



STATE OF OKLAHOMA
OKLAHOMA HEALTH CARE AUTHORITY

**MEDICAL ADVISORY COMMITTEE MEETING
TENTATIVE AGENDA
September 18, 2008
1:00 p.m. – OHCA Board Room
4545 N. Lincoln Blvd., Suite 124
Oklahoma City, OK 73105**

- I. Welcome, Roll Call, and Public Comment Instructions
- II. Approval of minutes of the July 17, 2008 Medical Advisory Committee Meeting
- III. Financial Report: Anne Garcia, Chief Financial Officer
- IV. Program Operations & Benefits Update: Becky Pasternik-Ikard, Director of Program Operations
- V. Provider Services Support Update: Paul Keenan, MD, Chief Medical Officer
- VI. Insure Oklahoma Update: Matthew Lucas, Director of Insure Oklahoma
- VII. PACE Program Update: Trevlyn Cross, Director, Indian Health Services
- VIII. Action Items: Cindy Roberts, Director of Program Integrity & Planning

Federally Initiated

1. SoonerCare eligibility rules are revised to implement the Living Choice program created to promote community living for persons with disabilities or long-term illnesses. The Living Choice program is Oklahoma's Money Follows the Person demonstration project made possible by Section 6071 of Public Law 109-171, the Deficit Reduction Act of 2005.

OHCA Initiated

2. Insure Oklahoma rules are revised to expand Individual Plan benefits to cover the following: (1) physical, occupational and speech therapy services for adults in an outpatient hospital setting; and (2) outpatient behavioral health services provided by an individual Licensed Behavioral Health Professional.
3. General Provision rules are revised to remove the complete Americans with Disabilities Act (ADA) and replace it with language that states OHCA will comply with all applicable sections of the ADA as some of the provisions do not apply to state government.
4. Psychologist rules are revised to allow reimbursement for services provided by student psychologists participating in an internship or fellowship in an accredited academic clinical psychology training program.
5. Inpatient behavioral health rules are revised to clarify individual plans of care must be reviewed every five to nine calendar days in acute settings and every 11 to 16 days in longer term treatment programs.
6. Rules are revised to add telemedicine as a service delivery option for certain providers in order to facilitate providing medical consultations, office visits and behavioral health services to members in rural areas, medically underserved areas, or geographic areas where there is a lack of local medical or psychiatric/mental health expertise.

7. Rules regarding nutritional services are revised to permit two of the six hours allowed to be done in a group setting for pregnant members who are at risk or those who have been recently diagnosed with gestational diabetes.
8. Rules are revised to remove obsolete prior authorization contact information.

OKDHS Initiated

9. Medical Assistance for Adults and Children Eligibility rules are being revised to:
 - (a) remove an incorrect procedure that was added to ABD LTC resource policy effective August 2007;
 - (b) clarify how loans and transfers of property can possibly affect the member's eligibility for long term care;
 - (c) clarify Workers' Compensation Medicare Set Aside Arrangements are not considered resources;
 - (d) clarify transfer or disposal of capital resources, for ABD, are not applicable unless the individual enters a nursing home or receives waiver services; and
 - (e) remove incorrect language that references AFDC and spend down.
10. Rules regarding the payment of Medicare Part A claims for skilled nursing facility care are revised to limit the SoonerCare payment to the Medicaid rate minus the total of all other payments. ***(Please note this rule in this section only is OHCA initiated and not OKDHS initiated. All remaining rules in this section are OKDHS initiated)***
11. ADvantage Waiver Services rules are revised to add an additional exception to the cost cap provision.
12. OKDHS/Aging Unit has requested emergency revisions to the Personal Care services rules to shift service authorization and monitoring from the OKDHS nurses to provider nurses. Other revisions update form numbers, terminology, and procedures for OKDHS staff.
13. SoonerCare eligibility rules are revised to allow individuals to apply for nursing home care (or private ICF/MR) at the OKDHS human services center (HSC) of their choice.

IX. Discussion

X. New Business

XI. Adjourn