OKLAHOMA HEALTH CARE AUTHORITY BOARD MEETING

March 12, 2009 at 1:00PM
Held at Oklahoma Health Care Authority
4545 N. Lincoln Blvd., Suite 124
Oklahoma City, OK

AGENDA

Items to be presented by Chairman McFall

- 1. Call To Order/Determination of quorum Chairman Ed McFall
- 2. Approval of February 12, 2009 Board Minutes

Items to be presented by Mike Fogarty, Chief Executive Officer

3. Discussion Item - Presentation of All Star Employees for the following months:

December, 2008 - Brandie Candelaria, Behavorial Health

Items to be presented by Mike Fogarty, Chief Executive Officer

- 4. Discussion Item Chief Executive Officer's Report
 - a) Financial Update Carrie Evans
 - b) Medicaid Director's Update Lynn Mitchell, M.D.
 - c) Legislative Update Nico Gomez

Item to be presented by Chairman McFall

5. Discussion Item - Reports to the Board by Board Committees

Audit Finance Committee - Member Miller

Legislative Committee - Sandra Langenkamp

Rules Committee - Anthony Armstrong

Items to be presented by Cindy Roberts, Director of Program Integrity and Planning

- 6. Recommendation regarding Conflicts of Interest Panel regarding rules Howard Pallotta, Director of Legal Services
 - a) Action Item Consideration and Vote Upon Declaration of Emergency Rule as listed on Rules Agenda
 - b) Action Item Consideration and Vote Upon Declaration of Substantive Rule as listed on Rules Agenda
 - c) Action Item Consideration and Vote upon Permanent Rules noted in the Rules Agenda (see rules agenda)

Item to be presented by Chairman McFall

7. Proposed Executive Session as Recommended by the Director of Legal Services and Authorized by the Open Meetings Act, 25 Okla. State. $\S307(B)(1),(4)\&(7)$

Status of Pending Suits and Claims

2.		CJ-04-8834 CJ-2008-9540 CIV-08-1133-F
5.	Moore v. OHCA Stevens v. OHCA Morris v. OKDHS	CJ 2008-88 CJ-2008-151 CJ-08-71
	2	CJ-08-85 (Dewey) CIV-08-01122-L

- 8. New Business
- 9. Adjournment

Next Board Meeting April 9, 2009 Oklahoma Health Care Authority

Rules Agenda March 12, 2009

- I. Items subject to the Administrative Procedures Act (Emergency).
 - A. ADvantage Program Waiver Services rules are revised to add Assisted Living services as a compensable service under the ADvantage Waiver program. (Reference APA WF # 09-06 A & B)
- II. Adoption of Permanent Rules as required by the Administrative Procedures Act.

The following rules $\underline{\text{HAVE}}$ previously been approved by the Board and have Gubernatorial approval under Emergency rulemaking.

- A. Revising SoonerCare eligibility rules to allow individuals to apply for nursing home care (or Private ICF/MR) at the OKDHS human services center of their choice. (Reference APA WF # 08-33)
- B. Revising Insure Oklahoma/O-EPIC rules to expand Individual Plan (IP) benefits to cover physical, occupational, and speech therapy services for adults in an outpatient hospital setting and outpatient behavioral health services provided by an individual Licensed Behavioral Health Professional. (Reference APA WF # 08-35)
- C. Revising SoonerCare rules to: (1) incorporate the patient-centered medical home model of care in which providers are paid a monthly care coordination payment in addition to reimbursement for SoonerCare compensable services at the fee-for-service rate; (2) require provider or physician groups to designate a medical director to serve as primary contact with OHCA; (3) include a section on provider networks; and (4) include language regarding the development of a payment for excellence program. (Reference APA WF # 08-19)
- D. Revising SoonerCare eligibility rules to: (1) allow the use of tribal membership cards, Certificate of Degree of Indian Blood cards, and Oklahoma Voter Registration cards to verify citizenship and/or identity; and (2) allow time-limited coverage for Iraqis and Afghans with special immigrant status pursuant to Public Law 110-161 and 110-181. (Reference APA WF # 08-44)
- E. Revising Outpatient Hospital and Free-Standing Ambulatory Surgery Center rules to reflect upcoming changes to the reimbursement methodology for outpatient surgery services. (Reference APA WF # 08-47)
- F. Revising Personal Care rules to transfer the responsibility for the authorization of service units and monitoring of service provisions from OKDHS nurses to agency provider nurses. (Reference APA WF # 08-22)
- G. Revising rules to require the use of the new Interactive Voice Response Authentication (IVRA) time and attendance system for providers of Personal Care and certain in-home Advantage services. (Reference APA WF # 08-29 A & B)
- H. Revising Non-Emergency Transportation rules to remove specific reimbursement language from policy and refer to the state plan. (Reference APA WF # 08-49)

- I. Revising Dentist rules to add the American Dental Association's version of current dental terminology (CDT) in order to communicate information related to codes and procedures for administration. (Reference APA WF # 08-04)
- J. Revising Dentistl rules are revised to: (1) require a clinical examination preceding any radiographs, and consideration of patient history, prior radiographs, caries risk assessment and dental and general health needs of the patient; (2) allow, with prior authorization, panoramic x-rays more than once every 36 months for the detection and treatment of oral disease; (3) limit reimbursement for the application of ceramic based and cast mental based crowns to natural teeth only; and (4) add clarification that payment for crowns includes all related follow up service for a two year period. (Reference APA WF # 08-41)
- K. Revising Grievance Procedures and Process rules to reflect current practice for provider appeals. (Reference APA WF # 08-40)
- L. Revising Insure Oklahoma/O-EPIC rules to expand current Employer Sponsored Insurance and Individual Plan coverage from an employee size of 50 to 250 employees and include coverage for Oklahoma full-time college students age 19 through 22. (Reference APA WF # 08-55)
- III. Adoption of Permanent Rules as required by the Administrative Procedures Act.

The following rules <u>HAVE</u> previously been approved by the Board and are pending Gubernatorial approval under Emergency rulemaking.

- A. Revising Outpatient Behavioral Health rules to: (1) remove references to billing and documentation details which will now be found in the Behavioral Health Provider Billing Manual; (2) add Multi-Systemic Therapy as a service option; and (3) update terminology. (Reference APA WF # 08-50)
- IV. Adoption of Permanent Rules as required by the Administrative Procedures Act.

The following rules HAVE NOT previously been reviewed by the Board.

- A. Revising SoonerCare eligibility rules to: (1) remove an incorrect procedure for legal action that was added to ABD long term care policy effective August 2007; (2) clarify how loans and transfers of property can possible affect the member's eligibility for long term care; (3) clarify Workers' Compensation Medicare Set Aside Arrangements are not considered resources; (4) clarify transfer or disposal of capital resources for ABD individuals are not applicable unless the individual enters a nursing home or receives waiver services; and (5) remove incorrect language that references AFDC and spend down. (Reference APA WF # 08-23)
- B. Revising rules to clarify that additional reimbursement is not allowed for joint injection codes that have a global coverage designation. (Reference APA WF # 08-13)
- C. Revising eligibility rules to comply with Public Laws 104-204, 108-183, and 106-419 to disregard certain payments made to certain Vietnam and Korean veterans' children with spina bifida and children of women Vietnam veterans who suffer from certain birth defects. (Reference APA WF # 08-25)
- D. Revising eligibility rules for individuals receiving pregnancy related

- benefits under Title XXI (Soon to be Sooners program) regarding the issuance of computer generated notices. (Reference APA WF # 08-21)
- E. Revising rules to update sections referencing an incorrect citation regarding a health care provider's obligation to report suspected child abuse and/or neglect discovered through screenings and regular examinations. (Reference APA WF # 08-54)
- F. Revising rules to update the premium assistance program name from O-EPIC to Insure Oklahoma/O-EPIC. Several current business processes within the Insure Oklahoma/o-EPIC program are also updated. The premium assistance program's name changes to Insure Oklahoma/O-EPIC to coincide with an extensive statewide marketing campaign. (Reference APA WF # 08-56)
- G. Revising rules to allow the Oklahoma Health Care Authority to accept cash medical support payments by non-custodial parents if there is no access to health insurance for their child at a reasonable cost (5% or less of the non-custodial parent's income). The administration and collection of the payments will be handled by the Oklahoma Department of Human Services, Child Support Enforcement Division. (Reference APA WF # 08-51)
- H. Revising agency rules in order to remove provider eligibility requirements for psychologists from the coverage section of the psychologist rules. Revisions also update terminology and bring rules in to line with current OHCA practices. (Reference APA WF # 08-53)
- I. Revising DDSD rules to: (1) provide clarification relating to service utilization, provisions, authorizations, limitations, and eligibility requirements; (2) specify provider requirements and related activities of targeted case management to meet federal requirements; (3) clarify provider responsibilities and limitations in the agency companion program; (4) specify devices and services allowable through assistive technology; (5) clarify physical plant expectations for services provided in center-based settings; and (6) amend policy to reflect appropriate terminology. (Reference APA WF # 08-46 A, B, & C)