

A Look At The Numbers

Medicaid Managed Care: The Right Model for Oklahoma

The state of Oklahoma will soon partner with managed care organizations (MCOs) to serve the healthcare needs of individuals facing economic and social barriers. MCOs align with state requirements to deliver a higher standard of healthcare.



Public resources
Accountability
Oversight



Private sector capital
Expertise
Innovation



This partnership leads to higher quality care and improved health outcomes for members enrolled in Medicaid while managing Medicaid costs.

918,000

Oklahomans are currently enrolled in SoonerCare¹

178,000

additional Oklahomans are expected to gain coverage due to Medicaid expansion²

3 in 7 children

are covered by Medicaid in Oklahoma³

MCOs will enable Oklahoma to:

Deliver Value & Predictability



- ↑ With managed care, states pay a fixed, per-member, per-month rate, which allows them to budget with transparency and predictability
- ↓ The managed care model delivered nationwide Medicaid savings of \$7.1 billion in 2016⁴
- ↓ Had remaining fee-for-service expenditures nationwide been transitioned to the managed care model during 2017, an additional \$5 billion would have been saved⁴
- ↑ In 2018, Medicaid expenditures made up approximately 24% of the Oklahoma state budget.⁵

Improve Quality of Care



- ↑ MCOs can help Oklahoma improve many care quality metrics which are far below national median values, including:
 - Postpartum care⁶
 - Follow-ups after hospitalization for mental illness⁷
 - Breast cancer screenings⁸
- ↑ MCOs integrate behavioral and physical health considerations to better monitor all aspects of patients' health
- ↑ MCOs are regularly reviewed by the National Committee on Quality Assurance and held accountable for up to 69 NCQA quality measures⁹

Support Provider Networks



- ↑ MCOs use value-based payment models that incentivize, empower, and reward providers for the quality of care
- ↑ MCOs help maintain strong provider networks and offer clinical support and technological innovations that enable rural providers to deliver higher quality care
- ↑ MCOs align resources across the continuum of care to form strong partnerships with providers, supporting high-quality, cost-effective care and more streamlined flow of vital patient information