1	STATE OF OKLAHOMA
2	2nd Session of the 54th Legislature (2014)
3	COMMITTEE SUBSTITUTE
4	FOR SENATE BILL NO. 1495 By: David of the Senate
5	and
6	McCullough of the House
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9	COMMITTEE SUBSTITUTE
10	[Oklahoma Medicaid Reform Act of 2014 - codification
11	- effective date]
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13	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
14	SECTION 1. NEW LAW A new section of law to be codified
15	in the Oklahoma Statutes as Section 1011.12 of Title 56, unless
16	there is created a duplication in numbering, reads as follows:
17	This act shall be known and may be cited as the "Oklahoma
18	Medicaid Reform Act of 2014".
19	SECTION 2. NEW LAW A new section of law to be codified
20	in the Oklahoma Statutes as Section 1011.13 of Title 56, unless
21	there is created a duplication in numbering, reads as follows:
22	A. The Oklahoma Health Care Authority is directed to develop
23	and implement a statewide, patient-centered, integrated managed care
2.4	system for the provision of services provided, inclusive of all

Medicaid eligible populations, under the Oklahoma Medicaid Program.

The managed care plan shall include a statewide network with a

catchment area serving every county in this state. Conversion of

the Oklahoma Medicaid Program to a managed care system shall be

completed by no later than January 1, 2016.

- B. The Authority shall develop and submit for approval applications or amendments for waivers of applicable federal laws and regulations as necessary to implement the provisions of the Oklahoma Medicaid Reform Act of 2014. Copies of all waivers submitted to and approved by the United States Centers for Medicare and Medicaid Services under this section shall be provided to the Legislature within ten (10) days of their approval. The Oklahoma Health Care Authority shall submit a plan containing a recommended timeline for implementation of any waivers and budgetary projections of the effect of the Oklahoma Medicaid Reform Act of 2014. This implementation plan shall be submitted to the Governor, the Speaker of the House of Representatives and the President Pro Tempore of the Senate.
- C. Participation by specialty plans is subject to procurement requirements provided for in this act. The enrollment of a specialty plan shall not exceed ten percent (10%) of the total number of enrollees; provided, however, a specialty plan whose target population includes no more than ten percent (10%) of the enrollees shall not be subject to the regional enrollment limits

provided for in this section. For the purposes of this subsection,

"specialty plan" shall mean a managed care plan serving Medicaid

recipients who meet specified criteria based on age, medical

conditions, or diagnosis.

- D. The Oklahoma Health Care Authority shall establish a fiveyear contract with each managed care plan selected through
 procurement procedures provided for in this act. A plan contract
 may not be renewed; provided, however, the Authority may extend the
 term of a plan contract to cover any delays during the transition to
 a new plan.
- E. Provider payments by the managed care plans shall not be lower than the Medicaid fee-for-service rate in effect on May 1, 2015.
 - F. The Oklahoma Health Care Authority shall implement a choice counseling system to ensure enrollees have timely access to accurate information on available plans. The counseling system shall include plan-to-plan comparative information on benefits, provider networks, drug formularies, quality measures, and other data points as deemed necessary by the Authority.
 - G. Managed care plans may customize benefit packages for nonpregnant adults, vary cost-sharing provisions, and provide coverage
 for additional services. The Oklahoma Health Care Authority shall
 evaluate the proposed benefit packages to ensure services are
 sufficient to meet the needs of the plan's enrollees and to verify

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actuarial equivalence. Each plan operating in the managed care
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    program shall, subject to approval by the Authority, establish a
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    program to encourage and reward healthy behaviors.
        SECTION 3. This act shall become effective November 1, 2014.
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