



Medicaid in Oklahoma

Audra Cross
Legislative Liaison

Oklahoma **Health**Care Authority

Who We Are

- The Oklahoma Health Care Authority is the single state agency created through statute to manage the Oklahoma Medicaid program, known as SoonerCare.
 - Medicaid was authorized by Congress through Title XIX of the Social Security Act of 1965
- The agency also oversees the Insure Oklahoma program, a public-private partnership offered to small businesses and working adults.
- We work in partnership with the Centers for Medicare and Medicaid (CMS) within the U.S. Department of Health and Human Services.
- Approximately 20% of our SFY 2019 budget was funded through state appropriations.

The Fundamentals of Medicaid and OHCA

A State-Federal Partnership

CMS has broad authority over Medicaid program administration and operations through the State Plan process.

- A State Plan is a formal, written and comprehensive agreement between a state and the federal government.
- The State Plan provides authority for a state to access federal funds and to administer its Medicaid program.

Any time a state seeks to change how it administers its Medicaid program under its federally-approved plan, a state plan amendment must be submitted to CMS for review and approval.

- Increases or decreases in provider rates
- Changes in eligibility requirements
- Adding or removing benefits
- Other legislative mandates

The Fundamentals of Medicaid and OHCA

Federal Medical Assistance Percentage (FMAP)

FMAP is used to determine the amount of federal funds provided to states for qualifying expenditures in their Medicaid programs.

When FMAP increases, every state dollar spent is matched with an increased amount of federal dollars.

Beginning October 1, 2019, for every \$1.00 the state appropriates to the Oklahoma Health Care Authority, we will receive \$1.94.

The Fundamentals of Medicaid and OHCA

A State-Federal Partnership

OHCA can achieve innovation and flexibility through the 1115(a) SoonerCare Demonstration Waiver, which includes the following programs:

- SoonerCare Choice, a patient-centered medical home model
- The OHCA Health Management Program (HMP)
- The Health Access Networks (HANs)
- Insure Oklahoma, a premium assistance program

1115 Waiver Amendment Request

HB2932 (2018)

OHCA is seeking approval of new eligibility criteria for certain Medicaid populations as conditional upon documentation of certain education, skills, training, work or job activities.

- Formal public notice process began July 3, 2018, and online comments concluded Sept. 30, 2018
- Received more than 1,200 public comments
- Public forums continued through October 9, 2018

The waiver amendment request was submitted to CMS December 7, 2018.

- The Centers for Medicare and Medicaid Services also posted the amendment request for 30 days.

CMS has sent questions for clarification about the amendment request and the state has responded. OHCA is waiting on CMS for the next steps.



Who is Covered?

Who We Cover

Primarily, SoonerCare members are:

- Children
- Parent/Caretakers
- Aged, blind, and disabled

Also offer coverage to other qualified groups:

- Breast and Cervical Cancer patients under 65
- SoonerPlan (family planning services)
- “Other” includes pregnant women and Medicare recipients

Total enrollment SFY 2019: 998,209

- Total population of Oklahoma: 3,943,079
- Children aged 0-20: 624,813 (63%)

Who We Cover

Insure Oklahoma

- Insure Oklahoma is a public-private partnership that provides premium assistance to business owners and working adults.
- Under the Employer-Sponsored Insurance program, costs are shared by the state at 60%, the employer at 25%, and the employee at 15%.

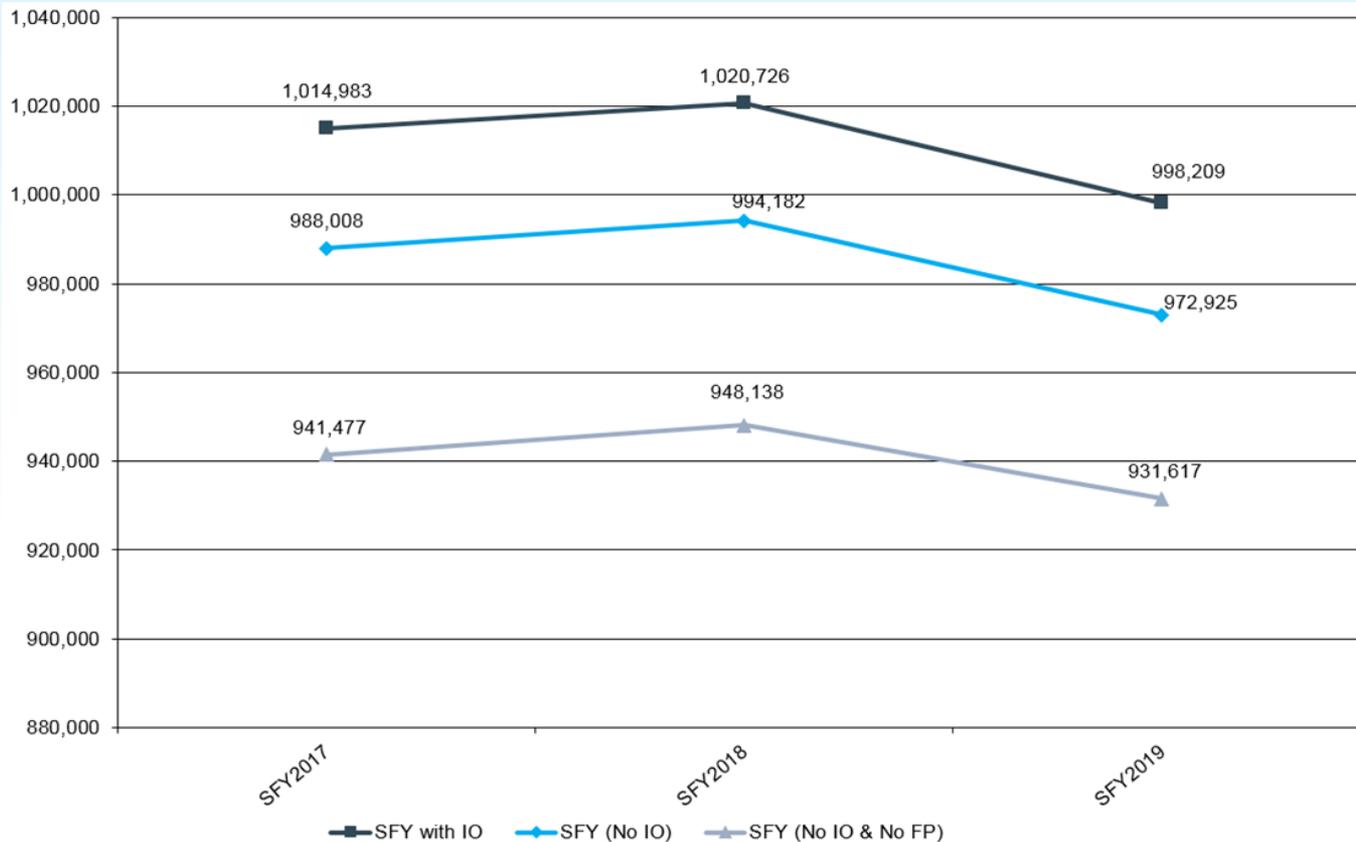
Employer-Sponsored Insurance (ESI)

- Up to 200% FPL
- Total enrollment: 22,123 (SFY2018)

Individual Plan (IP)

- Up to 100% FPL
- Total enrollment: 4,907 (SFY2018)

Who We Cover



IO = Insure Oklahoma. FP = SoonerPlan (Family Planning). State Fiscal Year (SFY) is July - June. Enrollment is unduplicated.
Data valid as of 7/17/2019.



What is covered?

What does SoonerCare cover?

Mandatory Benefits

- Inpatient hospital services
- Outpatient hospital services
- EPSDT: Early and Periodic Screening, Diagnostic, and Treatment Services (well-child checks)
- Nursing Facility services
- Home health services
- Physician services
- Rural health clinic services
- Federally qualified health center services
- Laboratory and x-ray services
- Family planning services
- Nurse midwife services
- Certified Pediatric and Family Nurse Practitioner services
- Freestanding birth center services (when licensed or otherwise recognized by the state)
- Transportation to medical care
- Tobacco cessation products and support

Managing Drug Costs

Medicaid Drug Rebate Program

- Medicaid covers all FDA- approved drugs in exchange for rebates produced by those manufactures.
- 60.3% of total drug spend recovered from rebates
 - Equating to \$364 million for SFY 2019

Questions?