

**CENTERS FOR MEDICARE & MEDICAID SERVICES
EXPENDITURE AUTHORITY**

NUMBER: 11-W-00048/6
TITLE: SoonerCare
AWARDEE: Oklahoma Health Care Authority

Under the authority of section 1115(a)(2) of the Social Security Act (the Act), expenditures made by Oklahoma identified below, which are not otherwise included as expenditures under section 1903 of the Act shall, for the period of this demonstration extension, beginning September 6, 2013 through December 31, 2015, be regarded as expenditures under the state's title XIX plan (except to the extent an earlier expiration date is indicated below). These expenditure authorities are granted to enable the state to operate its Oklahoma SoonerCare section 1115 demonstration and may only be implemented consistent with the approved Special Terms and Conditions (STCs) set forth in an accompanying document.

All requirements of the Medicaid program expressed in law, regulation and policy statements, not expressly waived or identified as not applicable to these expenditure authorities, shall apply to the SoonerCare demonstration project for the period of this demonstration extension.

1. **Demonstration Population 5.** Expenditures for health benefits coverage for individuals who are "Non-Disabled Low Income Workers" age 19–64 years who work for a qualifying employer and have income above the Medicaid standard, but no more than 200 percent of the federal poverty level (FPL), and their spouses, and are Medicaid-eligible. This expenditure authority expires December 31, 2014.
2. **Demonstration Population 6.** Expenditures for health benefits coverage for individuals who are "Working Disabled Adults" 19-64 years of age who work for a qualifying employer who have income up to 200 percent of the FPL and are Medicaid eligible. This expenditure authority expires December 31, 2014.
3. **Demonstration Population 8.** Expenditures for health benefits coverage for no more than 3,000 individuals at any one time who are full-time college students age 19 through age 22 and have income not to exceed 200 percent of the FPL, who have no creditable health insurance coverage, work for a qualifying employer, and are Medicaid-eligible. This expenditure authority expires December 31, 2014.
4. **Demonstration population 10.** Expenditures for health benefits coverage for foster parents who work for an eligible employer, and their spouses with household incomes no greater than 200 percent of the FPL. This expenditure authority expires December 31, 2014.

5. **Demonstration Population 11.** Expenditures for health benefits coverage for individuals who are employees and spouses of not-for-profit businesses with 500 or fewer employees, work for a qualifying employer, and with household incomes no greater than 200 percent of the FPL. This expenditure authority expires December 31, 2014.
6. **Demonstration Population 12.** Effective through December 31, 2013, expenditures for health benefits coverage for individuals who are “Non-Disabled Low Income Workers” age 19–64 years whose employer elects not to participate in the Premium Assistance Employer Coverage Plan, who are self-employed, or unemployed, and have income above the Medicaid standard, but no more than 200 percent of the FPL, and their spouses, and are Medicaid-eligible. Effective January 1, 2014, expenditures for health benefits coverage for individuals who are “Non-Disabled Low Income Workers” age 19–64 years whose employer elects not to participate in the Premium Assistance Employer Coverage Plan, who are self-employed, or unemployed, and have income above the Medicaid standard, but no more than 100 percent of the FPL, and their spouses, and are Medicaid-eligible. This expenditure authority expires December 31, 2014.
7. **Demonstration Population 13.** Effective through December 31, 2013, expenditures for health benefits coverage for individuals who are “Working Disabled Adults” 19-64 years of age whose employer elects not to participate in the Premium Assistance Employer Coverage Plan, as well as those who are self-employed, or unemployed (and seeking work), who have income up to 200 percent of the FPL and are Medicaid eligible. Effective January 1, 2014, expenditures for health benefits coverage for individuals who are “Working Disabled Adults” 19-64 years of age whose employer elects not to participate in the Premium Assistance Employer Coverage Plan, as well as those who are self-employed, or unemployed (and seeking work), who have income up to 100 percent of the FPL and are Medicaid eligible. This expenditure authority expires December 31, 2014.
8. **Demonstration Population 14.** Effective through December 31, 2013, expenditures for health benefits coverage for no more than 3,000 individuals at any one time who are full-time college students age 19 through age 22 and have income not to exceed 200 percent of the FPL, who have no creditable health insurance coverage, do not have access to the Premium Assistance Employer Coverage Plan, and are Medicaid-eligible. Effective January 1, 2014, expenditures for health benefits coverage for no more than 3,000 individuals at any one time who are full-time college students age 19 through age 22 and have income not to exceed 100 percent of the FPL, who have no creditable health insurance coverage, do not have access to the Premium Assistance Employer Coverage Plan, and are Medicaid-eligible. This expenditure authority expires December 31, 2014.
9. **Demonstration Population 15.** Effective through December 31, 2013, expenditures for health benefits coverage for individuals who are working foster parents, whose employer elects not to participate in Premium Assistance Employer Coverage Plan, and their spouses with household incomes no greater than 200 percent of the FPL. Effective January 1, 2014, expenditures for health benefits coverage for individuals who are working foster parents, whose employer elects not to participate in Premium Assistance Employer Coverage Plan,

and their spouses with household incomes no greater than 100 percent of the FPL. This expenditure authority expires December 31, 2014.

10. **Demonstration Population 16.** Effective through December 31, 2013, expenditures for health benefits coverage for individuals who are employees and spouses of not-for-profit businesses with 500 or fewer employees with household incomes no greater than 200 percent of the FPL, and do not have access to the Premium Assistance Employer Coverage Plan. Effective January 1, 2014, expenditures for health benefits coverage for individuals who are employees and spouses of not-for-profit businesses with 500 or fewer employees with household incomes no greater than 100 percent of the FPL, and do not have access to the Premium Assistance Employer Coverage Plan. This expenditure authority expires December 31, 2014.
11. **Health Access Networks Expenditures.** Expenditures for Per Member Per Month payments made to the Health Access Networks for case management activities.
12. **Premium Assistance Beneficiary Reimbursement.** Expenditures for reimbursement of costs incurred by individuals enrolled in the Premium Assistance Employer Coverage Plan and in the Premium Assistance Individual Plan that are in excess of 5 percent of annual gross family income. This expenditure authority expires December 31, 2014.
13. **Health Management Program.** Expenditures for otherwise non-covered costs to provide health coaches and practice facilitation services through the Health Management Program.

Title XIX Requirements Not Applicable to the Demonstration Expenditure Authorities

Not Applicable to Demonstration Populations 5, 6, 8, 10, 11, 12, 13, 14, 15, and 16.

1. **Comparability** **Section 1902(a)(10)(B) and 1902(a)(17)**

To permit the state to provide different benefit packages to individuals in demonstration populations 5, 6, 8, 10 and 11 who are enrolled in the Premium Assistance Employer Coverage Plan that may vary by individual. This not applicable authority expires December 31, 2014.

2. **Cost Sharing Requirements** **Section 1902(a)(14)**
insofar as it incorporates Section 1916

To permit the state to impose premiums, deductions, cost sharing, and similar charges that exceed the statutory limitations to individuals in populations 5, 6, 8, 10 and 11 who are enrolled in the Premium Assistance Employer Coverage Plan. This not applicable authority expires December 31, 2014.

3. **Freedom of Choice** **Section 1902(a)(23)(A)**

To permit the state to restrict the choice of provider for beneficiaries eligible under

populations 5, 6, 8, 10 and 11 enrolled in the Premium Assistance Employer Coverage Plan. This not applicable authority expires December 31, 2014. No waiver of freedom of choice is authorized for family planning providers.

4. Retroactive Eligibility **Section 1902(a)(34)**

To enable the state to not provide retroactive eligibility for demonstration participants in populations 5, 6, 8, 10, 11, 12, 13, 14, 15, and 16. This not applicable authority expires December 31, 2014.

5. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services **Section 1902(a)(4)(B); 1902(a)(10)(A); and 1902(a)(43)**

To exempt the state from furnishing or arranging for EPSDT services for full-time college students age 19 through age 22 who are defined in populations 8 and 14. This not applicable authority expires December 31, 2014.

6. Assurance of Transportation **Sections 1902(a)(4) and 1902(a)(19)**
42 CFR 431.53

To permit the state not to provide transportation benefits to individuals in populations 12, 13, 14, 15, and 16 enrolled in the Insure Oklahoma Premium Assistance Individual Plan.