AGENCY MISSION STATEMENT:

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:

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

GOVERNANCE:

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:

The Audit/Finance Committee consists of Marc Nuttle, committee chair; Anthony Armstrong and Ann Bryant. This committee is tasked with reviewing the OHCA's financials and audit activities.

The Rules Committee 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.

The Strategic Planning Committee 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.

The Legislative Committee consists of Carol Robison, committee chair; Ed McFall; and Melvin McVay. This committee is tasked with reviewing legislation that impacts the agency's programs and future operations.

The Personnel Committee 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.

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 www.okhca.org. There is not an attendance policy for board members.

MODERNIZATION EFFORTS:
Below is a list of 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. SoonerCare's system has been acclaimed nationally for its innovative approach. Oklahoma is the first state in the nation to offer real-time enrollment that allows members to be immediately aligned with a medical home. Application processing times have been reduced from weeks to minutes. The system uses a rules engine to determine qualification for SoonerCare. Online enrollment is able to systematically process applications using specific criteria to insure that policy is applied uniformly and utilizes data exchanges with other agencies to verify information. Currently, OHCA is working to move the application process for the Insure Oklahoma program into the online enrollment system. This will further streamline the application process and reduce the administrative burden.

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 third party contractors. Currently, there are 50 employees teleworking as well as most of our contractors. We do anticipate additional employees will begin to telework as the pilot gains more visibility.

TELEMEDICINE

Telemedicine is the use of interactive audio, video or other electronic media for the purpose of diagnosis, consultation or treatment that occurs in real time and when the member is actively participating during the transmission. Telemedicine service is not an expansion of SoonerCare but a different way to offer quality health care access to SoonerCare members. In August 2014, OHCA made significant changes to its telemedicine policy. Those changes included removing distance requirements, updating payment structures and removing restrictions for cell phone use so as to rely on the provider's discretion to deliver care using the appropriate sized screen and resolution for the type of service being delivered such that quality is on par with a face-to-face visit. OHCA will continue to review telemedicine policy regularly to develop future strategies and delineate potential opportunities for continued use of telemedicine and telehealth.

TEXT MESSAGING

During 2015, OHCA, the George Kaiser Family Foundation and Voxiva partnered to implement a two-year pilot study expanding the Text4baby program to include mobile health messages for SoonerCare members ages 1 to 18 and adults covered by SoonerCare. This package is called Connect4health and it encompasses three separate programs: Text4baby, Text4kids and Text4health. The mobile health messages will be customized by OHCA staff and partners to promote specific preventive health benefits, EPSDT and well child visits, immunizations, medication compliance, appropriate ER utilization, and SoonerCare application renewal reminders. OHCA plans to begin implementation of Connect4health in November 2015. SoonerCare members will be enrolled into Connect4health through auto-notification to eligible members via text message, which is the current methodology used by Text4baby. However, OHCA is working toward auto-enrollment where all eligible members are automatically enrolled and have the option to opt-out of the program. The SoonerCare application will be modified to add consent language for members to receive mobile health messages. This process will auto-enroll all eligible SoonerCare members into Connect4health. OHCA plans to implement the automatic enrollment process during the spring of 2016.

SUPPLEMENTAL HOSPITAL OFFSET PAYMENT PROGRAM (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 $444 million for hospital providers in SFY 2016. Currently, the program is set to sunset 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. The contract with HMS became effective October 1, 2013.   HMS is currently conducting Hospital Credit Balance Reviews and Long Term Care Facility Payment Reviews. In-Patient Hospital Reviews began in the 1st quarter of 2015.

 AFTERHOURSOK – MOBILE & PC APPLICATION
An app for personal computers and mobile devices was developed by OHCA to help our members and their providers locate other contracted providers who are open after traditional office hours. Traditional office hours are considered as 8 a.m. to 5 p.m., Monday through Friday. The app works by entering the patient's age and the ZIP code where they are currently located. Those providers who have agreed to accept walk-ins seeking urgent care are listed on the app along with their address, phone number, days/hours of operation, an interactive map and a link to their website. To access the app, go to
http://www.afterhoursok.com/

The Program of All-Inclusive Care for the Elderly (PACE)
The Program of All-inclusive Care for the Elderly (PACE) is a managed care model of acute and long-term care that integrates the provision and financing of medical and long-term care services. The PACE model is centered on the belief it is better for the well-being of seniors with chronic care needs and their families to be served in the community whenever possible. The goal is to maximize the participant's autonomy and ability to reside in their community while receiving quality care at lower cost relative to the Medicare, Medicaid and private-pay traditional payment systems. Cherokee Elder Care (CEC), Oklahoma's first PACE organization opened its doors in August of 2008 in Tahlequah Oklahoma. CEC is the first PACE organization sponsored by a Native American tribe in the nation. In January of 2015, Oklahoma opened two additional centers; Life PACE located in Tulsa and Valir PACE Foundation located in Oklahoma City.

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.

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 (EHR) payments and the program's administrative costs that are split between the five participating state agencies (OHCA, OKDHS, OJA, DMHSAS, and OSDH). OHCA incurs 2.3 of the 5 percent administrative expenses, with about 57 percent paid toward private vendor contracts.

OHCA is constantly evaluating opportunities to outsource work in the most effective and efficient manner. 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 here listed under Studies and Evaluations entitled "2015 - SoonerCare Choice Program Independent Evaluation State Fiscal Year 2014".

HB 1566, passed by the Oklahoma Legislature in 2015, mandates that OHCA issue an RFP for a care coordination model for the Aged, Blind and Disabled (ABD) population, excluding institutionalized populations for the initial 2 years of the program. To comply with the direction of the bill, OHCA began to research and explore models of Care Coordination to best meet members' needs. Over the past 5 months, OHCA has solicited information and

input from a wide variety of stakeholders through discussion and a Request for Information (RFI) to the health industry. On November 30, 2015, OHCA issued a press release announcing the intention to issue an RFP aimed at contracting for a fully capitated, statewide model of care coordination for Oklahoma Medicaid's ABD populations. With continued input from stakeholders and assistance of an independent contractor, OHCA will develop the RFP into early 2016, and then seek review and approval of the RFP from the Center for Medicaid and Medicare Services (CMS), our Federal oversight partner. OHCA anticipates releasing the RFP for bid in the summer of 2016, with a target date for implementation of services in early 2018.