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Oklahoma Health Care Authority

AGENCY MISSION STATEMENT:

Below is the adopted mission of the OHCA, along with the entity who adopted the mission statement and when it was adopted.

The agency's mission statement is taken from the original legislation enacted in 1993 which can be found at 63 O.S. § 5003. The mission statement is as follows:

Our mission is to responsibly purchase state and federally funded health care in the most efficient and comprehensive manner possible; and to analyze and recommend strategies for optimizing the accessibility and quality of health care; and to cultivate relationships to improve the health outcomes of Oklahomans.

LEAD ADMINISTRATOR:

Here is the name, title and contact information for the lead administrative person:

Joel Nico Gomez, Chief Executive Officer Address: 4345 N. Lincoln Boulevard, Oklahoma City, OK 73105 Email: <u>nico.gomez@okhca.org</u> Phone: 405-522-7417; Fax: 405-530-3482

GOVERNANCE:

Here is a brief description of the agency's governance structure.

The OHCA is governed by a board comprised of seven appointed members who serve terms of four years and are appointed as follows:

- 3 members are appointed by the Governor
- 2 members are appointed by the President Pro Tempore of the Senate
- 2 members are appointed by the Speaker of the House of Representatives

OHCA's current board members are:

- Governor appointees: Ann Bryant; Marc Nuttle; and Carol Robison
- Senate Pro Tempore appointees: Anthony Armstrong, vice chairman; and Melvin McVay
- Speaker of House appointees: Ed McFall, chairman; and Tanya Case

The board has five committees-each comprised of three board members:

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The <u>Audit/Finance Committee</u> consists of Marc Nuttle, committee chair; Anthony Armstrong and Ann Bryant. This committee is tasked with reviewing the OHCA's financials and audit activities, and providing an update to the full board.

The <u>Rules Committee</u> consists of Ann Bryant, committee chair; Marc Nuttle and Tanya Case. This committee is tasked with reviewing proposed rules and rates and proposed changes to existing rules and rates, and providing an update to the full board.

The <u>Strategic Planning Committee</u> consists of Anthony Armstrong, committee chair; Carol Robison and Ed McFall. This committee is tasked with reviewing innovations/issues that impact the agency's programs and future operations, and providing an update to the full board.

The <u>Legislative Committee</u> consists of Carol Bryant, committee chair; Ed McFall; and Melvin McVay. This committee is tasked with reviewing legislation that impacts the agency's programs and future operations, and providing an update to the full board.

The <u>Personnel Committee</u> consists of Melvin McVay, committee chair; Ed McFall; and Tanya Case. This committee is tasked with reviewing personnel actions that relate to the Agency Administrator, and providing an update to the full board.

GOVERNANCE ACCOUNTABILITY:

The activities of the OHCA Board are documented in the official minutes which can be found on the agency's website site at <u>www.okhca.org</u>. There is not an attendance policy for board members.

MODERNIZATION EFFORTS:

Below is a list of all government modernization efforts undertaken by the agency and authorizing statutory changes that prompted the modernization efforts and whether those efforts led to cost savings or additional cost burden since July 1, 2010.

SoonerCare Online Enrollment

In September 2010, OHCA launched online enrollment. This implementation included transferring responsibility to qualify and enroll more than 500,000 members of the state's SoonerCare population. Oklahoma's system has been acclaimed nationally for its innovative approach, making the state the first in the nation to offer real-time enrollment and reduced application processing time from weeks to minutes. OHCA processes between 30,000 and 40,000 applications per month. The online application is consistently the most utilized- with about 40 percent choosing this method to apply. Using a series of checks and balances OHCA is now able to systematically process applications that meet certain criteria, without the user having to log into the online application. In addition, paper applications are no longer actively utilized as all applications are processed electronically.

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The system uses a rules engine to determine qualification for SoonerCare. This process insures that policy is applied uniformly and utilizes data exchanges with other agencies to verify information. Eligibility is established real time and the member is immediately aligned with a medical home. OHCA is also working on a project that incorporates the Insure Oklahoma application process within Online Enrollment. This will further streamline the application process and reduce administrative burden.

Electronic Provider Communications

OHCA has greatly improved its capacity for electronic communication with health care providers over the past several years, resulting in significant savings in paper, postage and staff costs. For many years, OHCA offered providers a secure Internet site for billing, claims and member eligibility functions. All enrollment, contracting and provider screening functions have been completed online since 2011. In January 2014, OHCA expanded this functionality to create a Provider Portal which offered a single entry point for providers. print and document upload capabilities, and access to new member and provider information. On the Portal, providers can access claim and prior authorization records, receive targeted messages, submit electronic attachments and look up member health history data. At the end of 2014, OHCA implemented the Going Green initiative to achieve virtually all-electronic provider communication. Providers can now access their member rosters online as well as remittance advice (RA) notices, provider letters, and many other documents. During 2015, the Going Green initiative will continue to add new electronic communications related to quality and provider payment incentives. The Going Green initiative benefits providers as well since the portal stores several years' worth of information which is accessible any time they need documents, replacing a paper process which formerly took a week or more. For more information, please see the Annual Report at http://okhca.org/research.aspx?id=84&parts=7447&parts=7447.

Telecommuting Pilot program

Under the authority of Title 62 § 34.11.2, as of November 1, 2011, OHCA went live with its telecommuting pilot project. We began the pilot with 20 employees participating. OHCA auditing staff conducted a full scale audit of the area to determine the success of the pilot and whether or not to extend it to other parts of the agency. Findings showed an overall steady or increase in productivity and a substantial decrease in leave usage. Employees have reported that they are happier, and that each feels they have the ability to complete assignments without many of the distractions faced in a traditional work environment. Originally, OHCA did not anticipate any cost savings but due to the acquisition of new employees without the necessity of additional space, the agency has seen some cost savings. The pilot was rolled out to the entire agency in 2014 and extended to most of our contractors. We do anticipate additional employees will begin to telework as the pilot gains more visibility. OHCA is also helping to lead the state wide teleworking project and that should be rolled out in the first part of 2015.

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Text4Baby

OHCA, and several community and agency partners received national recognition for the "text4baby" campaign. This program is designed to get pregnant women and new mothers to enroll in a program designed to improve infant care. It provides timely tips and expert advice sent directly to cell phones of pregnant women and new moms. In the first two years, "text4baby" had already reached 335,000 users. Oklahoma is currently 1 of 4 states creating enhanced messages with state-specific resources. The three-year pilot project aims to increase enrollment of pregnant SoonerCare members in Text4baby; customize content to include state-specific programs and resources; and assess T4B's impact on improving health quality measures including postpartum visits and tobacco cessation during pregnancy.

SHOPP

Title 63 O.S. 2011, Section 3241.1 established the Supplemental Hospital Offset Payment Program, or SHOPP, which allows for a fee to be charged to certain Oklahoma hospitals. The revenue from the measure is then matched by the federal government and used primarily to maintain hospital reimbursement from the SoonerCare program. OHCA received federal approval in December 2011. It is estimated that SHOPP will raise an additional \$455 million for hospital providers. The program will terminate on Dec. 31, 2017.

RECOVERY AUDIT CONTRACTOR (RAC)

OHCA has contracted with Health Management Systems (HMS) to function as the Medicaid Recovery Audit Contractor for the State of Oklahoma in accordance with 42 CFR 455. The RAC program was designed to identify over and under payments within State Medicaid programs and to recover identified overpayments. Our contract with HMS became effective October 1, 2013. HMS is currently conducting Hospital Credit Balance Reviews and Long Term Care Facility Payment Reviews. They will begin In-Patient Hospital Reviews during the 1st quarter of 2015.

CORE MISSION:

OHCA is not providing any services outside of its core mission. The agency's mission statement is taken from the original enacting legislation in 1993 which can be found at 63 O.S. § 5003. The mission statement is as follows:

To responsibly purchase state and federally funded health care in the most efficient and comprehensive manner possible; and to analyze and recommend strategies for optimizing the accessibility and quality of health care; and to cultivate relationships to improve the health outcomes of Oklahomans.

The Employees Group Insurance Division (EGID) in the Office of Management and Enterprise Services (OMES) is also a purchaser of health care in the State of Oklahoma. Their client base is different from OHCA's; EGID is responsible for health benefits for state, education and local government employees, retirees and their dependents.

There are no services which are core to our mission which OHCA is unable to perform because of requirements to perform non-core services elsewhere.

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PRIVATE ALTERNATIVES:

Approximately 95 percent of the SoonerCare program represents reimbursements to providers for the delivery of health care goods and services. The remaining 5 percent accounts for Electronic Health Record (E.H.R.) payments and the program's administrative costs that are split between the five participating state agencies (OHCA, OKDHS, OJA, DMHSAS, and OSDH). OHCA incurs 2.6 of the 5 percent administrative expenses, with about 63 percent paid toward private vendor contracts.

OHCA is constantly evaluating opportunities to outsource work in the most effective and efficient manner. For example, the agency is currently advertising for Requests for Proposals (RFPs) to obtain the services of private vendors to develop and function as the Medicaid Recovery Audit Contractor and to operate the revised SoonerCare Health Management Program.

Oklahoma was one of the first states to experiment with fully-capitated HMO vendors to manage the care of the SoonerCare population in the mid-1990s. Although it was unsustainable, it provided a wealth of information that has made today's program better and more responsive. Since 2009 the SoonerCare Choice program has offered a Patient-Centered Medical Home (PCMH) care model. Shortly thereafter a network approach was added to offer additional support (in three areas of the state) provided by contracted Health Access Networks (HAN). Today's SoonerCare Choice Program undergoes annual evaluation efforts which document the current structure and performance of this care model. The independent evaluation by Pacific Health Policy Group can be found on our website at http://www.okhca.org/research.aspx?id=10087&parts=7447 listed under Studies and Evaluations entitled "2014 - SoonerCare Choice Program Independent Evaluation - Final Report".