



OHCA budget latest, spring provider training, medical homes compliance review updates and more

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OHCA Provider Checkup, Spring 2015



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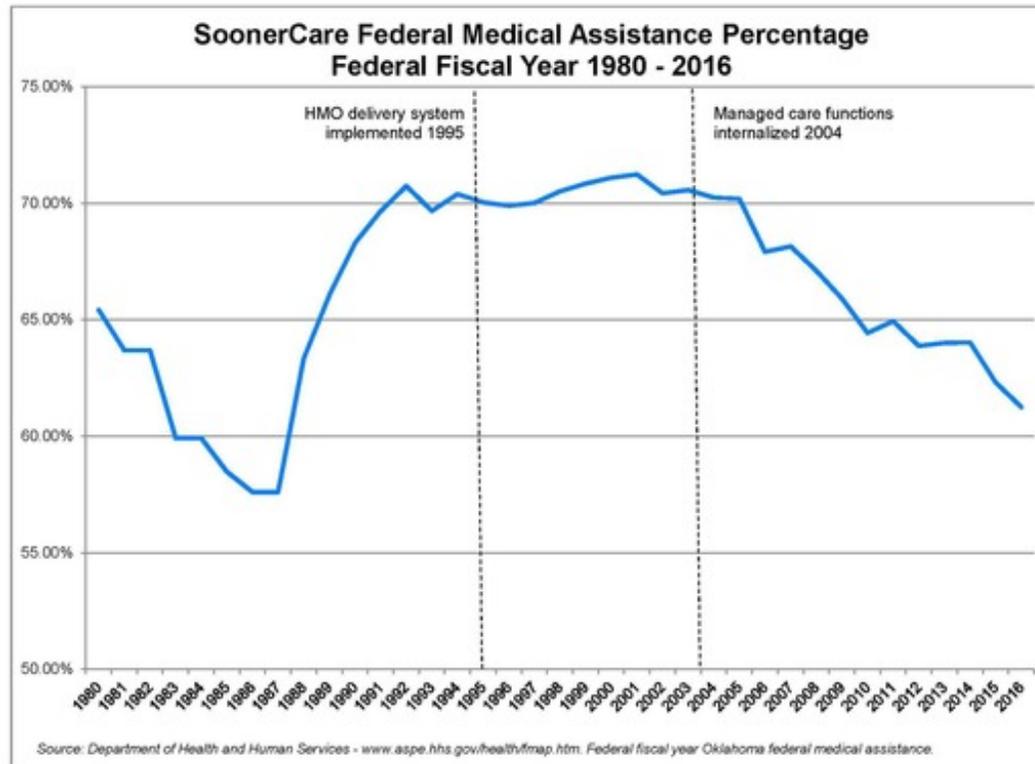
About the budget

The state Board of Equalization announced in February a budget shortfall of \$611 million for state fiscal year (SFY) 2016. This is double initial projections and will prove to be a challenge for state agencies as they make the difficult decisions necessary for submitting a balanced budget.

The Oklahoma Health Care Authority (OHCA) is no exception. Our vision is for Oklahomans to enjoy optimal health status through access to quality health care regardless of their ability to pay. We are responsible for helping our neighbors when they fall on difficult times and require access to critical prenatal care, preventive checkups for a newborn baby, screening for developmental delays or therapies for battling cancer. We are proud to work together with our members and provider network to care for Oklahomans in their times of need and to provide resources to keep them healthy. This benefits us all.

In order to simply keep pace with the increased need in our state, OHCA will require an additional state appropriation of \$120 million for SFY 2016. Several variables contribute to this need for additional state dollars. Three primary drivers are the decline in the federal matching rate for medical services (requiring an additional \$45.5 million), growth in utilization of services of approximately two percent (requiring an additional \$26 million) and replacement of one-time carryover funds from the previous state fiscal year (requiring an additional \$31 million).

The Federal Medical Assistance Percentage (FMAP)—the percent of every SoonerCare dollar spent on medical services that is provided by the federal government—will decline for the second year in a row. The current FMAP rate is 62.30 percent, but will decrease to 60.99 percent effective October 1, 2015, resulting in a loss of approximately \$45.5 million. A state's FMAP rate is based on their per capita income compared to the per capita income for the nation. Given that our state's economy has improved in recent years based on this indicator, the federal government provides fewer dollars to the state for covering the cost of medical services provided to SoonerCare members. However, in spite of strong economic performance in previous years, Oklahoma has not seen a decline in the need for access to quality health care. With increased need and decreased supply of federal funds, more state dollars are requested.



Furthermore, the Children’s Health Insurance Program (CHIP) is set to expire September 30 of this year unless Congress votes to reauthorize the program. Under current CHIP guidelines, the federal government provides almost \$0.73 of every dollar spent by SoonerCare on medical services for our children in families with annual incomes from 134 to 185 percent of the Federal Poverty Level (FPL). If Congress votes to reauthorize CHIP, they may choose to do so at the current rate or they have the option to increase the federal match to 95.69 percent which would reduce our request for state funds by \$42 million. If CHIP is not reauthorized, SoonerCare will continue to provide coverage for these children; however, the federal match will decrease to 60.99 percent—the same rate set for children in families with annual incomes at or below 133 percent of FPL. The uncertainty surrounding CHIP reauthorization certainly has an impact on potential budget scenarios. The request for \$120 million state dollars assumes that CHIP is not reauthorized (a change of \$14.4 million state dollars). Adjustments to the request will be made if this changes.

Given that OHCA’s budget request is based on the dollars required to continue operating the SoonerCare program in its current form with the existing benefit structure, an appropriation of less

than \$120 million will require targeted spending cuts to comply with the state's balanced budget mandate. We are hopeful for the best, but must prepare for less than optimal scenarios.

As in previous years, OHCA will work with members, providers and other stakeholders over the next few months to identify potential areas for budget reductions. While the agency is among the most efficient in the country with administrative costs of less than three percent of our overall budget, we will continue to tighten our belts and search for additional administrative savings to minimize to the extent possible any reductions in optional medical services or provider rates. Optional services are few but include those with a significant impact on the lives of our members such as pharmacy benefits, organ transplants and dialysis. While our initial budget request submitted in September included restoration of provider rates to 100 percent of the Medicare fee schedule where applicable, this is made much more difficult in light of the current budget outlook.

As always, we encourage you to submit ideas for potential cost savings. Though we will meet with a number of provider and stakeholder associations, you may submit your ideas individually to ProviderNews@okhca.org. We will continue to update you as we know more about our final budget appropriation and the impact on our programs.

Save the date: 2015 Spring Provider Training Workshops

You and your staff are invited to attend the Spring 2015 SoonerCare Provider Training Workshops hosted by OHCA and HP Enterprise Services.

- Durant – April 23
- Enid – April 30
- OKC – May 13 - 14
- Tulsa – May 27 - 28



Classes include: Dos, Don'ts and Did You Knows of Oklahoma SoonerCare; Navigating the OHCA Public Website; Understanding and Correcting Claim Denials; Electronic Referrals; DMEPOS Pricing, Policy and Process Changes; Patient-Centered Medical Home Compliance Review Updates; 1915(c) and Living Choice Updates; Medication Policy Updates; and Tobacco Cessation.

OHCA and HP highly recommend that all providers attend this workshop!

Class descriptions further explain the covered topics and recommended audience. Classes will fill up soon, so mark your calendar and register today!

<http://www.okhca.org/classes>

Medical homes compliance review gets makeover

Starting March 15, 2015, the OHCA SoonerCare Compliance Department will implement updated criteria for the medical home compliance review. The patient-centered medical home (PCMH) compliance review is separate and distinct from the OHCA program integrity (PI) audits. A PCMH compliance review does not replace a PI audit. The compliance review updates do not alter the medical home requirements. The updates are the result of an extensive quality review focused on improving and standardizing the medical home compliance review.

Each compliance review has three components: medical record review, medical home compliance review and basic contract compliance review. The primary update for the medical home review involves the quality medical record review. Previously, each element of the medical record review was weighted the same. Beginning this year, each of the medical record elements will have a weighted score based on medical significance for the quality review. A minimum of 75 percent of the total points available for each tier level is required to be considered compliant. This update has the potential to impact future compliance review scores.

Please note each medical record reviewed must include the member's history: medical, surgical, social and family. Per best standard practice standards, this history will be reviewed for an annual update.

For more details on these PCMH updates, you can access provider letter 2015-02 on our [website](#).

Pharmacy

Opioids and Pregnancy



Earlier this year, the [CDC's Morbidity and Mortality Weekly Report](#) published a study by the National Center on Birth Defects and Developmental Disabilities (NCBDDD) that indicated more than a third of reproductive-aged women (aged 15 – 44 years) enrolled in Medicaid (and more than a quarter of those with private insurance) filled a prescription for an opioid pain medication each year from 2008 – 2012. The most commonly prescribed drugs in their report were hydrocodone, codeine and oxycodone. Use of these medications (particularly in early in pregnancy, when many women are unaware that they are pregnant) could potentially lead to birth defects and other poor pregnancy outcomes which could negatively affect a child's health over the lifespan.

Additionally, the U.S. Food and Drug Administration (FDA) released a new [Drug Safety Communication regarding the possible risks of analgesic use during pregnancy](#), for both prescription and over-the-counter (OTC). The FDA urges providers to carefully weigh the benefits and risks of these medications (opioids, NSAIDs, and even acetaminophen) before prescribing them to pregnant

women or women reproductive age for the treatment of pain.

OHCA's [Opioid Prescribing Guidelines](#) webpage is a resource providers can use to help them prescribe safely and responsibly. Log on to access information on how best to prescribe opioids in Oklahoma [office-based settings](#) and [emergency departments \(EDs\)/Urgent Care Clinics \(UCCs\)](#), as well as to learn about agency efforts to combat opioid misuse, abuse and overdose.

Cost-saving move for colonoscopy prep

OHCA is engaged in an effort to improve cost-effective utilization of bowel preparation medications for imaging procedures. As such, SoonerCare makes available non-branded bowel preparation medications for our members. These products offer cost savings and similar therapeutic effectiveness compared to the frequently used brand name products.

Non-branded bowel preparation medications generally cost \$15 - \$30; branded products range in cost from \$70 to \$117. The following bowel preparation products are available as cost-effective generics:

- GoLYTELY®
- CoLyte®
- NuLYTELY®
- TriLyte®

SoonerCare members have a six prescription limit each month, of which only two can be branded products. A brand name bowel preparation medication does count against the member's monthly limit of two brand name medications. We encourage you to consider prescribing generic medications when possible.

It is important to note that SoonerCare members pay a flat copay of \$4.00, regardless of the cost of the medication. Some over-the-counter (OTC) products, including magnesium citrate oral solution, may be similar to the member's copay and would not count against the member's prescription limit.

Dental

Medical providers: New billing code for topical fluoride varnish

The American Medical Association (AMA) is responsible, in part, for developing Current Procedural Terminology (CPT) billing codes. For 2015, the AMA has established a new CPT



code for providers to utilize when performing application of topical fluoride varnish.



Effective March 1, 2015, all physicians or qualified health care professionals (physician assistants or nurse practitioners) **must use the AMA CPT Code 99188** – “Application of topical fluoride varnish by a physician or other qualified health care professional” – **when providing this service to SoonerCare and Insure Oklahoma members. Only dental providers will continue to utilize the ADA CDT code D1206.**

New dental videos and resources now available for members

OHCA is growing the number of oral health resources provided online for our members. Among them are dental videos and one sheets full of helpful tips and information. Be sure to check them out at www.okhca.org/memberdental and recommend them to your patients who are seeking or needing additional dental health advice.

Electronic Health Records



Don't miss out!

As of December 2014, the Electronic Health Records (EHR) Incentive Program paid \$103,837,023 for 104 eligible hospitals and \$55,252,837 for 2,226 eligible professionals. If you are an eligible hospital or eligible professional, it's not too late to receive these dollars, too.

The deadlines for eligible hospitals and eligible professionals to begin receiving EHR incentive payments are fast upon us. Federal fiscal year (FFY) 2015 is the last year for eligible hospitals to begin attestation and still earn incentive payments; whereas, calendar year (CY) 2016 is the last year for eligible professionals to begin and still earn incentive payments.

Long-Term Care

Living Choice hits benchmark

The Oklahoma [Living Choice](#) Project promotes community living for people of all ages who have disabilities or long-term illnesses. The project gives Oklahomans more options for managing their health care needs and adds more balance to the state's long-term care system.

With grant funding from the Centers for Medicare & Medicaid Services (CMS), under the Money Follows the Person (MFP) Rebalancing Demonstration, OHCA helps individuals transition from nursing facilities into their own homes in the community. Oklahoma's transition benchmark for CY 2014 was to safely move 136 participants from various institutional settings from across the state back to community living. The Oklahoma Living Choice Project successfully met this goal by transitioning 14 participants from the aged population, 94 participants from the intellectually disabled population, and 28 participants from the physically disabled population.



Health Promotions & Community Relations

Cooking demos now playing at SoonerFit.org

Eating healthier just got easier! New on [SoonerFit.org](#) – how to prepare gourmet dishes on a shoestring budget.

Anyone can log on to learn how to make a delicious salad and entrée in minimal time, while spending minimal dollars. In two short videos, local Chef Sergio Garcia (Sergio's Italian Bistro, Norman) takes viewers step-by-step through each recipe. More cooking videos will be posted in the near future.

We hope that you to recommend SoonerFit.org to any of your patients needing or desiring a healthier lifestyle. The website includes links to local farmers' markets that accept SNAP (Supplemental Nutrition Assistance Program) benefits, tobacco cessation resources, healthy recipes, low-cost gyms, motivational videos, exercise routines, contests and lots more!

Let's snuff out tobacco use in Oklahoma

As a trusted [healthcare provider](#), you are in a unique position to help your patients quit tobacco for good.

OHCA encourages providers to refer their patients to the [Oklahoma Tobacco Helpline](#) (OTH). The helpline is a FREE service (available by phone or online) and it's open to all Oklahomans who desire to stop smoking or using other tobacco products. Nicotine-replacement [patches, gum or lozenges](#) are available for free to registered participants.

Providers can order free OTH promotional materials [online](#).

Promoting a Smart Start to early childhood learning



OHCA Chief Medical Officer Sylvia Lopez has lent her voice and expertise to a video advocating the coordination of an early childhood system focused on strengthening families and school readiness for all children in Oklahoma.

[Smart Start](#), the state's early childhood initiative, aims to help children be safe, healthy, eager to learn and ready to succeed by the time they enter school. Visit <http://www.smartstartok.org/> to view the video and learn more about the Smart Start Oklahoma project.

New on OKHCA.org

- [Provider Letters](#)
 - [Global Messages](#)
 - [News Releases](#)
-

OHCA Dates to remember

April 8	Drug Utilization Review (DUR) Meeting
May 5	Tribal Consultation Meeting
May 13	DUR Meeting
May 14	OHCA Board Meeting
May 21	Medical Advisory Committee (MAC) Meeting
June 10	DUR Meeting

To access the complete calendar, click [here](#).

Agency collaboration leads to immunization improvements



A joint initiative by OHCA and the Oklahoma State Department of Health (OSDH) has helped to improve the health of children in Oklahoma by boosting vaccination rates in Bryan County, achieving a 3.4 percent increase.

Bryan county was ranked among 10 Oklahoma counties with the lowest completion rates for the complete 15-shot immunization series (4:3:1:3:3:1) for infants and children, according to data from the Oklahoma State Immunization information System (OSIIS).

As of June 2014, the childhood immunization rate in Bryan County rate was 74 percent. Through the joint efforts of the workgroup, vaccination coverage in Bryan County increased to 77.4 percent for the 15-shot series in just a six-month timespan. This moves the county closer to the Healthy People 2020 goal of 80 percent.

Seventeen strategies were implemented to achieve these results, including provider trainings, news releases, community partnerships, fax blasts, well-child mailers and telephone hold messages. OHCA and OSDH also developed targeted outreach materials and education to contracted providers in the Bryan County area, emphasizing the need for providers to utilize every opportunity to immunize.

The joint workgroup will expand efforts to increase Oklahoma's childhood immunization rates in the

future.

Resources for you

- [OHCA Quick Reference Guide](#) (PDF)
- [Provider Resources](#): Useful contact information
- [Web Alerts](#) (Register for the latest OHCA updates of your choice)
- [EVS Guide](#): Oklahoma Client Eligibility Verification System
- [ePocrates](#): Oklahoma SoonerCare drug list and Medicare Part D formularies
- [Medicaid on the Web](#): Oklahoma Medicaid Management Information System (OKMMIS) Provider Training Manual
- [Provider Directory](#) (PDF for members in patient-centered medical homes)
- [Additional provider directories](#) (Behavioral Health, Dental, Vision, DME, etc.)
- [Online provider training](#) (Webinars, provider workshop schedules, etc.)
- [Statistics & Data](#) (access Fast Facts on providers and services)
- [Printer-friendly newsletters](#) (PDFs of provider newsletters)
- [Free OHCA publications](#): Ordering from our website

OHCA Provider Helpline: 800-522-0114

Pass it on!

OHCA works to keep providers and their staff informed about the latest happenings in SoonerCare. Be sure to check that all health care providers, administrative staff, business departments and other appropriate parties have access to this E-newsletter by forwarding it today!

Information contained within is subject to change. Be sure to check OHCA Provider Letters, Global Messages and [Web Alerts](#) at www.okhca.org for the most up-to-date information.

The Oklahoma Health Care Authority does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services.

Please submit any questions, comments or story suggestions to Kelli Brodersen (kelli.brodersen@okhca.org) at the OHCA's Office of Creative Media & Design at 405-522-7504.



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