

COMMITTEE AMENDMENT

HOUSE OF REPRESENTATIVES

State of Oklahoma

SPEAKER:

CHAIR:

I move to amend HB3714 _____
Of the printed Bill
Page _____ Section _____ Lines _____
Of the Engrossed Bill

By striking the Title, the Enacting Clause, the entire bill, and by
inserting in lieu thereof the following language:

AMEND TITLE TO CONFORM TO AMENDMENTS

Amendment submitted by: Kevin Wallace

Adopted: _____

Reading Clerk

STATE OF OKLAHOMA

2nd Session of the 56th Legislature (2018)

PROPOSED COMMITTEE
SUBSTITUTE
FOR
HOUSE BILL NO. 3714

By: Wallace and Casey of the
House

and

David and Fields of the
Senate

PROPOSED COMMITTEE SUBSTITUTE

An Act relating to directed dental care services;
stating purpose; requiring certain contracting by the
Oklahoma Health Care Authority; specifying certain
methods of compensation; requiring certain minimum
number of contracts; providing exception; requiring
certain contract provisions related to reporting,
utilization of fees, term length, and cost
responsibilities; limiting meaning of certain phrase;
requiring certain verifications; authorizing the
establishment of certain minimum standards; requiring
certain evidence be considered when assessing
compliance with standards; prohibiting certain
conditions to contract awards; providing for the
assignment of eligible persons to plans under
different scenarios; authorizing rate setting as
needed; authorizing the promulgation of rules;
authorizing the Oklahoma Health Care Authority to
seek necessary state plan amendments and federal
waivers; requiring initial awards by certain date;
providing for contracts to become effective on
certain date; and providing for codification.

1 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

2 SECTION 1. NEW LAW A new section of law to be codified
3 in the Oklahoma Statutes as Section 5028.2 of Title 63, unless there
4 is created a duplication in numbering, reads as follows:

5 A. To increase efficiency and facilitate better access and oral
6 health outcomes for Medicaid enrollees, the Oklahoma Health Care
7 Authority shall contract with licensed dental health plans for
8 directed dental care services on a statewide basis. The provisions
9 of such contracts shall provide compensation on a prepaid or fixed
10 full-risk basis for participating licensed dental health plans.

11 B. 1. Except as provided in paragraph 2 of this subsection,
12 the Authority shall maintain contracts with at least two licensed
13 dental health plans in all areas of the state for the provision of
14 directed dental care services.

15 2. The Authority shall not be considered in violation of this
16 subsection for areas of this state where less than two licensed
17 dental health plans offering directed dental care services are
18 operating.

19 C. All contracts entered pursuant to the provisions of this
20 section shall include but not be limited to the following
21 provisions:

22 1. Quarterly reporting requirements of Medicaid utilization and
23 encounter data by current dental technology code by the licensed
24 dental health plan to the Authority;

1 2. Elements designed to reduce enrollee emergency room
2 utilization for dental purposes;

3 3. Requirements that no less than eighty-five percent (85%) of
4 all contracting fees be utilized to directly offset the cost of
5 providing direct patient care to eligible persons by the licensed
6 dental health plan. For purposes of this paragraph the meaning of
7 the phrase "cost of providing direct patient care to eligible
8 persons" shall not include costs associated with licensed dental
9 health plan administration, or the administration of the provisions
10 of a contract entered under this section;

11 4. A contract term-length of three (3) years with two one-year-
12 renewal options for the licensed dental health plan; and

13 5. That the Authority and the state shall bear no
14 responsibility for costs associated with the general transition from
15 the existing fee-for-service reimbursement model to the directed
16 dental care model provided for under this section.

17 D. The Authority shall verify that savings estimated by every
18 licensed dental health plan seeking to enter a contract under the
19 provisions of this section are actuarially sound prior to entering a
20 contract with such plan.

21 E. The Authority may establish minimum standards for adequacy
22 and size of provider networks, and require licensed dental health
23 plans seeking to enter contracts under the provisions of this
24 section to provide evidence their network meets or exceeds such

1 standards prior to entering a contract with such plan. For purposes
2 of determining adequacy and size pursuant to this subsection the
3 Authority shall accept, as evidence of a licensed dental health
4 plan's provider network, nonbinding letters of intent the licensed
5 dental health plan has entered with providers. The Authority shall
6 not require a licensed dental health plan to have fully contracted
7 with network providers prior to the award of a contract under this
8 section.

9 F. 1. During the first year of implementation of the directed
10 dental care services program created under the provisions of this
11 section, the Authority shall assign eligible persons at an even
12 distribution among contracted licensed dental health plans;
13 provided, that sixty (60) days after being assigned to a contracted
14 licensed dental health plan, eligible persons shall have the option
15 to remain with such plan or be assigned to the contracted licensed
16 dental health plan of their choice.

17 2. After the first year of implementation of the directed
18 dental care services program created under the provisions of this
19 section, eligible persons shall have the option to be assigned to
20 the contracted licensed dental health plan of their choice.
21 Eligible persons who do not utilize their option to make such a
22 choice shall be assigned by the Authority to the contracted licensed
23 dental health plan with the highest Medicaid market share within the
24 state at that time.

1 G. The Authority shall set minimum provider rates as needed to
2 implement the provisions of this section.

3 H. The Authority shall promulgate rules as needed to implement
4 the provisions of this section.

5 I. The Authority shall seek any necessary state plan amendments
6 and federal waivers required to implement the provisions of this
7 section.

8 J. The Authority shall award the initial contracts under the
9 provisions of this section to no less than two licensed dental
10 health plans no later than March 1, 2019, and such contracts shall
11 become effective July 1, 2019.

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