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State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 21-0022-B

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- 3) Approved SPA Pages

OK - Submission Package - OK2021MS00020 - (OK-21-0022-B) - Health Homes

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CMS-10434 OMB 0938-1188

Package Information

Package ID	OK2021MS00020	Submission Type	Official
Program Name	MIGRATED_HH.OK HH - children	State	OK
SPA ID	OK-21-0022-B	Region	Dallas, TX
Version Number	3	Package Status	Approved
Submitted By	Sandra Puebla	Submission Date	7/6/2021
Package Disposition		Approval Date	9/24/2021 4:23 PM EDT
Priority Code	P1		

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Medicaid and CHIP Operations Group
601 E. 12th Street
Room 355
Kansas City, MO 64016



Center for Medicaid & CHIP Services

September 24, 2021

Melody Anthony
State Medicaid Director
Oklahoma Health Care Authority
4345 N Lincoln Blvd
Oklahoma City, OK 73105

Re: Approval of State Plan Amendment OK-21-0022-B MIGRATED_HH.OK HH - children

Dear Melody Anthony,

On July 06, 2021, the Centers for Medicare and Medicaid Services (CMS) received Oklahoma State Plan Amendment (SPA) OK-21-0022-B to migrate individuals currently being served in Health Homes to other care coordination models in the state.

We approve Oklahoma State Plan Amendment (SPA) OK-21-0022-B with an effective date(s) of October 01, 2021.

As a reminder, CMS expects that all quality measures for the Health Homes benefit be reported based on the termination date of the program.

If you have any questions regarding this amendment, please contact Deborah Read at deborah.read@cms.hhs.gov

Sincerely,

James G. Scott

Director, Division of Program
Operations

Center for Medicaid & CHIP Services

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | OK2021MS00020 | OK-21-0022-B | MIGRATED_HH.OK HH - children

Package Header

Package ID	OK2021MS00020	SPA ID	OK-21-0022-B
Submission Type	Official	Initial Submission Date	7/6/2021
Approval Date	9/24/2021	Effective Date	N/A
Superseded SPA ID	N/A		

State Information

State/Territory Name: Oklahoma

Medicaid Agency Name: Oklahoma Health Care Authority

Submission Component

- State Plan Amendment
- Medicaid
- CHIP

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | OK2021MS00020 | OK-21-0022-B | MIGRATED_HH.OK HH - children

Package Header

Package ID	OK2021MS00020	SPA ID	OK-21-0022-B
Submission Type	Official	Initial Submission Date	7/6/2021
Approval Date	9/24/2021	Effective Date	N/A
Superseded SPA ID	N/A		

SPA ID and Effective Date

SPA ID OK-21-0022-B

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Health Homes Program Termination - Phase-Out Plan	10/1/2021	TN # 14-0011

Page Number of the Superseded Plan Section or Attachment (If Applicable):

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | OK2021MS00020 | OK-21-0022-B | MIGRATED_HH.OK HH - children

Package Header

Package ID	OK2021MS00020	SPA ID	OK-21-0022-B
Submission Type	Official	Initial Submission Date	7/6/2021
Approval Date	9/24/2021	Effective Date	N/A
Superseded SPA ID	N/A		

Executive Summary

Summary Description Including Goals and Objectives The State is collaborating with the Oklahoma Department of Mental Health Substance Abuse Services (ODMHSAS) to terminate the health homes benefit for children effective October 1, 2021; however, other care coordination models will still be in place to still serve this population.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2022	\$1122380
Second	2023	\$984631

Federal Statute / Regulation Citation

Section 2703 of the Affordable Care Act (Public Law 111-148); Section 1945 of Social Security Act

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
No items available		

Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | OK2021MS00020 | OK-21-0022-B | MIGRATED_HH.OK HH - children

Package Header

Package ID OK2021MS00020
Submission Type Official
Approval Date 9/24/2021
Superseded SPA ID N/A

SPA ID OK-21-0022-B
Initial Submission Date 7/6/2021
Effective Date N/A

Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

Describe Governor's office does not review state plan amendments.

Health Homes Program Termination - Phase-Out Plan

MEDICAID | Medicaid State Plan | Health Homes | OK2021MS0002O | OK-21-0022-B | MIGRATED_HH.OK HH - children

CMS-10434 OMB 0938-1188

Package Header

Package ID	OK2021MS0002O	SPA ID	OK-21-0022-B
Submission Type	Official	Initial Submission Date	7/6/2021
Approval Date	9/24/2021	Effective Date	10/1/2021
Superseded SPA ID	TN # 14-0011		
	User-Entered		

Provide a description of the phase-out or transition plan for the Health Homes Program that is being terminated

Describe the reason for termination

Oklahoma Medicaid will terminate the Health Home program October 1, 2021. Other care coordination models currently in place will continue to serve the population impacted by the termination of the program.

Describe the overall approach the state will use to terminating the program

The Health Home population will continue to receive integrated behavioral and physical health care coordination from nurses and behavioral health case managers. This will be provided by Community Mental Health Centers (CMHCs) and through Certified Community Behavioral Health service delivery that were previously contracted as Health Homes.

Indicate method of termination

Termination effective date

- The state will terminate all participants from the Health Homes Program on the same date 10/1/2021
- The state will phase-out the termination of participation in the Health Homes Program

Describe the process the state will use to transition all participants and how referrals will be made to other health care providers

Oklahoma currently has coordinated care delivery for children with serious emotional disturbance (SED) through Patient Centered Medical Homes (PCMH), Health Access Networks (HANs), Health Management Program (HMP), and Certified Community Behavioral Health (CCBH) service delivery. Care coordination will be a seamless transition for members receiving Health Home (HH) services through CMHCs CCBH services. Most CMHCs will become an eligible organization to provide CCBH services. Current HH members who do not choose a CMHC or a CCBH provider to continue services can access physical and behavioral health integration services through the PCMH, CMHC, and/or CCBHs.

The State previously reported that as of July 1, 2021 there were 1,626 children enrolled in the HH program. Most HH providers are transitioning to the CCBH model; therefore, care coordination, provider standards, health information technology (HIT), and provider capacity will remain the same and there is no need for health record transmission. Of the current enrollees, it was found that there were 617 children attributed to private behavioral health organizations or state sponsored Program of Assertive Community Treatment (PACT) teams; thus, will not transition to the CCBH model when the HH program terminates. The State has planned outreach activities to current HH enrollees to inform them that the program is ending and they have free choice of providers for integrated health care, including Patient Center Medical Home (PCMH).

There are no concerns related to care coordination, provider standards, HIT, nor health record transmission for enrollees who are currently aligned with private providers that do not choose to pursue CCBH provider certification. CCBH providers (as well as OU IMPACT) have protocols and procedures in place with area hospitals for identifying and engaging at-risk consumers who are admitted to emergency departments, inpatient hospitals, urgent recovery and crisis centers. These protocols also apply when consumers are discharged, unless there is a formal transfer of care to a non-CCBH provider or non-PACT entity. Protocols include: the transfer of medical records of services received; active follow-up after discharge; a plan for suicide prevention and safety as appropriate; and a provision for peer services.

The State believes that with the Prospective Payment System (PPS) reimbursement method and CCBH provider expansion funding, CCBH providers will have the capacity to provide access and continued quality services to transitioning HH enrollees.

Over the past few years, many members have shifted from the HH program to CCBH providers causing a shift from the HH program financial line to that of CCBHC providers. The budget impact to sunset health home services for adults and children is not inclusive of expansion adults and the estimated budget savings for expansion adults is \$0 because there is no utilization for the program by this population.

Questions regarding this transition can be directed to Malissa McIntire, Director of Integrated Care, ODMHSAS, at (405) 248-9341.

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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