SoonerCare
Oklahoma Health Care Authority

Member Advisory Task Force

MATF Notes
February 1, 2025

Members Present: 11 Members

Steering Committee: 4 Members

Guests: 8 guest
OFN Staff : 3 present

Item	Notes	Recommendations / Golden Nuggets
Coffee Time at HCA/ Home		
Welcome & Review Minutes – MATF Cards	Welcome, everyone. Introductions were made, and minutes were distributed; they are also available on the Facebook page for members. Just a few reminders: Meeting minutes must be de-identified before sharing. The colored cards have specific meanings: Green for formal recommendations, Blue for information requests, and Yellow for key insights. Important items and recommendations may become future agenda topics, so please remember to include your initials and the date on your cards.	
Legislative Updates & MAC Updates	● **Oklahoma Legislative Session –** begins February 3, 2025. OHCA has been actively engaging with elected officials. ● **Legislative Deep Dive –** OHCA recently hosted an in-depth session for key legislators to educate them about OHCA's operations and each aspect of them. ● **Budget Hearings –** OHCA presented its budget request to the Senate on January 21 and the House on January 30. ● Bill Tracking: ○ 3,100 bills filed for this session ○ 250 bills identified as potentially impacting Health & Human Services (HHS) broadly and OHCA. ○ 60 bills that could directly affect OHCA Medicaid operations or our EGD which is the Health Choice Insurance Operations. Note: Approximately 80% of the bills do not make it out of the original committee. Even if they make it to the House or Senate floor, they may not make it to the Governor's desk to be signed.	

Key Bills Impacting OHCA

- House Bill 2052 – Exempts OHCA's managed care plans from certain commercial insurance mandates.
- House Bill 2055 – Extends the implementation deadline for new populations in the Children's Specialty Plan to July 2026.

Question: Will the children's specialty still include those in custody or adopted through DHS's Office of Juvenile Affairs?

Answer: Yes, it will also include children involved in Family Centered Services through child welfare, those in DHS custody placed at home under court supervision, and those in trial unification programs. Additionally, Medicaid-enrolled parents and guardians of children in Family Centered Services will be included. This means birth families will be part of the program, which is positive.

- House Bill 2108 – Administrative updates for the Employee Group Insurance Division (EGID). Clean up language on this.
- Senate Bill 56 – Establishes a Paid Family Caregiver Program for children with complex care needs.
- Senate Bill – 904 - Adjustments to nursing facility reimbursement methodologies.

GOLDEN NUGGET: The paid family caregiver bill is being looked at again.

Trends that OHCA is seeing for you to be aware of.

1. Coverage Mandates

Senate Bill 441 – requires OHCA to provide chiropractic care, which is not currently covered. There are many specific coverages and that would have a budget impact for OHCA. Currently the only coverage is for pain management.

Note – Chiropractic services offer several benefits; however, they are not a mandatory core benefit under Medicaid. States have the option to include them based on their budgetary considerations.

GOLDEN NUGGET: Chiropractic services are not available to all members at this time.

2. Changes to the prior authorization requirements (PAs). There are a couple of bills out there that would modify various processes for our PAs.
3. Impacts to managed care. There are some big bills out there that would send us back to an entire fee for service model this is Senate Bill 193.
   Senate Bill 252 moves prescription drug coverage back to fee for services. We do not anticipate these bills to be signed by the Governor or them to even make it to the House or Senate floor.

Question - Are there any bills out there looking to expand the eligibility population to managed care, such as adding ABD or any of that?

Answer: No.

	● Senate Bill – 903 – Expands the Medical Advisory Committee (MAC) to include members from the MATF. The goal is to make sure that our MAC is in touch with the needs of our members and can hear their perspectives and get input so the MAC can be as informed as possible. Because the MAC is governed by state law and by federal law the state statute for the MAC will have to be amended slightly to help implement this change **Medical Advisory Committee (MAC) Changes** ● CMS Rule Changes (April 2024) - Federal regulations now require states to have a Beneficiary Advisory Council (BAC). ● MATF & MAC Connection: Oklahoma's MATF will serve as the BAC, requiring some members to serve on the MAC. ● Senate Bill 903: o Expands MAC from 15 to 16 members to accommodate these changes o Requires at least 25% of MAC members to be from the MATF by 2027. **Question –** The 25% requirement of MATF voices on the MAC can one be from the MATF and the other be beneficiary voices? It is really important that you get a broad perspective from the different programs. It specifically says members of the MATF to be on the MAC. There is a meeting on policy coming soon and we can get clarification on the language. **Comment -** MATF would like to keep that name if possible. OHCA will check. It may be possible to keep the MATF name or maybe adjust to MATF/BAC. **Question –** Moving forward regarding the MATF contract - is there a certain number of people that need to be on the contract other than what we currently have? No, I think we are good at 15. **Question –** The timing of the MATF meetings versus when the MAC meets. Is it important for the MATF to hear the policies before the MAC to allow for input from the MATF at the MAC meeting? I think there should be some strategy, and we do have a representative that has a perspective that is disability specific. Will need to have two representatives by this July. **Question –** Will the MATF representatives on the MAC be able to provide communication back to the MATF so they can discuss and provide feedback back to the MAC. I think there is language around the communication piece coming back to the MATF.	**RECOMMENDATION –** That the MAC membership only has one required member to be on the MATF. **RECOMMENDATION:** That the MAC compensates its members.

	Comment – For those members on the MATF who commit to be on the MAC also is a great commitment. There are 10 meetings between the two groups (MATF meets bimonthly, and the MAC meets quarterly, that is a lot of meetings to commit to. **Question –** Will they be compensated for being on the MAC? If not, that could be a barrier for some. Fairly certain in statute the MAC members cannot be compensated as stipend, but I think they can receive mileage. But I could be wrong.	**RECOMMENDATION -** Beneficiary members of MAC should be compensated for attendance as well as mileage.
Collaborative Advocacy and Public Policy	● Members were asked - Do you consider yourself a content expert on using Medicaid? Medicaid members, caregivers, and service users are experts in their lived experiences whether it's at the pharmacy or at the dentist. The service you received because of Medicaid, whether a tooth filling, or annual checkup you are a content expert on that Medicaid service. ● Members are content experts in Medicaid services based on their usage and advocacy, as the users, or the billers, and the payers. ● If there was something going on, a policy change or something else. We brought it here and had a conversation about the concerns, listened to the intent, the explanation of what it was saying. Then came to a solution/understanding, added an exception and/or a clarification of the concern to adapt the situation ● That's what the make of this meeting is. What is the concern? How did you read it? Is that the intent or do we need to help them understand our concerns? ● As a member you may have the opportunity to hear somebody who read something differently than you did or hear something saying that managed care entity is doing whatever. Do we need to help them understand our concerns? ● Bring it here and we may have the opportunity to help everyone to understand the concern, issues, and provide clarification. Let's find out the policy for that facility or procedure and clarify what it is. Is it HIPPA related? If it is a member specific issue, have them call population care management. Contact OHCA if needed.	**RECOMMENDATION:** Training for members to learn how to help themselves and other people - be a self-advocate for medical needs. **GOLDEN NUGGET:** Hospitals have a patient care advocate. **GOLDEN NUGGET:** Verbiage to help advocate. **RECOMMENDATION -** Self-advocate online training. **RECOMMENDATION -** CLL – OFN – OHCA create a training for Health Care Advocacy. **GOLDEN NUGGET:** About population care management.

		RECOMMENDATION - Create a training for SoonerCare Advocates' **RECOMMENDATION -** Training (partner with OHCA) – process of disagree with discharge – speak to provider, case staffing request, call OHCA – ask for supervisor call back **RECOMMENDATION:** To create a training and tip sheet for families **RECOMMENDATION -** Create sheet tool for online
Other discussion	The Member Toolkit and the Provider Toolkit on the website are great assets to the members and providers. Concern was expressed by two members regarding their experience with the 988 number. One was trying to use the text line. It was very frustrating, and it definitely wasn't helping. The Department of Mental Health and Substance Abuse Services (DMHSAS) is over the contract that manages that particular help line. They want to hear from people that have had good or bad experiences. Staff will help the members connect with the person at ODMHSAS.The customer service representatives are trained and ready to help you solve your problem. If you can't get a resolve on the helpline, please ask for a 'supervisor call back'. Problem - A member received an invoice for dental services for the kids, about $100 each and before was not paying anything. OFN asked that they send her an email and she would help connect them with someone to help. Problem – A member reported that Humana dropped their transportation benefit.	**RECOMMENDATION -** Member tool kit overview so we can help others with it. **RECOMMENDATION:** Crisis hotlines vs non emergent issues getting answered immediately. **RECOMMENDATION:** When a member calls you with a question, ask them, "Have you contacted the helpline?" **Need to Know** When you call the helpline to verify if a service is covered, make sure to have the CPT

		code on hand. This will help the representative confirm the specific service. **RECOMMENDATION:** A 'chat' person on the OHCA website **RECOMMENDATION -** Doctors for transition of SoonerCare children to adults. **RECOMMENDATION** Use GroupMe or WhatsApp for MATF to discuss crisis situations or share updates.. **RECOMMENDATION -** Adults should also be able to get braces (Humana and Liberty Dental)
MATF updates, Changes & Commitment	OFN has a contract with OHCA to provide facilitation for the MATF. Changes beginning July 1. ● Individuals who come in person will receive $75 and those who attend by Zoom will receive $50. ● Everyone who comes in person will get at least $20 for gas on top of that. ● In the past, the last agenda item was – Do you or someone, you know, having difficulty in accessing care or has there been an issue since the last time we met? We will be adding that back to the agenda. We want you to bring those concerns here. It's important that you be actively engaged in the meeting, listen to grasp the agenda topics, and be prepared to provide feedback ● Arrive on time. ● Review any materials sent to you before the meeting so you can arrive prepared and ready.	

	● Speak up - each member is chosen based on their experience. If you remain silent, we risk losing the perspective of the population that you represent. There will be additional changes ahead. Term limits will be introduced, and each of you will have the chance to sign up for one more year. After that, we will likely begin transitioning members out. Currently, there are four openings available. Current co-chair will continue for another year. I suggest we appoint a vice chair to work alongside her during this time and participate in the steering committee. The new terms will be either two or three years. It's your choice whether to stay for one more year. Please consider who brings the perspective you offer or who might fill a gap in our discussions. Think about potential replacements for yourself or for the other open spots. **Question -** Are you looking at the same term limits for the steering committee as you are from the members at large? It's in negotiation, they need some clarification. Yes, we were looking at that because it has worked well for us. You can go off for a year and then you can reapply. We have a rule that if you don't attend at least four meetings a year, whether it's virtually or in person, then we'll ask you if it might be best that you go ahead and go off the MATF. Because that means that for four meetings that perspective wasn't brought to the table We have an application to fill out to apply. If you know anyone in Western Oklahoma, Northwest, or Southwest we really need representation from there. OFN/ Vice Chair will interview everybody and make recommendations. The notes will be given to the full steering committee to review and decide on the new people. We appreciate you. The outcomes from this group have been tremendous in our state and actually because of this group, and it's had so much national recognition since 2012. You all impacted the fact that there are now going to be MATFs across the nation. The OHCA staff also expressed their gratitude to the MATF members for their contributions, as well as to the OHCA staff who attend. Thank you for organizing everything, raising important topics, and ensuring that everyone's voices are heard.	

Stipend forms, Future Agenda Items	Next meeting is April 5, 2025 **Agenda Item** – Dual eligible Medicare/Medicaid and all the options for dual eligible. **Need to Know cards –** 1. Dual eligible options Medicare/Medicaid 2. More information on 988 and how it works and quality of response 3. Humana Healthy Horizons and Liberty Dental – when are you allowed to switch on SoonerSelect? 4. How often are you allowed to change your SoonerSelect? 5. Do adults need a referral for a psychiatrist? 6. Are partials covered through Liberty Dental? 7. Missing the perspective of the aging SoonerCare membership.	**RECOMMENDATION -** Need more information for people with dual coverage – Medicare and Medicaid

Future MATF Meetings: April 5, 2025, June 7, 2025
Future agenda items: Member toolkit extensive overview, Medical: Dual eligible Medicare/Medicaid, Option period-what to expect and when is it, Adult Physical Therapy: What is the limit per year per incident? School Based service (updates) summer 2025)

Board of Directors Meetings: Link for Board Meeting information here: *http://www.okhca.org/about.aspx?id=2671*

Comments and questions may be submitted online through the Policy Change Blog and the Native American Consultation Page by contacting the OHCA Federal & State Reporting Division by telephone at 405-522-7914 or via email at HCAcommunityengagement@okhca.org