced FMAP we receive for SCHIP and the regular FMAP we receive for SoonerCare. The SCHIP mandate requires states to screen and enroll low income uninsured children into either Medicaid (Title XIX) or SCHIP (XXI) if the children qualify under the state plans.

No matter how a state adopted SCHIP (expansion, combination or stand alone) the state is required by law to make sure that every child who qualifies for either program is enrolled. Under that federal mandate the enrollment of children for both Title XIX and XXI is combined and compared to the CPS estimate of children in poverty. According to CMS, the participation rate for children in the Oklahoma Medicaid and SCHIP programs combined is 103.43%. OHCA updated the CMS figures using SFY2007 numbers and our data indicates that Oklahoma has a 101% participation rate. The unduplicated number of children age 0 through 18 enrolled by OHCA in 2007 was 472,804 (Title XIX and Title XXI combined) while the CPS data indicate that the total number of Oklahomans between 0 through 18 years of age and under 200% of the federal poverty level was 468,979 for the same period.

The following table displays enrollment rates for several states within the Oklahoma region as calculated by CMS. Note that CMS combines Medicaid and SCHIP enrollment data.

How many Low-income Children are Uninsured? Medicaid/SCHIP Eligibility of Uninsured Children and Reasons for Ineligibility, 2003-2004	
State	Medicaid/SCHIP enrollment as % of <200% FPL
Arkansas	118.52%
Colorado	100.42%
Kansas	87.02%
Louisiana	157.53%
New Mexico	149.17%
Oklahoma	103.43%
Texas	102.85%
Source: CMS calculations based upon U.S. Census Bureau: Current Population Survey, Annual Social and Economic Supplement, 2007 & CMS SEDS (September 6, 2007 power point from Dennis Smith)	

MEDICAID DIRECTOR'S UPDATE

Lynn Mitchell, M.D.

Dr. Mitchell reported that the enrollments numbers of 613,556 for August are relative stable. The trend graph is relatively consistent with 2005, 2006, but 2007 took off due to the 12 month eligibility/certification period. She reported on a report received yesterday from the Kaiser Commission on Medicaid shows a .5% enrollment decline in 2007. She stated that there is an anticipated 2% enrollment increase for next year across the states. Dr. Mitchell reported on the O-EPIC ESI Fast Facts stating that 95 new businesses in October for a total number of 1,278 businesses participating in the program with a total enrollment of 3,381 which is 307 new members since the last board meeting. This does represent 76 of the 77 counties in Oklahoma. In

the IP Program, there are 968 members for 69 of 77 counties represented. Dr. Mitchell stated that for the total O-EPIC Program is now serving 4,349 members between ESI and IP. She then discussed the Provider Fast Facts numbers which continue to rise and are up to 20,400 providers including 197 new providers since last month. The provider capacities show SoonerCare Choice at 35% being utilized, SoonerCare Choice IHS Program is about 9% of capacity and the O-EPIC IP has not reached 1% capacity thus far. Dr. Mitchell stated that SoonerCare Program Operations and Benefits received 200,000 calls in the last 12 months, and the Helpline receiving 400,000 calls on behalf of members. Dr. Mitchell noted that at the December Board Meeting we will be updating Board Members on the Focus on Excellence Program. She said that EPSDT screening rates is 72% for the year 2006 and those numbers were sent to the FEDS last week. For detailed reports see, Item 3C of the packet.

INSURE OKLAHOMA/O-EPIC MARKETING CONTRACT UPDATE

Nico Gomez

Mr. Gomez presented the schedule of television stations and radio for the new ads during the next 2 months. We are going to be in the Oklahoma City market, Tulsa market, and primarily the CBS affiliates. We will be in the Ada market, Texhoma market, and Lawton Cable news network. Mr. Gomez stated that we are getting a lot of paid time but also a lot of free bonus time. The campaign will be launched next Monday with Angela Buckalew doing the some of the morning shows both in Oklahoma City, Tulsa and Lawton. The Board Members viewed one of the TV spots.

ANNOUNCEMENT OF CMS TRANSFORMATION GRANT AWARD FOR ONLINE ENROLLMENT

Derek Lieser

Mr. Lieser stated that in order to improve the ease and efficiency of enrollment, we propose to use grant funds to establish an online enrollment process allowing potential members to apply for SoonerCare electronically. This new online enrollment process would quickly determine if the members meet eligibility criteria and provide an alternative to the paper application process. In order to ensure universal accessibility, dedicated computer kiosks will be available for use by applicants who do not have access to a computer or the internet. They will be strategically located in areas of the community which are both easily accessible to and regularly accessed by potential members, i.e., county health departments.

The goals of this new system will be to:

1. Provide 24 hour, 7 day a week access to SoonerCare enrollment via an online enrollment process.
2. Allow potential members to know instantly if they are eligible allowing them faster access to services.
3. Educate potential members about the various SoonerCare programs available.
4. Significantly reduce the number of staff hours needed for face to face interviewing and data entry to enroll potential members, reduce the margin for error and streamline the enrollment process to accomplish much more with less.
5. A step toward increased interagency collaboration

The grant was awarded to the OHCA on October 02, 2007. Federal funds in the amount of \$6,146,640.00 over the next two years are to be used to support the planning, design, development, testing, implementation and evaluation of this project.

ITEM 4/DISCUSSION ITEM-REPORTS TO THE BOARD BY BOARD COMMITTEES

Chairman Roggow

AUDIT FINANCE COMMITTEE

Member Miller

Member Miller reported the committee did not meet.

ITEM 5/DISCUSSION ITEM-PRESENTATION OF THE STATE FISCAL YEAR 2009 BUDGET REQUEST

Juarez McCann

Mr. McCann stated that the Budget Request is submitted to the Governor Office and Legislature for the upcoming fiscal year. Mr. McCann discussed the following summary priorities for fiscal year 2009: Annualizations; Maintenance; Mandates; One-Time Carryover; Rate Increases; Money Follows the Person; Coverage for Adult Therapies; Behavioral Health Partnership for Kids; Reimbursement for Evaluation and Management Services; Radiology Management Contract; Coverage for Telemedicine; Exempt Diabetic Drugs from Monthly Prescription Limit and Practice Facilitation (KIDS).

ITEM 6a/RECOMMENDATION REGARDING CONFLICTS OF INTEREST PANEL CONCERNING RECOMMENDATIONS OF THE DRUG UTILIZATION REVIEW BOARD

Howard Pallotta, Director of Legal Services

Mr. Pallotta stated that the Conflicts of Interest Panel met with regards to Item 6,7,and 8, and found no conflicts.

Mr. Pallotta stated with regard to our new board member, Mr. Armstrong there was not time to do a full analysis but did speak with him before the meeting and do not believe there is a conflict on any of the following items.

ITEM 6b/CONSIDERATION AND VOTE TO ADD THE THERAPEUTIC CATEGORY OF OPHTHALMIC ANTIBIOTIC AND ANTIBIOTIC/STEROID COMBINATION PRODUCTS TO THE PRODUCT BASED PRIOR AUTHORIZATION PROGRAM UNDER 63 OKLAHOMA STATUTES 5030.5.

Nancy Nesser, J.D., D.Ph., Pharmacy Director

Dr. Nesser stated that the Drug Utilization Review Board recommends the addition of Ophthalmic Anti-Infective Products to the PBPA program with the following approval criteria:

Approval Criteria for Anti-Infectives:

1. Approved indication/suspected infection by organism not known to be covered by any tier one antibiotics.
2. Known contraindication to all indicated tier one medication.
3. Prescription by optometrists/ophthalmologists or
4. When used for pre/post-operative prophylaxis.

Approval Criteria for Anti-Infective/Steroids:

1. Prescription by optometrists/ophthalmologists or
2. When used for pre/post-operative prophylaxis.

ITEM 6c/CONSIDERATION AND VOTE TO ADD THE DRUG BROVANA® TO THE SCOPE/UTILIZATION-BASED PRIOR AUTHORIZATION PROGRAM UNDER OAC 317:30-5-77.2(e).

Nancy Nesser, J.D., D.Ph., Pharmacy Director

Dr. Nesser stated that the Drug Utilization Review Board recommends prior authorization and the following restrictions of Brovana™:

1. Member must be over 18 years of age and have one of the following diagnoses: COPD, chronic bronchitis, or emphysema.
2. Member must have previous trial with Advair®, Serevent® or Foradil® in the past 45 days. A clinical exception will be given for those members who are unable to effectively use hand-actuated devices or who have become unstable on nebulized short-acting β_2 -agonist therapy.
3. Quantity limit of 120ml for a 30 day supply.

MOTION:

Vice Chairman Hoffman moved for approval of Item 6b and Item 6c. Member McFall seconded.

FOR THE MOTION:

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

ITEM 7A/CONSIDERATION AND VOTE UPON DECLARATION OF EMERGENCY RULES A-D AS LISTED ON RULES AGENDA

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 45. OKLAHOMA EMPLOYER AND EMPLOYEE PARTNERSHIP FOR INSURANCE COVERAGE**

Subchapter 11. O-EPIC IP
Part 3. O-EPIC IP MEMBER HEALTH CARE BENEFITS
OAC 317:45-11-11. [AMENDED]
(Reference APA WF # 07-53)

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 exclude certain pregnancy related services from the Insure Oklahoma/Oklahoma Employer and Employee Partnership for Insurance Coverage Individual Plan (Insure Oklahoma/O-EPIC IP) benefit package. SoonerCare rules were approved at the September 13, 2007, Board meeting to allow OHCA to contract directly with International Board Certified Lactation Consultants and Maternal and Infant Health Licensed Clinical Social Workers and to expand services for medically high risk pregnant members. Since Insure Oklahoma/O-EPIC IP is a limited benefit program, certain health care services covered in SoonerCare are not part of the Insure Oklahoma/O-EPIC IP benefit package. Current policy states that all Insure

Oklahoma/O-EPIC IP benefits are subject to the same rules as the SoonerCare program which would include the expanded benefits for pregnant/postpartum members. Therefore, Insure Oklahoma/O-EPIC IP rules must be revised in order to specifically exclude these services so that providers are made aware of the exclusion and won't provide services that are not covered nor reimbursable under the program.

B. CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

Subchapter 5. Individual Providers and Specialties
Part 17. Medical Suppliers
OAC 317:30-5-211.13. [AMENDED]
(Reference APA WF # 07-47)

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 an exception for coverage of external breast prosthesis in certain instances. Most women with breast cancer receive reconstructive surgery following a mastectomy. Sometimes the breast implant fails or ruptures and circumstances are such that an implant replacement is not recommended by the surgeon and/or desired by the member. Currently, OHCA rules state that external breast prostheses are not covered once breast reconstruction is performed. Without this revision, affected women would require additional breast reconstruction that they are not a candidate for or do not desire in order to regain anatomical balance.

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

Subchapter 5. Eligibility and Countable Income
Part 3. Non-Medical Eligibility Requirements
OAC 317:35-5-26. [AMENDED]
(Reference APA WF # 07-50)

FINDING OF EMERGENCY: The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rules to recognize children who reside in Indian Health Service (IHS), Bureau of Indian Affairs (BIA), or Tribal controlled dormitories as residents of Oklahoma for SoonerCare eligibility purposes. Without such provision, many of these children ranging in age from five to nineteen years old may not receive vital primary care and preventive services.

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

Subchapter 5. Eligibility and Countable Income
Part 1. Determination of Qualifying Categorical Relationships
OAC 317:35-5-2. [AMENDED]
OAC 317:35-5-6.1. [NEW]
OAC 317:35-5-25. [AMENDED]
Subchapter 22. Pregnancy Related Benefits Covered under Title XXI
[NEW]
OAC 317:35-22-1. through OAC 317:35-22-11. [NEW]
(Reference APA WF # 07-58)

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 to add pregnancy related benefits to improve health outcomes for children who are Oklahoma residents and U. S.

citizens upon their birth. Current rules prohibit prenatal benefits to pregnant women with certain alien status. Studies have shown prenatal care reduces low birth weights and the probability of birth defects. In addition, expenditures for these children after birth, who have citizenship and meet Medicaid eligibility standards, are more costly than those for children whose mothers have had prenatal care. Rule revisions will lower expenditures for neo-natal ICU expenses, extended hospital stays after birth and ongoing chronic medical expenses for infants born with birth complications resulting from little or no prenatal care.

Chairman Roggow recognized Jane Figart of the Family Health Coalition in Tulsa County. Ms. Figart stated that they serve women and children and help coordinate a system of care. Tulsa County sees approximately 16% births a year that are Hispanic origin. A tremendous number of those are undocumented and receiving care through the safety net system which is highly burdened at this time because of the number of women and the ongoing needs. Infant mortality is a tremendous issue. Ms. Figart stated that low birth rate babies may cost as much as \$14,000-\$15,000 on an average cost. Women who do not receive any prenatal care are more likely to have a low birth rate baby, or more likely to have a premature baby. So, the Family Health Coalition speaks in support of this regulation change because we know that it will improve the outcomes for the babies, it will improve the outcomes for the women, and reduce some of the burden on our safety net providers who already have a number of burdens.

Ms. Roberts stated that there needs to be one pen and ink change to Rule D. If you look at 317:35.22.2 under Scope of Coverage, we need to add per month after 2 visits, it should read only 2 visits per month for other related services to evaluate and/or treat conditions that may adversely impact the pregnancy are covered.

Chairman Roggow stated there needs to be an amendment to Rule D.

MOTION: Member Langenkamp moved for the amendment on page 16, 317:35-22-2(b) only 2 visits per month to Rule D as presented. Member McFall seconded.

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

Chairman Roggow said the board will take the Emergency Rules for A, And C first.

MOTION: Member Langenkamp moved for declaration of emergency for Rules A, B, and C as listed on the Rules Agenda. Member Anoatubby seconded.

FOR THE MOTION:

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

MOTION:

Member Langenkamp moved for the declaration of emergency for Rule D as listed on the Rules Agenda. Member McFall seconded.

FOR THE MOTION:

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

AGAINST THE MOTION:

Chairman Roggow

ITEM 7B/CONSIDERATION AND VOTE UPON DECLARATION OF SUBSTANTIVE RULES A-D AS LISTED ON RULES AGENDA

Cindy Roberts, Director of Program Integrity and Planning

Ms. Roberts presented the following rules for declaration of substantive changes:

A. CHAPTER 45. OKLAHOMA EMPLOYER AND EMPLOYEE PARTNERSHIP FOR INSURANCE COVERAGE

Subchapter 11. O-EPIC IP
Part 3. O-EPIC IP MEMBER HEALTH CARE BENEFITS
OAC 317:45-11-11. [AMENDED]
(Reference APA WF # 07-53)

SUMMARY: Rules are revised to exclude three pregnancy related services from the Insure Oklahoma/O-EPIC IP benefit package. Services that are being added as non-covered services include those provided by an International Board Certified Lactation Consultant (IBCLC) or a Maternal and Infant Health Licensed Clinical Social Worker (MIHLCSW), as well as enhanced services for medically high risk pregnancies as found in OAC 317:30-5-22.1. Last month, the OHCA Board approved rules to allow OHCA to contract directly with IBCLCs and MIHLCSWs as well as expand services for medically high risk pregnant members. The Insure Oklahoma/O-EPIC IP program establishes access to affordable health coverage for low-income working adults and their spouses. Since the Insure Oklahoma/O-EPIC IP is a limited benefit program, certain health care services included in SoonerCare are not covered in the Insure Oklahoma/O-EPIC IP benefit package. Existing policy states that all Insure Oklahoma/O-EPIC IP benefits are subject to the same rules as the SoonerCare program which would include the expanded benefits for members. Therefore, Insure Oklahoma/O-EPIC IP rules are revised in order to exclude these three services for pregnant and postpartum women.

B. CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

Subchapter 5. Individual Providers and Specialties
Part 17. Medical Suppliers
OAC 317:30-5-211.13. [AMENDED]
(Reference APA WF # 07-47)

SUMMARY: Rules are revised to allow an exception for coverage of external breast prosthesis in instances where a woman with breast cancer receives reconstruction following a mastectomy, but the breast implant fails or ruptures and circumstances are such that an implant replacement is not recommended by the surgeon and/or desired by the member. Currently, OHCA rules state that external breast prostheses are not covered once breast reconstruction is performed. Studies have shown that about 20% of modern implants rupture within 10 years of cosmetic augmentation. This rule revision will give SoonerCare members who have had failed implants or other complications the option to receive external breast prostheses in lieu of further more costly reconstructive surgery as well as allow members, who are not candidates for further reconstructive surgery, to obtain external breast prostheses for comfort and balance.

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

Subchapter 5. Eligibility and Countable Income

Part 3. Non-Medical Eligibility Requirements

OAC 317:35-5-26. [AMENDED]

(Reference APA WF # 07-50)

SUMMARY: Agency rules are revised to recognize children who reside in IHS, BIA, or Tribal controlled dormitories as residents of Oklahoma for SoonerCare eligibility purposes. Currently, over one thousand children reside in Oklahoma's five IHS, BIA, or Tribal controlled dormitories. Approximately thirty percent of those children lack comprehensive health care coverage. Many of these children, described as "at risk" children, often have had little or no access to even basic health care prior to their arrival at an IHS, BIA, or Tribal controlled dormitory. Making these children eligible for SoonerCare services ensures that the children will receive the primary care and preventive services they need.

MOTION:

Member McFall moved for substantive rule changes for Rules A, B, and C as listed on the Rules Agenda. Member Anoatubby seconded.

FOR THE MOTION:

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

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

Subchapter 5. Eligibility and Countable Income

Part 1. Determination of Qualifying Categorical Relationships

OAC 317:35-5-2. [AMENDED]

OAC 317:35-5-6.1. [NEW]

OAC 317:35-5-25. [AMENDED]

Subchapter 22. Pregnancy Related Benefits Covered under Title XXI
[NEW]

OAC 317:35-22-1. through OAC 317:35-22-11. [NEW]

(Reference APA WF # 07-58)

SUMMARY: Rules are revised to add pregnancy related benefits to improve health outcomes for children who are Oklahoma residents and U. S. citizens upon their birth. Current agency rules prohibit prenatal

benefits to pregnant women with certain alien status. As a result of the prohibition, the child goes without prenatal care. The lack of care can result in low birth weight and an increased probability of birth defects. Expenditures for these children after birth, who have citizenship, Oklahoma residency, and meet SoonerCare eligibility standards, are more costly than prenatal care. Title XIX gives states the opportunity to cover pregnancy related expenses for the mother of a child that will qualify for SoonerCare at birth. Rule revisions will lower expenditures for neonatal ICU expenses, extended hospital stays after birth and ongoing chronic medical expenses for the child.

MOTION: Member Langenkamp moved for the substantive rule change for Rule D as listed on the Rules Agenda. Member McFall seconded.

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

AGAINST THE MOTION: Chairman Roggow

ITEM 8a/CONSIDERATION AND VOTE UPON A RATES AND STANDARDS COMMITTEE RECOMMENDATION TO REVISE AND INCREASE THE RATES PAID FOR AGENCY COMPANION (EMPLOYEE) SERVICES AND DEVELOP A NEW RATE PAID FOR AGENCY COMPANION (CONTRACTOR) SERVICES

Cindy Roberts, Director of Program Integrity and Planning

Ms. Roberts stated that this is a proposal to revise and increase the rates paid for **Agency Companion (Employee)** services and develop a new rate paid for **Agency Companion (Contractor)** services. Rates are revised to distinguish the cost difference for the service when it is provided through contractors with the provider agency rather than employees. Service recipients must be enrolled in the Homeward Bound Waiver or the Community Waiver.

EFFECTIVE DATE: The Oklahoma Department of Human Services recommends that the increase in the rate become effective November 1, 2007.

Ms. Roberts stated that for service recipients receiving Agency Companion Services in the DDS waivers, the Department of Human Services expects an increase cost of \$336,899. The Department attests that there are adequate funds to cover the state share of the projected cost of services.

Number of Service Recipients	236
Estimated Annual Service Days	86,140
Total Cost of Increase	\$1,024,008
Federal Share (.6710 FMAP*)	\$687,109
State Share (.3290)	\$336,899

*FFY 08 FMAP Rate

MOTION: Member Miller moved for approval of Item 8a (employee rate) as presented. Member McFall seconded.

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

MOTION: Member Miller moved for approval of Item 8a (contractor rate) as presented. Member McFall seconded.

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

ITEM 9/DISCUSSION ITEM - PROPOSED EXECUTIVE SESSION AS RECOMMENDED BY THE DIRECTOR OF LEGAL SERVICES AND AUTHORIZED BY THE OPEN MEETINGS ACT, 25 OKLA. STATE. §307(B)(1),(4)&(7)

Howard Pallotta, Director of Legal Services

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

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

NEW BUSINESS

None.

ADJOURNMENT

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

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