



STATE OF OKLAHOMA
OKLAHOMA HEALTH CARE AUTHORITY

TRIBAL CONSULTATION MEETING

AGENDA

11 AM, MAY 3, 2016

BOARD ROOM

4345 N. LINCOLN BLVD.

OKLAHOMA CITY, OK 73105

1. Welcome—Dana Miller, Director of Tribal Government Relations
2. Proposed Rule, State Plan, Waiver, and Rate Amendments—William Baker, Senior Policy Specialist

Proposed Rule, Waiver, and State Plan Amendments

- 16-07 ADvantage Waiver
 - 2017-2018 SoonerCare Choice & Insure Oklahoma 1115(a) Demonstration Waiver Update
 - Proposed Amendments to the State Plan, 1115 SoonerCare Choice Demonstration Waiver, Medically Fragile 1915(c)
 - Proposed Amendment to the State Plan, reduction of payments for coinsurance and deductibles on all crossover claims
 - Proposed 1115 Waiver Amendment
3. Other Business—Dana Miller, Director of Tribal Government Relations
 - Proposed TMAM Terms & Conditions (T&C) Changes
 - Aged, Blind, & Disabled Care Coordination update.
 - 100% FMAP update.
 4. Adjourn—Next Tribal Consultation Scheduled for 11 AM, July 5, 2016

Proposed Rule, Waiver, and State Plan Amendments

16-07 ADvantage Waiver – The proposed policy revisions are to remove coverages for Speech and Language services from the Advantage Waiver, due to lack of utilization.

2017-2018 SoonerCare Choice and Insure Oklahoma 1115(a) Demonstration Waiver Extension Request – Pursuant to 42 CFR §431.408, the Oklahoma Health Care Authority (OHCA) is providing notice of its plan to submit an update to its current renewal application for the SoonerCare Choice and Insure Oklahoma 1115(a) waiver to the Centers for Medicare and Medicaid Services (CMS). The OHCA is requesting an additional two year extension of the waiver for the period January 1, 2017, to December 31, 2018. The OHCA welcomes comments on the continuation of the SoonerCare Choice and Insure Oklahoma programs. The existing waiver application is currently posted on the OHCA website. It can be found on the Policy Change Blog and the Native American Consultation Page. The OHCA will be accepting comments/feedback for the waiver application until June 3, 2016.

Proposed Amendments to the State Plan, 1115 SoonerCare Choice Demonstration Waiver, Medically Fragile 1915(c) Waiver, Living Choice demonstration and Program of All Inclusive Care of the Elderly PACE Capitation Contract Rates to Reduce Provider Reimbursement Rates Up to and Including 25 Percent – OHCA hosted two public forums and took action effective January 2016 to reduce provider reimbursement by three percent for providers reimbursed by the Medicare physician fee schedule and other methodologies. This included inpatient freestanding rehabilitation hospitals and hospitals utilizing DRG payment methodologies, outpatient hospital providers, clinical laboratories, physician & physician assistants, home health providers, freestanding ambulatory surgery centers/clinics, dentists, emergency transportation, DMEPOS, renal dialysis facilities, anesthesiologists, certified registered nurse anesthetists & anesthesiologist assistants, eye glasses, vaccine administration, and hospice providers.

Due to further anticipated decreases in state appropriated funding, OHCA will implement an across-the-board provider rate reduction of up to and including 25 percent effective for services rendered on or after June 1, 2016. The across-the-board provider rate reductions will impact inpatient freestanding rehabilitation hospitals and hospitals utilizing DRG payment methodologies, outpatient hospital providers, clinical laboratories, physician & physician assistants, home health providers, freestanding ambulatory surgery centers/clinics, dentists, emergency transportation, DMEPOS, renal dialysis facilities, anesthesiologists, certified registered nurse anesthetists & anesthesiologist assistants, eye glasses, vaccine administration, nursing facilities, ICFs/IID, and hospice providers. SoonerCare Choice care coordination, and SoonerExcell incentive payments, along with Program of All-Inclusive Care for the Elderly (PACE) capitation rates, the Medically Fragile waiver, and the Living Choice demonstration will also be impacted by the up to and including 25 percent across-the-board provider rate reduction.

The budget reductions will not include federally qualified health centers (FQHCs), rural health centers (RHCs), complex rehabilitation technology provider services, non-emergency transportation, payments for drug ingredients/physician supplied drugs, child abuse exams, Insure Oklahoma, health access networks, or services that are reimbursed with all federal dollars. OHCA is not taking action to reduce services for which other state agencies are appropriated the state dollars to operate specific SoonerCare programs.

Proposed Amendment to the State Plan, reduction of payments for coinsurance and deductibles on all crossover claims – Due to further anticipated decreases in state appropriated funding; OHCA will propose a State Plan Amendment (SPA) to reduce payments for coinsurance and deductibles on all Medicare crossover claims. The proposed methodology is to consider the Medicare paid amount payment in full for all crossover claims, excluding ITU provided services and physician supplied drugs. Total payments from all sources will not be less than the Medicaid established rate of payment per claim. No payment will be made when the sum of payments from all other sources is greater than the Medicaid rate. The new payment methodology for crossover claims will take effect for services rendered on or after June 1, 2016.

Proposed 1115 Waiver Amendment – The Oklahoma Health Care Authority (OHCA) proposes an amendment to the 1115 demonstration waiver to implement an individual Insure Oklahoma (IO) commercial insurance coverage program. The proposed program will provide health care access for uninsured Oklahoma adults. The proposed program will cover adults 19-64 who have incomes at or below 133 percent of the federal poverty level (FPL), offer a choice of commercial insurance plans, and require that these new eligible pay premiums based on their income on a sliding scale. The proposed program will also include personal responsibility financial incentives for healthy lifestyle choices which could allow incentive dollars to be used for premiums, co-payments or deductibles.

Proposed TMAM Terms & Conditions (T&C) Changes

The following changes are being made or new language added in the TMAM Agreements with the SFY17 renewal (the actual changes can be seen in the marked up versions of the TMAM Agreement which is attached).

