

AGENDA

November 15th, 2018
1:00 PM – 3:30 PM

Charles Ed McFall Board Room

- I. Welcome, Roll Call, and Public Comment Instructions: **Chairman, Steven Crawford, M.D.**
- II. Action Item: Approval of Minutes of the September 20th, 2018: **Medical Advisory Committee Meeting**
- III. Public Comments (2 minute limit)
- IV. MAC Member Comments/Discussion
- V. Financial Report: **Aaron Morris, Chief Financial Officer**
- VI. SoonerCare Operations Update: **Casey Dunham, Director of Provider Services**
 - A. Pharmacy Updates: **Burl Beasley, Senior Director of Pharmacy Services**
- VII. New Business: **Chairman, Steven Crawford, M.D.**
 - A. Election of Chairman and Co-Chairman
- VIII. Future Meeting:
January 17th, 2019
March 14th or Wednesday, March 27th, 2019
May 16th, 2019
July 18th, 2019
September 19th, 2019
November 21st, 2019

Moore, Norman, Yukon, and Edmond spring break: March 18-22
OKC spring break: March 11-22
- IX. Adjourn

Oklahoma Health Care Authority
MEDICAL ADVISORY COMMITTEE
MINUTES of the September 20, 2018 Meeting
4345 N. Lincoln Blvd., Oklahoma City, OK 73105

I. Welcome, Roll Call, and Public Comment Instructions:

Chairman Steven Crawford called the meeting to order at 1:00 PM.

Delegates present were: Ms. Teresa Bierig, Ms. Debra Billingsly, Ms. Mary Brinkley, Dr. Steve Crawford, Ms. Wanda Felty, Mr. Don Flinn, Ms. Terrie Fritz, Mr. Steve Goforth, Mr. Mark Jones, Dr. John Linck, Ms. Annette Mays, Dr. J. Daniel Post, Ms. Toni Pratt-Reid, Dr. Edd Rhoades, Dr. Jason Rhynes, Dr. Dwight Sublett, Mr. Rick Snyder, and Mr. Jeff Tallent.

Alternates present were: Ms. Tandie Hastings, Mr. Traylor Rains-Sims and Mr. Tony Fullbright, providing a quorum.

Delegates absent without an alternate were: Ms. Renee Banks, Dr. Kenneth Calabrese, Dr. Joe Catalano, Mr. Victor Clay, Dr. Arlen Foulks, Dr. Ashley Orynich, Mr. James Patterson, and Dr. Raymond Smith.

II. Approval of the July 19th, 2018 Minutes

Medical Advisory Committee

The motion to approve the minutes was by Mr. Jeff Tallent and seconded by Dr. Mike Talley and passed unanimously.

III. Public Comments (2 minute limit):

There were no public comments made at this meeting.

IV. MAC Member Comments/Discussion:

There were no MAC Member comments.

V. Financial Report:

Tasha Black, Senior Director of Financial Services

Ms. Black presented the financial report ending in June 2018. The state dollar budget variance is at a positive 29.8 Million dollars. On the program administrative services side we are under budget in Medicaid program spending by 10.3 million state dollars, and under budget in administrative services by 4.9 million state dollars. On the revenue side we are over budget in drug rebate and tobacco tax collection fees for 15.3 million state dollars and \$.7 million state dollars respectively. We also are under budget in medical refunds for \$1.4 million state dollars. In the last quarter of SFY 18 program expenditures began to trend downward after a bad flu season, ending the year, under budget with record drug rebate collections of \$115.3 million resulting in a positive state budget variance.

VI. SoonerCare Operations Update:

Marlene Asmussen, Director of Population Care Management

Ms. Asmussen presented the SoonerCare Operations Update to the committee. She presented information based on data for July of 2018. Patient Centered Medical Home enrollment is at 533,758 which is 347 less than June. Sooner Care Traditional has a current enrollment of 231,931 which is 1,489 more than the June. Insure Oklahoma has a total enrollment of 19,509, of which 5,329 are in the Individual Plan and 14,180 are in the Employee Sponsored Plan. SoonerPlan is up by 249, giving a total of 29,888. In total, SoonerCare enrollment is at 815,086 for June which is an increase of 1,415. For more detailed information, see item 6 in the MAC agenda.

VII. Section 1115(a) Waiver Amendment Proposals: Community Engagement and Health Management Program:

Tywanda Cox, Chief of Federal & State Policy

Ms. Cox presented the committee with an update on the Community Engagement proposal and the efforts taken by OHCA through the public process. OHCA has tried to make their way around the state, from Tulsa, Lawton, Norman, Pawnee, Enid, and Poteau, conducting over 40 meetings, both public forums as well as targeted meetings with our sister agencies. While out in the community we are trying to educate but also garner input while we develop our waiver, and the process. We are required to have our amendment waiver posted for 30 days, however, we have had ours posted for 90 days. We have received around 1,060 comments online, which will become a part of the waiver application. OHCA has created a 1-pager providing some background on the Governor's Executive Order, and HB2932, which has been signed into law.

There has been a lot of misconception, and we wanted to have a clear understanding of who the impacted population is, being the adults who are between ages 19 and 50, along with the Parent/Caretakers of children over the ages of 6. This is the 13th iteration of this document, as we keep getting input, we continue to make edits to provide a useful document. There is a theme of things that are a concern, such as transportation, childcare, and children between the ages of 7 to 12 but can't be left home alone, as well as finding work or volunteer hours in rural counties.

As we continue to partner with our sister agencies, such as Oklahoma Works, we are learning that your location depends on the opportunities at hand. We are in the process of identifying those opportunities and having those as a reference, should a member find themselves in a predicament with transportation. A program under Oklahoma Works has a contract with a local cab company to help those who are looking for work.

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As we continue to move forward, our next steps will be closing the comment period on September 30th, and submitting the proposed amendment in October. We will continue to have additional meetings through October, and are still willing to hold meetings in the community. Internally we have formed some workgroups with external partners to develop some policy around certain things as it relates to the reporting process. *Bridge to Coverage* is another workgroup that was formed for the members who fall in the gap, putting them over the 45% FPL (Federal Poverty Level), but not over the 100% FPL. These members will bridge to the Insure Oklahoma program. A premium will still have to be paid, and that is something we continue to work on.

An internal outreach workgroup was formed under our communications division and is working a collaboration with the other groups formed, as well as, member and provider services. This group has been tasked with trying to reach our 6,000 members, who we have not been able to attribute to an exemption category, or data match to show they have some type of community engagement. We are asking these members for their background, and some barriers they are faced with. The desire of our CEO, Becky Pasternik-Ikard, is to reach 100 members who will participate in a survey for us to have a better understanding.

Ms. Cox also provided an update on the Health Management Program 1115(a) waiver amendment request. We were mandated under Oklahoma statute to develop a program that seeks to improve the quality of care and reduce the cost for our SoonerCare members with chronic conditions. Our language in our waiver is defined on how we do that. In order to identify somebody to come into the Health Management Program, we use predictive modeling. We also have some language in there that talks about the time they can be on. We are asking to make that language a little broader so we can look at other things to bring them into our program, such as a referral from a physician. We wanted to be able to not have it so restrictive, and we wanted to have the language that will allow for a person to stay on as long as they need the service. This is just to modify our special terms and conditions to allow a little more flexibility

VIII. Proposed Rule Changes: Presentation, Discussion, and vote:

Sandra Puebla, Director of Federal & State Authorities

A face-to-face tribal consultation regarding the following proposed change was held on Wednesday, May 16, 2018, in the Charles Ed McFall Boardroom of the Oklahoma Health Care Authority (OHCA).

APA work folder 18-01 will be posted on the OHCA public website for a comment period through September 24, 2018.

18-01 Laboratory (Lab) Services Policy Update — The proposed revisions to the lab services policy strengthen the language delineating medical necessity and compensable and non-compensable lab services. Additional revisions add language to define penalties that can be enforced if a provider does not abide by the rules regarding medical necessity of lab services. Further revisions clarify that OHCA does not pay for all lab services listed in the Centers for Medicare & Medicaid Services (CMS) fee schedule, but only those that are medically necessary in addition to the four other conditions required for payment.

Budget Impact: Agency staff has determined that the proposed rule changes will result in a budget savings by decreasing reimbursement of medically unnecessary lab tests. Between 2014 and 2017, despite a decrease in member enrollment of 1.8 percent, there has been a 9.8 percent increase in members receiving laboratory tests and an increase of approximately \$502,384 in reimbursement for laboratory testing.

The rule change motion to approve was by Mr. Jeff Tallent and seconded by Dr. Dwight Sublett and passed unanimously.

IX. New Business: Chairman, Steven Crawford, M.D.

Dr. Jason Rhynes, MAC Member, representing Oklahoma Optometric Association, made a statement regarding State question 793.

Ms. Melody Anthony updated the committee that the report Marlene presented is the same report that goes to the board. We are trying to make sure that is the appropriate information that needs to be presented. We are surveying the board along with all MAC delegates and alternates. Tomorrow the email will be going out for the survey, so please provide some feedback so we can make sure what is being presented has value and gets you the information that you need.

X. Future Meeting

November 15th, 2018

XI. Adjournment

There was no dissent and the meeting was adjourned at 1:55p.m.



FINANCIAL REPORT

For the Two Months Ended August 31, 2018
Submitted to the CEO & Board

- Revenues for OHCA through August, accounting for receivables, were **\$736,560,392** or **1.1% under** budget.
- Expenditures for OHCA, accounting for encumbrances, were **\$746,348,358** or **1.3% under** budget.
- The state dollar budget variance through August is a positive **\$1,801,821**.
- The budget variance is primarily attributable to the following (in millions):

Expenditures:	
Medicaid Program Variance	2.8
Administration	.5
Revenues:	
Drug Rebate	(.8)
Medical Refunds	(.3)
Taxes and Fees	(.4)
Total FY 18 Variance	\$ 1.8

ATTACHMENTS

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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
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OKLAHOMA HEALTH CARE AUTHORITY
Summary of Revenues & Expenditures: OHCA
SFY 2019, For the Two Month Period Ending August 31, 2018

REVENUES	FY19 Budget YTD	FY19 Actual YTD	Variance	% Over/ (Under)
State Appropriations	\$ 192,306,976	\$ 192,306,976	\$ -	0.0%
State Appropriations - GME Appropriated Funds	\$ 18,340,720	\$ 18,340,720	\$ -	0.0%
Federal Funds	421,238,175	416,135,143	(5,103,031)	(1.2)%
Tobacco Tax Collections	8,375,298	8,050,759	(324,539)	(3.9)%
Quality of Care Collections	13,185,182	12,921,568	(263,614)	(2.0)%
Prior Year Carryover	3,000,000	3,000,000	-	0.0%
Federal Deferral - Interest	32,232	32,232	-	0.0%
Drug Rebates	26,919,365	25,077,440	(1,841,925)	(6.8)%
Medical Refunds	6,550,166	5,917,832	(632,335)	(9.7)%
Supplemental Hospital Offset Payment Program	54,537,243	54,537,243	-	0.0%
Other Revenues	83,304	240,478	157,174	188.7%
TOTAL REVENUES	\$ 744,568,662	\$ 736,560,392	\$ (8,008,270)	(1.1)%
EXPENDITURES	FY19 Budget YTD	FY19 Actual YTD	Variance	% (Over)/ Under
ADMINISTRATION - OPERATING	\$ 9,700,587	\$ 7,970,874	\$ 1,729,712	17.8%
ADMINISTRATION - CONTRACTS	\$ 16,768,059	\$ 16,696,281	\$ 71,778	0.4%
MEDICAID PROGRAMS				
<u>Managed Care:</u>				
SoonerCare Choice	6,657,484	6,603,618	53,866	0.8%
<u>Acute Fee for Service Payments:</u>				
Hospital Services	154,108,492	152,786,469	1,322,023	0.9%
Behavioral Health	3,320,864	3,455,396	(134,532)	(4.1)%
Physicians	69,734,766	65,945,857	3,788,909	5.4%
Dentists	22,384,498	23,048,012	(663,514)	(3.0)%
Other Practitioners	9,327,247	9,426,828	(99,581)	(1.1)%
Home Health Care	3,648,096	3,882,692	(234,596)	(6.4)%
Lab & Radiology	4,615,248	4,367,976	247,272	5.4%
Medical Supplies	9,049,422	8,329,932	719,490	8.0%
Ambulatory/Clinics	39,736,334	37,811,533	1,924,801	4.8%
Prescription Drugs	106,557,285	103,547,279	3,010,006	2.8%
OHCA Therapeutic Foster Care	28,805	527	28,278	0.0%
<u>Other Payments:</u>				
Nursing Facilities	93,655,059	95,550,649	(1,895,590)	(2.0)%
Intermediate Care Facilities for Individuals with Intellectual Disabilities Private	10,520,433	10,653,706	(133,273)	(1.3)%
Medicare Buy-In	28,991,988	28,823,906	168,082	0.6%
Transportation	11,942,156	12,224,512	(282,356)	(2.4)%
Money Follows the Person-OHCA	60,057	74,829	(14,772)	0.0%
Electronic Health Records-Incentive Payments	1,698,000	1,698,000	-	0.0%
Part D Phase-In Contribution	18,987,417	18,905,347	82,070	0.4%
Supplemental Hospital Offset Payment Program	114,411,560	114,411,560	-	0.0%
Telligen	1,824,490	1,789,898	34,592	1.9%
Total OHCA Medical Programs	711,259,701	703,338,528	7,921,174	1.1%
OHCA Non-Title XIX Medical Payments	89,382	1,955	87,427	0.0%
OHCA Non-Title XIX - GME	18,340,720	18,340,720	-	0.0%
TOTAL OHCA	\$ 756,158,449	\$ 746,348,358	\$ 9,810,091	1.3%
REVENUES OVER/(UNDER) EXPENDITURES	\$ (11,589,787)	\$ (9,787,966)	\$ 1,801,821	

OKLAHOMA HEALTH CARE AUTHORITY
Total Medicaid Program Expenditures
by Source of State Funds
SFY 2019, For the Two Month Period Ending August 31, 2018

Category of Service	Total	Health Care Authority	Quality of Care Fund	HEEIA	SHOPP Fund	BCC Revolving Fund	Other State Agencies
SoonerCare Choice	\$ 6,618,753	\$ 6,602,102	\$ -	\$ 15,135	\$ -	\$ 1,516	\$ -
Inpatient Acute Care	243,552,723	96,874,930	81,114	662,186	84,992,478	80,183	60,861,832
Outpatient Acute Care	82,334,765	54,941,436	6,934	934,586	25,649,937	801,872	-
Behavioral Health - Inpatient	10,627,173	2,108,811	-	70,117	3,352,856	-	5,095,389
Behavioral Health - Psychiatrist	1,762,875	1,346,585	-	-	416,290	-	-
Behavioral Health - Outpatient	2,635,298	-	-	-	-	-	2,635,298
Behavioral Health-Health Home	7,650,574	-	-	-	-	-	7,650,574
Behavioral Health Facility- Rehab	30,900,367	-	-	-	-	13,244	30,900,367
Behavioral Health - Case Management	441,610	-	-	-	-	-	441,610
Behavioral Health - PRTF	11,336,344	-	-	-	-	-	11,336,344
Behavioral Health - CCBHC	6,306,891	-	-	-	-	-	6,306,891
Residential Behavioral Management	1,732,196	-	-	-	-	-	1,732,196
Targeted Case Management	9,864,194	-	-	-	-	-	9,864,194
Therapeutic Foster Care	527	527	-	-	-	-	-
Physicians	78,034,409	64,822,218	9,683	974,894	-	1,113,956	11,113,658
Dentists	23,053,518	23,045,953	-	5,506	-	2,060	-
Mid Level Practitioners	345,646	343,613	-	1,982	-	51	-
Other Practitioners	9,162,709	8,993,547	74,394	79,544	-	15,223	-
Home Health Care	3,886,371	3,881,664	-	3,679	-	1,029	-
Lab & Radiology	4,496,973	4,337,768	-	128,997	-	30,209	-
Medical Supplies	8,375,135	7,874,789	451,922	45,203	-	3,221	-
Clinic Services	37,860,229	36,703,955	-	278,822	-	52,029	825,423
Ambulatory Surgery Centers	1,091,575	1,054,949	-	36,027	-	599	-
Personal Care Services	1,780,440	-	-	-	-	-	1,780,440
Nursing Facilities	95,550,649	58,030,410	37,520,238	-	-	-	-
Transportation	12,216,060	11,759,637	417,744	12,526	-	26,153	-
IME/DME	17,482,786	-	-	-	-	-	17,482,786
ICF/IID Private	10,653,706	8,708,345	1,945,360	-	-	-	-
ICF/IID Public	1,700,306	-	-	-	-	-	1,700,306
CMS Payments	47,729,253	47,652,774	76,479	-	-	-	-
Prescription Drugs	105,599,142	103,129,400	-	2,051,863	-	417,879	-
Miscellaneous Medical Payments	20,978	20,785	-	-	-	193	-
Home and Community Based Waiver	33,566,587	-	-	-	-	-	33,566,587
Homeward Bound Waiver	13,150,023	-	-	-	-	-	13,150,023
Money Follows the Person	74,829	74,829	-	-	-	-	-
In-Home Support Waiver	4,023,868	-	-	-	-	-	4,023,868
ADvantage Waiver	26,059,014	-	-	-	-	-	26,059,014
Family Planning/Family Planning Waiver	753,914	-	-	-	-	-	753,914
Premium Assistance*	9,867,750	-	-	9,867,750.12	-	-	-
Telligen	1,789,898	1,789,898	-	-	-	-	-
Electronic Health Records Incentive Payments	1,698,000	1,698,000	-	-	-	-	-
Total Medicaid Expenditures	\$ 965,788,058	\$ 545,796,924	\$ 40,583,870	\$ 15,168,816	\$ 114,411,560	\$ 2,559,418	\$ 247,280,714

* Includes \$9,785,990.64 paid out of Fund 245

OKLAHOMA HEALTH CARE AUTHORITY
Summary of Revenues & Expenditures:
Other State Agencies
SFY 2019, For the Two Month Period Ending August 31, 2018

REVENUE	FY19 Actual YTD
Revenues from Other State Agencies	\$ 110,588,068
Federal Funds	148,877,884
TOTAL REVENUES	\$ 259,465,952
EXPENDITURES	Actual YTD
Department of Human Services	
Home and Community Based Waiver	\$ 33,566,587
Money Follows the Person	-
Homeward Bound Waiver	13,150,023
In-Home Support Waivers	4,023,868
ADvantage Waiver	26,059,014
Intermediate Care Facilities for Individuals with Intellectual Disabilities Public	1,700,306
Personal Care	1,780,440
Residential Behavioral Management	1,051,927
Targeted Case Management	8,617,769
Total Department of Human Services	89,949,933
State Employees Physician Payment	
Physician Payments	11,113,658
Total State Employees Physician Payment	11,113,658
Education Payments	
Indirect Medical Education	17,482,786
Direct Medical Education	-
Total Education Payments	17,482,786
Office of Juvenile Affairs	
Targeted Case Management	336,984
Residential Behavioral Management	680,269
Total Office of Juvenile Affairs	1,017,253
Department of Mental Health	
Case Management	441,610
Inpatient Psychiatric Free-standing	5,095,389
Outpatient	2,635,298
Health Homes	7,650,574
Psychiatric Residential Treatment Facility	11,336,344
Certified Community Behavioral Health Clinics	6,306,891
Rehabilitation Centers	30,900,367
Total Department of Mental Health	64,366,473
State Department of Health	
Children's First	108,894
Sooner Start	364,926
Early Intervention	722,984
Early and Periodic Screening, Diagnosis, and Treatment Clinic	355,555
Family Planning	61,469
Family Planning Waiver	687,701
Maternity Clinic	709
Total Department of Health	2,302,240
County Health Departments	
EPSDT Clinic	104,232
Family Planning Waiver	4,744
Total County Health Departments	108,977
State Department of Education	74,348
Public Schools	3,214
Medicare DRG Limit	60,000,000
Native American Tribal Agreements	-
Department of Corrections	-
JD McCarty	861,832
Total OSA Medicaid Programs	\$ 247,280,714
OSA Non-Medicaid Programs	\$ 12,157,780
Accounts Receivable from OSA	\$ (27,458)

OKLAHOMA HEALTH CARE AUTHORITY
SUMMARY OF REVENUES & EXPENDITURES:
Fund 205: Supplemental Hospital Offset Payment Program Fund
SFY 2019, For the Two Month Period Ending August 31, 2018

REVENUES	FY 19 Revenue
SHOPP Assessment Fee	54,495,885
Federal Draws	\$ 67,010,851
Interest	39,075
Penalties	2,283
State Appropriations	(7,550,000)
TOTAL REVENUES	\$ 113,998,094

EXPENDITURES	Quarter	Quarter	Quarter	Quarter	FY 19 Expenditures
	7/1/18 - 9/30/18	10/1/18 - 12/31/18	1/1/19 - 3/31/19	4/1/19 - 6/30/19	
Program Costs:					
Hospital - Inpatient Care	84,992,478				\$ 84,992,478
Hospital -Outpatient Care	25,649,937				25,649,937
Psychiatric Facilities-Inpatient	3,352,856				3,352,856
Rehabilitation Facilities-Inpatient	416,290				416,290
Total OHCA Program Costs	114,411,560	-	-	-	\$ 114,411,560
Total Expenditures					\$ 114,411,560

CASH BALANCE	\$ (413,466)
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OKLAHOMA HEALTH CARE AUTHORITY
SUMMARY OF REVENUES & EXPENDITURES:
Fund 230: Nursing Facility Quality of Care Fund
SFY 2019, For the Two Month Period Ending August 31, 2018

REVENUES	Total Revenue	State Share
Quality of Care Assessment	\$ 12,915,019	\$ 12,915,019
Interest Earned	6,549	6,549
TOTAL REVENUES	\$ 12,921,568	\$ 12,921,568

EXPENDITURES	FY 19 Total \$ YTD	FY 19 State \$ YTD	Total State \$ Cost
Program Costs			
Nursing Facility Rate Adjustment	\$ 36,911,058	\$ 15,292,251	
Eyeglasses and Dentures	46,660	19,331	
Personal Allowance Increase	562,520	233,052	
Coverage for Durable Medical Equipment and Supplies	451,922	187,231	
Coverage of Qualified Medicare Beneficiary	172,126	71,312	
Part D Phase-In	76,479	76,479	
ICF/IID Rate Adjustment	903,484	374,314	
Acute Services ICF/IID	1,041,876	431,649	
Non-emergency Transportation - Soonerride	417,744	173,071	
Total Program Costs	\$ 40,583,870	\$ 16,858,691	\$ 16,858,691
Administration			
OHCA Administration Costs	\$ 86,440	\$ 43,220	
DHS-Ombudsmen	-	-	
OSDH-Nursing Facility Inspectors	-	-	
Mike Fine, CPA	-	-	
Total Administration Costs	\$ 86,440	\$ 43,220	\$ 43,220
Total Quality of Care Fee Costs	\$ 40,670,310	\$ 16,901,911	
TOTAL STATE SHARE OF COSTS			\$ 16,901,911

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.

OKLAHOMA HEALTH CARE AUTHORITY
SUMMARY OF REVENUES & EXPENDITURES:
Fund 245: Health Employee and Economy Improvement Act Revolving Fund
SFY 2019, For the Two Month Period Ending August 31, 2018

REVENUES	FY 18 Carryover	FY 19 Revenue	Total Revenue
Prior Year Balance	\$ 12,902,064	\$ -	\$ 9,993,886
State Appropriations	(3,000,000)	-	-
Tobacco Tax Collections	-	6,621,408	6,621,408
Interest Income	-	46,475	46,475
Federal Draws	204,074	5,821,787	5,821,787
TOTAL REVENUES	\$ 10,106,138	\$ 12,489,670	\$ 22,483,557

EXPENDITURES	FY 18 Expenditures	FY 19 Expenditures	Total \$ YTD
Program Costs:			
Employer Sponsored Insurance		\$ 9,785,991	\$ 9,785,991
College Students/ESI Dental		81,759	33,873
Individual Plan			
SoonerCare Choice		\$ 14,715	\$ 6,096
Inpatient Hospital		659,834	273,369
Outpatient Hospital		907,146	375,830
BH - Inpatient Services-DRG		65,652	27,200
BH -Psychiatrist		-	-
Physicians		964,603	399,635
Dentists		5,506	2,281
Mid Level Practitioner		1,873	776
Other Practitioners		78,371	32,469
Home Health		3,679	1,524
Lab and Radiology		127,019	52,624
Medical Supplies		44,861	18,586
Clinic Services		266,258	110,311
Ambulatory Surgery Center		36,027	14,926
Prescription Drugs		2,013,404	834,153
Transportation		12,169	5,042
Premiums Collected		-	(106,611)
Total Individual Plan		\$ 5,201,115	\$ 2,048,211
College Students-Service Costs		\$ 99,951	\$ 41,410
Total OHCA Program Costs		\$ 15,168,816	\$ 11,909,484
Administrative Costs			
Salaries	\$ 24,543	\$ 356,336	\$ 380,880
Operating Costs	9,662	9,375	19,037
Health Dept-Postponing			-
Contract - HP	78,047	67,006	145,053
Total Administrative Costs	\$ 112,252	\$ 432,718	\$ 544,970
Total Expenditures			\$ 12,454,454
NET CASH BALANCE	\$ 9,993,886	\$ 10,029,102	

**OKLAHOMA HEALTH CARE AUTHORITY
SUMMARY OF REVENUES & EXPENDITURES:**

**Fund 250: Belle Maxine Hilliard Breast and Cervical Cancer Treatment Revolving Fund
SFY 2019, For the Two Month Period Ending August 31, 2018**

REVENUES	FY 19 Revenue	State Share
Tobacco Tax Collections	\$ 132,159	\$ 132,159
TOTAL REVENUES	\$ 132,159	\$ 132,159

EXPENDITURES	FY 19 Total \$ YTD	FY 19 State \$ YTD	Total State \$ Cost
Program Costs			
SoonerCare Choice	\$ 1,516	\$ 440	
Inpatient Hospital	80,183	23,253	
Outpatient Hospital	801,872	232,543	
Inpatient Services-DRG	-	-	
Psychiatrist	-	-	
TFC-OHCA	-	-	
Nursing Facility	-	-	
Physicians	1,113,956	323,047	
Dentists	2,060	597	
Mid-level Practitioner	51	15	
Other Practitioners	15,223	4,415	
Home Health	1,029	298	
Lab & Radiology	30,209	8,760	
Medical Supplies	3,221	934	
Clinic Services	52,029	15,088	
Ambulatory Surgery Center	599	174	
Prescription Drugs	417,879	121,185	
Transportation	26,153	7,584	
Miscellaneous Medical	193	56	
Total OHCA Program Costs	\$ 2,546,174	\$ 738,390	
OSA DMHSAS Rehab	\$ 13,244	\$ 3,841	
Total Medicaid Program Costs	\$ 2,559,418	\$ 742,231	
TOTAL STATE SHARE OF COSTS			\$ 742,231

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.

OHCA MAC Meeting November 15, 2018 (August 2018 Data)

SOONERCARE ENROLLMENT/EXPENDITURES

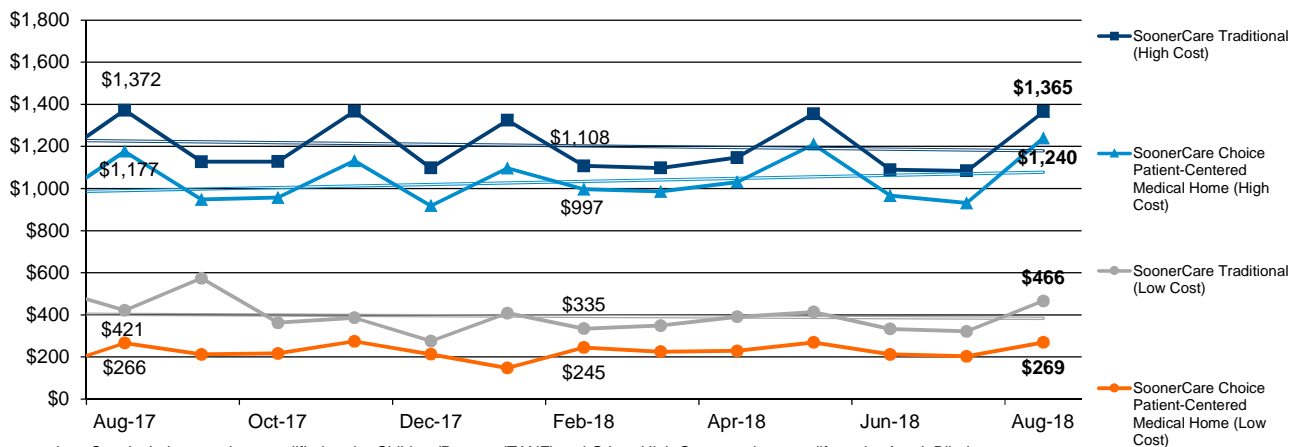
Delivery System		Enrollment August 2018	Children August 2018	Adults August 2018	Enrollment Change	Total Expenditures August 2018	PMPM August 2018
SoonerCare Choice Patient-Centered Medical Home		539,389	446,312	93,077	5,631	\$187,645,315	
Lower Cost	<i>(Children/Parents; Other)</i>	495,464	432,447	63,017	5,581	\$133,198,011	\$269
Higher Cost	<i>(Aged, Blind or Disabled; TEFRA; BCC)</i>	43,925	13,865	30,060	50	\$54,447,303	\$1,240
SoonerCare Traditional		232,394	85,119	147,275	463	\$211,649,081	
Lower Cost	<i>(Children/Parents; Other; Q1; SLMB)</i>	117,458	80,357	37,101	381	\$54,787,531	\$466
Higher Cost	<i>(Aged, Blind or Disabled; LTC; TEFRA; BCC & HCBS Waiver)</i>	114,936	4,762	110,174	82	\$156,861,550	\$1,365
Insure Oklahoma		19,622	530	19,092	113	\$8,227,241	
Employer-Sponsored Insurance		14,229	323	13,906	49	\$5,361,179	\$377
Individual Plan		5,393	207	5,186	64	\$2,866,061	\$531
SoonerPlan		30,400	2,597	27,803	512	\$310,915	\$10
TOTAL		821,805	534,558	287,247	6,719	\$407,832,552	

Enrollment totals include all members enrolled during the report month. Members may not have expenditure data. Children are members aged 0 - 20 or for Insure Oklahoma enrolled as Students or Dependents. Dual Eligibles (Medicare & Medicaid) are in the Traditional delivery system in both the Low Cost (Q1 & SLMB) and High Cost (ABD) groups. OTHER includes DDSD, PKU, Q1, Refugee, SLMB, STBS and TB.

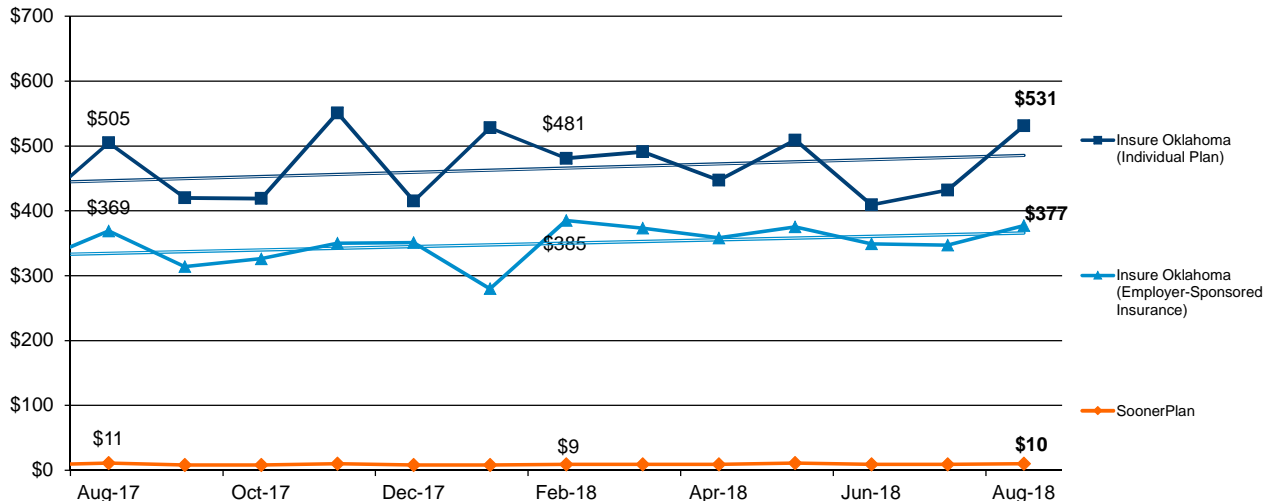
Total In-State Providers: 32,298 (+366) (In-State Providers counted multiple times due to multiple locations, programs, types, and specialties)								
Physician	Pharmacy	Dentist	Hospital	Mental Health	Optometrist	Extended Care	Total PCPs*	PCMH
9,536	962	1,075	161	4,398	620	391	6,802	2,441

*PCPs consist of all providers contracted as a Certified Registered Nurse Practitioner, Family Practitioner, General Pediatrician, General Practitioner, Internist, General Internist, and Physician Assistant.

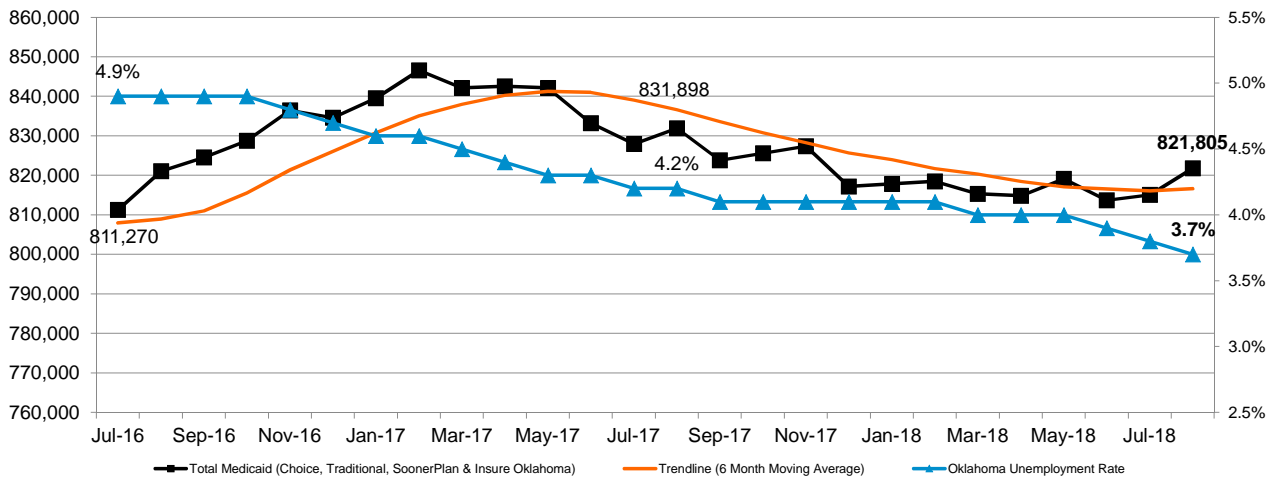
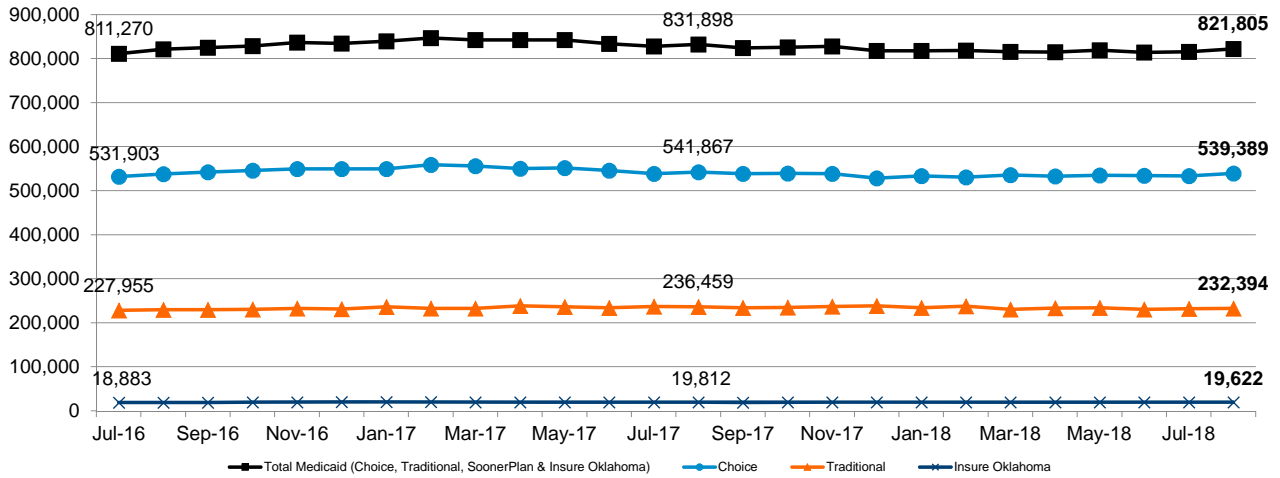
PER MEMBER PER MONTH COST BY GROUP



Low Cost includes members qualified under Children/Parents (TANF) and Other; High Cost members qualify under Aged, Blind or Disabled, Oklahoma Cares, TEFRA or a Home and Community-Based Services waiver.



ENROLLMENT BY MONTH



Oklahoma Unemployment Rate is from the Bureau of Labor Statistics 'Local Area Unemployment Statistics' (<https://www.bls.gov/lau/>) and is seasonally adjusted. Data was extracted on 9/26/2018. In June 2017 there were changes to the passive renewal system criteria that reduced the number of passively renewed members by 2/3rds.



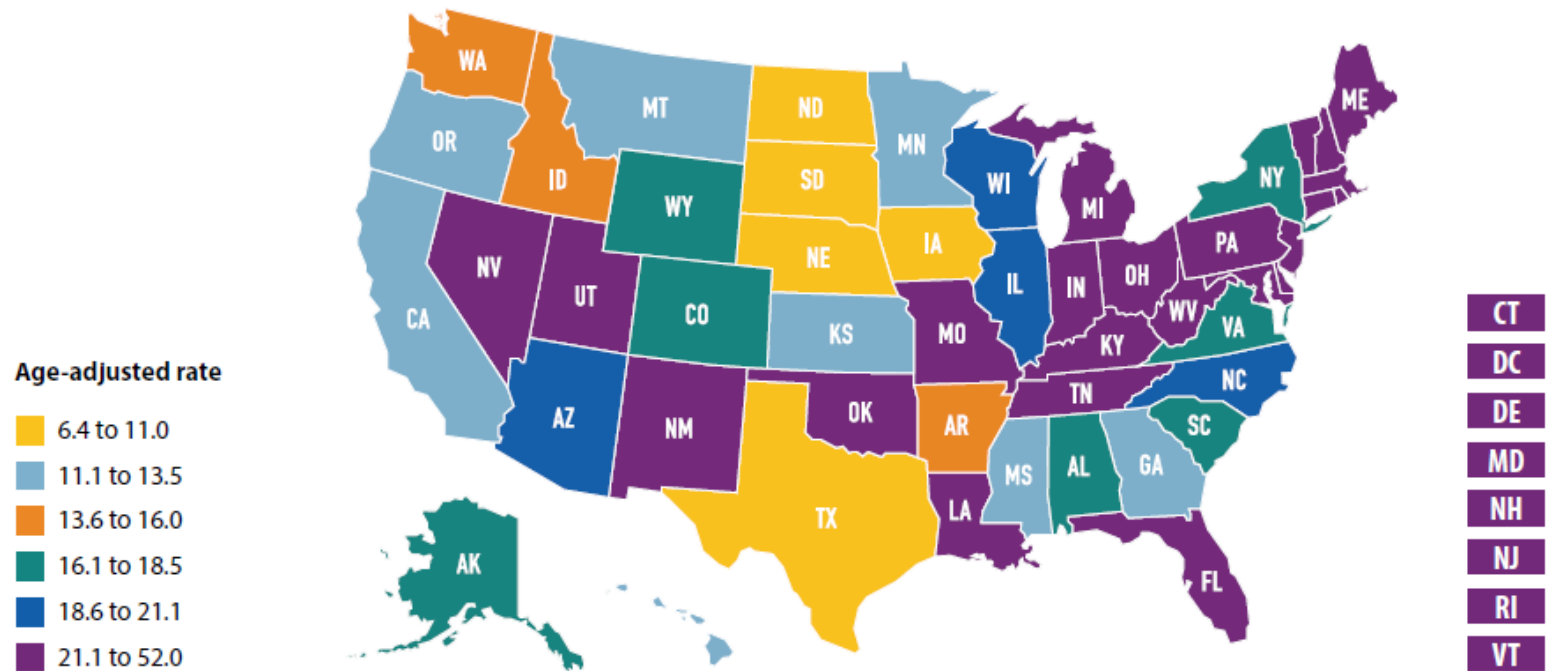
Pharmacy Update: SB1446 & Morphine Milligram Equivalent (MME)

November 15, 2018

Burl Beasley, Pharmacy Operations

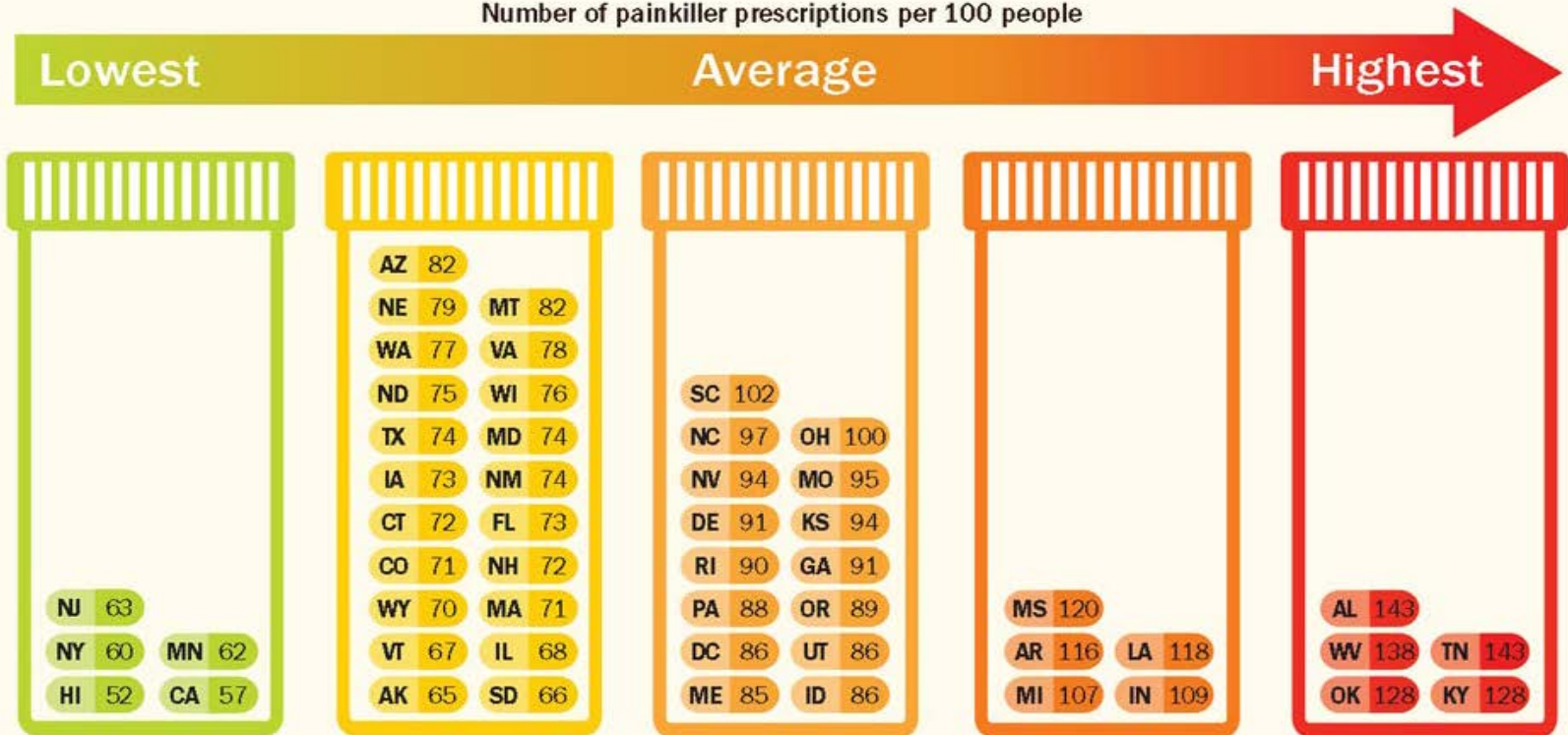
Oklahoma **HealthCare** Authority

Age-adjusted rates of drug overdose deaths by state — United States, 2016



Health care providers in different states prescribe at different levels.

Number of painkiller prescriptions per 100 people



State Abbreviation — **GA** 91 — Number of painkiller prescriptions per 100 people

Background

CDC's five-point strategy to preventing opioid overdoses and harms

Preventing Opioid Overdoses and Related Harms



SB1446

Regulation of Opioid Drugs

- Effective November 1, 2018
- 7 days supply on *initial* opioid prescription
 - Never Rx opioid
 - Surgery
 - Acute event
 - 1 year timeframe
- Prescription Monitoring Program

SB1446

Regulation of Opioid Drugs

- If a 2nd prescription is needed, then the prescriber, after consultation with the patient, can issue another prescription for a 7 day supply.
- If a 3rd prescription is needed, there must be in place a written agreement, pain management agreement, or pain management contract between the prescriber and patient.

SB1446

OHCA Response

- Pharmacy
 - 7 day supply edit parallels new regulation
 - Policy and legal review
- Continued monitoring of opioid claims
 - Multiple prescriber episodes (4+4 +90)
 - Opioid claims (13 Rx per year)
- Pharmacy Helpdesk
- Morphine Milligram Equivalent



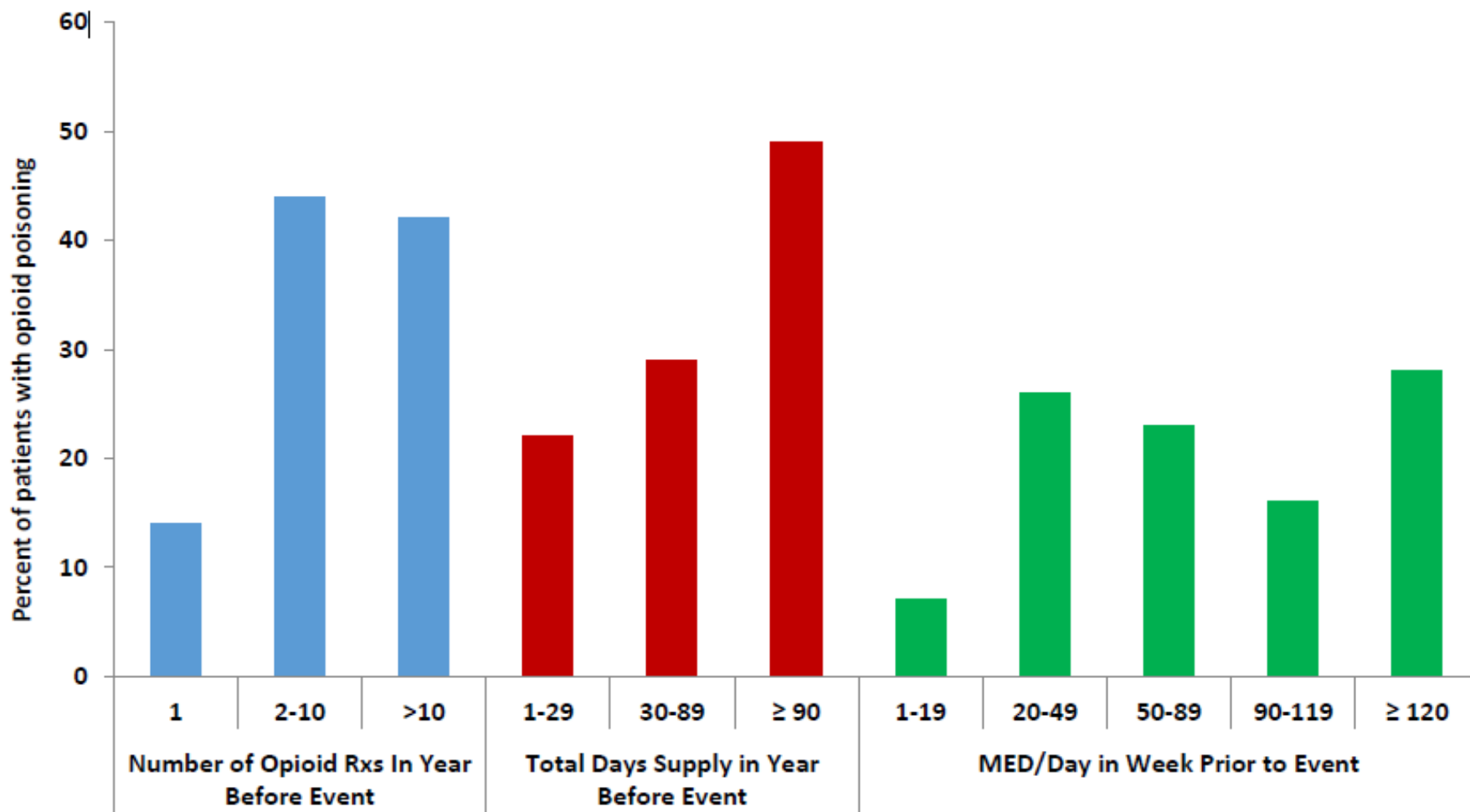
Morphine Milligram
Equivalent (MME)

Morphine Milligram Equivalent (MME)/Day

- the amount of morphine an opioid dose is equal to when prescribed, often used as a gauge of the abuse and overdose potential of the amount of opioid that is being given at a particular time

Source: CDC Guidelines for Prescribing Opioids for Chronic Pain available at: https://www.cdc.gov/drugoverdose/pdf/guidelines_at-a-glance-a.pdf

Prescription History Among People with Opioid Poisoning

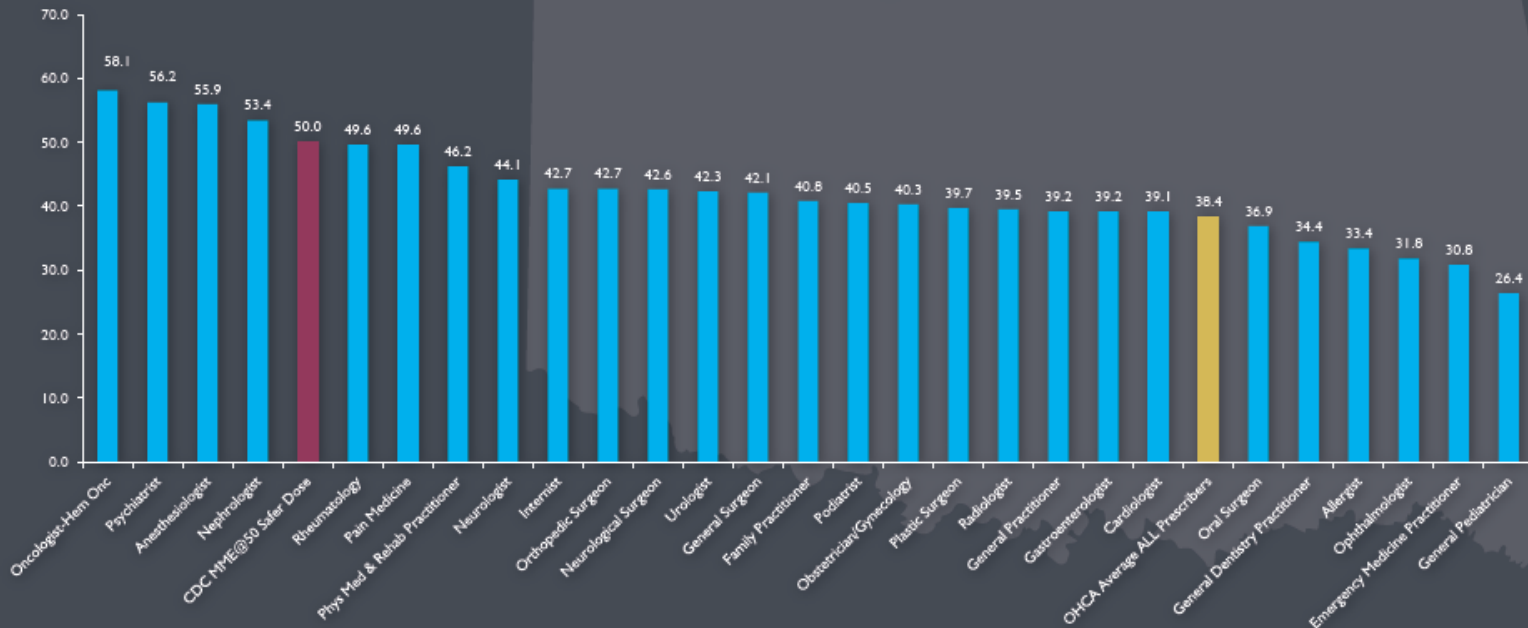


MME by Specialty

OHCA AVERAGE MME PER CLAIM PER DAY BY NPI PRESCRIBER SPECIALTY

paid opioid claims 90-days

(December 1, 2017 thru February 28, 2018)
n=3987 prescribers, 112 specialties
Data does not reflect diagnosis.



DUR Recommendation

- July 11, 2018 Drug Utilization Review Board Meeting
- Prior authorization required for members exceeding
 - 100 MME
 - Oncology, sickle cell, LTC diagnosis excluded
- Phase in approach beginning
 - January 2, 2019

MME Information

MME Threshold	# of Prescribers	Avg. # of Members Per Prescriber Exceeding MME Threshold	Prescriber Specialties	# of Members	# of Prescriptions
>240 MME	37	1.5	63.2% family or general practitioner; 23.7% internist; all other specialties <10%	57	151
>160 MME	218	2.6	56.6% family or general practitioner; 13.1% internist; all other specialties <10%	573	1,549
>120 MME	240	2.8	58.0% family or general practitioner; 11.9% internist; all other specialties <10%	678	1,842
>100 MME	432	6.5	46.4% family or general practitioner; 11.3% internist; all other specialties <10%	1,417	3,557

MME = morphine milligram equivalent; Avg. = average; # = number

MME of Commonly Prescribed Drugs

Drug/Strength	Quantity	Day Supply	Daily MME
Immediate-Release (IR) Products			
codeine 30mg	120	30	18
hydrocodone/APAP 5mg/325mg	120	30	20
hydrocodone/APAP 7.5mg/325mg	120	30	30
hydrocodone/APAP 10mg/325mg	120	30	40
hydromorphone IR 2mg	120	30	32
hydromorphone IR 4mg	120	30	64
hydromorphone IR 8mg	120	30	128
oxycodone IR 15mg	120	30	90
oxycodone IR 20mg	120	30	120
oxycodone/APAP 7.5mg/325mg	120	30	45
Extended-Release (ER) Products			
fentanyl patch 25mcg	10	30	60
fentanyl patch 37.5mcg	10	30	90
fentanyl patch 50mcg	10	30	120
fentanyl patch 75mcg	10	30	180
Hysingla [®] ER (hydrocodone ER) 100mg	30	30	100
Hysingla [®] ER (hydrocodone ER) 120mg	30	30	120
Oxycontin [®] (oxycodone ER) 30mg	60	30	90

MME = morphine milligram equivalent; APAP = acetaminophen

Communication Strategies

- Pharmacy notifications – “FAX Blast”
- Provider notification
 - MAC
 - Provider Newsletter
 - Provider Portal
 - Prescriber specific communications

Selected Resources/References

- Slide 2: Age-adjusted rates of drug overdose deaths by state — United States, 2016 available at: <https://www.cdc.gov/nchs/products/databriefs/db294.htm> accessed [November 5](#), 2018.
- Slide 3 Opioid Painkiller Prescribing infographic available at: <https://www.cdc.gov/vitalsigns/opioid-prescribing/infographic.html#infographic1>
- Slide 4 – Confronting opioids available at: <https://www.cdc.gov/features/confronting-opioids/index.html> accessed October 8, 2018.
- Slide 8: CDC Guidelines for Prescribing Opioids for Chronic Pain available at: https://www.cdc.gov/drugoverdose/pdf/guidelines_at-a-glance-a.pdf
- Slide 10: <https://www.fda.gov/downloads/Drugs/NewsEvents/UCM454767.pdf>
- CDC 2018 Annual Surveillance Report of Drug Related Risks and Outcomes – United States available at: <https://www.cdc.gov/drugoverdose/pdf/pubs/2018-cdc-drug-surveillance-report.pdf> accessed [November 5](#), 2018.