1 HOUSE OF REPRESENTATIVES - FLOOR VERSION 2 STATE OF OKLAHOMA 3 1st Session of the 58th Legislature (2021) COMMITTEE SUBSTITUTE 4 FOR ENGROSSED 5 SENATE BILL NO. 131 By: Garvin of the Senate 6 and 7 McEntire, Newton and Bush of the House 8 9 10 COMMITTEE SUBSTITUTE 11 An Act relating to public health; creating the Oklahomans Caring for Oklahomans Act; directing the 12 Oklahoma Health Care Authority to develop a certain program; providing for elements of the program; 1.3 requiring maximization of sharing certain information; requiring data sharing programs to have 14 ability to screen for certain determinants; requiring the Oklahoma Health Care Authority to maintain and 15 improve certain partnerships; directing the Oklahoma Health Care Authority to promulgate rules; and 16 declaring an emergency. 17 18 19 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA: 20 SECTION 1. NEW LAW A new section of law to be codified 21 in the Oklahoma Statutes as Section 1010.14 of Title 56, unless 22 there is created a duplication in numbering, reads as follows: 23 This act shall be known and may be cited as the "Oklahomans 24 Caring for Oklahomans Act".

- SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1010.15 of Title 56, unless there is created a duplication in numbering, reads as follows:
- A. The Oklahoma Health Care Authority shall implement the Oklahomans Caring for Oklahomans Act by developing a program that controls costs and improves health outcomes for Medicaid beneficiaries. The plan shall contain new or improve upon existing programs of the Authority and shall include, but not be limited to, the following elements:
- 1. Prevention. Medicaid beneficiaries shall enroll in the program and renew annually at their wellness visits to their primary provider clinics. Enrollment and renewal shall include a standard baseline risk assessment following the Centers for Medicare and Medicaid Services' guidelines for substance abuse, mental health, and physical health. The assessment shall identify social health risks including, but not limited to, smoking, sedentary lifestyle, obesity, social factors such as domestic violence, and food insecurity.
- 2. Chronic care management. The Authority shall develop and carry out a plan for chronic care coordination that shall include, but not be limited to, the following components:
 - a. medication therapy management,
 - b. patient education,

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- c. frequent interaction between the Authority and
 beneficiaries to identify potential health needs and
 decrease emergency department and hospital
 utilization, and
 - d. development of a long-term plan of wellness for each beneficiary.
 - 3. Payment reform. Building upon the success of primary care medical homes, the Authority shall develop a transition care management plan to incentivize compliance behaviors by patients following inpatient treatment to decrease rehospitalizations and emergency department utilization. The Authority shall establish value-based payments for providers that incentivize providers with improved quality metrics and health outcomes. If the Authority adds to the covered benefit plan any new benefits that cost more than Five Hundred Thousand Dollars (\$500,000.00), the new benefits must be approved by the Legislature unless a corresponding budget offset can be found within the Authority's existing agency budget.
 - B. Health information exchange. In order to reduce redundancy for medical services, the Authority shall maximize the sharing of health information among providers. Any program for sharing data shall also have the ability to screen for social determinants of health.

1	C. Partnerships with tribal nations shall be maintained and
2	enhanced by the Authority in implementation of the Oklahomans Caring
3	for Oklahomans Act.
4	D. The Oklahoma Health Care Authority shall promulgate rules as
5	necessary to implement this act.
6	SECTION 3. It being immediately necessary for the preservation
7	of the public peace, health or safety, an emergency is hereby
8	declared to exist, by reason whereof this act shall take effect and
9	be in full force from and after its passage and approval.
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11	COMMITTEE REPORT BY: COMMITTEE ON PUBLIC HEALTH, dated 04/08/2021 - DO PASS, As Amended and Coauthored.
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