


SoonerHealth+

Medicaid Managed Care for Aged, Blind, and Disabled

March 8, 2017


Mary Brinkley
Executive Director



REQUEST FOR PROPOSALS

- House Bill 1566 passed by the Oklahoma Legislature and signed by Governor Mary Fallin in April 2015.
- Request for Proposal (RFP) for a care coordination model for the Aged, Blind and Disabled (ABD) populations.
- Request for Information (RFI) process in June of 2015, for the development and requirements of the RFP.
- SoonerHealth+ Request for Proposal (RFP) released on November 30, 2016.
- Proposals submitted until February 28, 2017. The procurement period will last for six months and is scheduled to end by June of 2017. OHCA enters into a silent period, lasting until the end of the procurement period.

February 2017	March 2017
RFP Responses Due End of Month	Review and Evaluate RFP Responses
June 2017	
▪ RFP Award	▪ Begin Operational Readiness Review Planning
▪ Policy Approval	




COSTS TO MANAGED ABD CLAIMS

Through various programs, initiatives and investments over multiple years, the OHCA has managed Aged, Blind and Disabled (ABD) claim costs and ABD claim cost trends.


	Annual \$ Per Enrollee*	Annualized Trend	5-Year Annualized Trend
SFY 11	\$13,387.43		
SFY 13	\$13,866.56	1.8%	
SFY 15	\$14,069.86	0.7%	
SFY 16	\$13,818.38	-1.8%	0.6%

* Paid Basis



By year 3, the following mandatory enrollment populations, will be eligible:


- Full benefit ABD members
- ABD members enrolled in one of the following HCBS waivers:
 - ADvantage
 - Medically Fragile
 - Community
 - In-Home Supports (Children and Adults)
- Children under the Tax Equity and Fiscal Responsibility Act (TEFRA)
- ABD Individuals with intellectual disabilities (non-HCBS waiver, State Plan only)
- ABD Custody children
- ABD members residing in institutions, including:
 - Nursing facility
 - Intermediate care facility for individuals with intellectual disabilities (ICF-ID)



VOLUNTARY AND EXCLUDED POPULATIONS


The following populations are *excluded* from the SoonerHealth+ program:

- Non-ABD members, except for TEFRA children
- ABD members enrolled in one of the following HCBS waivers:
 - Homeward Bound
 - Living Choice/Money Follows the Person
- Members enrolled in a Behavioral Health Home
- Members enrolled in the Program of All-Inclusive Care for the Elderly
- Duals with limited Medicaid benefits (For Example: QDWI and SLMB)



MANDATORY ENROLLMENT PHASE-IN

- **Year 1: April 1, 2018 to March 31, 2019**
 - Full benefit ABD members
 - ABD members enrolled in the ADvantage or Medically Fragile HCBS waivers
 - TEFRA children
 - ABD individuals with intellectual disabilities (non-HCBS waiver, State Plan only)
- **Year 2: April 1, 2019 to March 31, 2020**
 - ABD members enrolled in the Community or In-Home Supports HCBS waivers
- **Year 3: April 1, 2020 to March 31, 2021**
 - ABD custody children
 - ABD members residing in institutions



GOALS

Save Money

**Improve Outcomes through
Care Coordination**

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Funding

- **\$868 M Budget Shortfall**
- **Revenue Failure**
- **DHS Supplemental \$34 M**

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Source of Financial Challenges

Excessive Spending

Lack of Revenue

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Source of Financial Challenges

Budget for FY '07 \$6,760 M

Budget for FY '17 \$6,778 M

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Put in Perspective

**In inflation-adjusted dollars,
the Budget for FY '17 is \$1.17 B or 14.7%
below the FY '07 Budget.**

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The Problem

- **Communicate the fallout of ANY cuts to the budget for long term care providers**
- **Identify how ANY cuts will directly impact your ability to serve the elderly and disabled**
- **Share your concern for the projections for the future of this growing population**

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The Solution

- Revenue sources to cover budget shortfall
- Dedicated revenue stream moving forward
- Accountability for Medicaid program



The Plan

- Advocacy – Everyone must be engaged, even if your organization doesn't receive state funding
- It must be bigger than you – staff, residents, families, community leaders
- Social Media, Op-Ed pieces, Letters to the Editor, emails and letters to Legislators, Calls and Visits
- Accountability for Medicaid program



The Goal

- A commitment for adequate funding moving forward
- A plan to address future long term care funding needs
- A commitment from providers to advance long term care in Oklahoma



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