**SoonerCare Fast Facts**

**January 2012**

**TOTAL ENROLLMENT — OKLAHOMA SOONERCARE (MEDICAID)**

<table>
<thead>
<tr>
<th>Qualifying Group</th>
<th>Age Group</th>
<th>Enrollment</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aged/Blind/Disabled</td>
<td>Child</td>
<td>19,324</td>
<td>2.55%</td>
</tr>
<tr>
<td>Aged/Blind/Disabled</td>
<td>Adult</td>
<td>131,364</td>
<td>17.37%</td>
</tr>
<tr>
<td>Children/Parents</td>
<td>Child</td>
<td>468,418</td>
<td>61.93%</td>
</tr>
<tr>
<td>Children/Parents</td>
<td>Adult</td>
<td>73,144</td>
<td>9.67%</td>
</tr>
<tr>
<td>Other</td>
<td>Child</td>
<td>54</td>
<td>0.01%</td>
</tr>
<tr>
<td>Other</td>
<td>Adult</td>
<td>20,873</td>
<td>2.76%</td>
</tr>
<tr>
<td>Oklahoma Cares (Breast &amp; Cervical Cancer)</td>
<td></td>
<td>1,244</td>
<td>0.16%</td>
</tr>
<tr>
<td>SoonerPlan (Family Planning)</td>
<td></td>
<td>41,549</td>
<td>5.49%</td>
</tr>
<tr>
<td>TEFRA</td>
<td></td>
<td>424</td>
<td>0.06%</td>
</tr>
</tbody>
</table>

**Total Enrollment** 756,394

**Delivered System Breakdown of Total Enrollment**

- SoonerCare Traditional (Fee-For-Service), 235,794, 31%
- SoonerCare Choice, 479,051, 63%
- SoonerPlan, 41,549, 6%

**Other Enrollment Facts**

- Total Enrollment including Insure Oklahoma — 787,859
- Unduplicated enrollees State Fiscal Year-to-Date (July through report month including Insure Oklahoma) — 915,819
- Oklahoma SoonerCare (Medicaid) members residing in a long-term care facility — 15,839
- Oklahoma persons enrolled in both Medicare and Medicaid (Dual Enrollees) — 107,995

**Race Breakdown of Total Enrollment**

- American Indian: Children 62,540, Adults 25,767, Percent 12%, Pregnant Women 3,097
- Asian or Pacific Islander: Children 8,048, Adults 3,955, Percent 2%
- Black or African American: Children 64,539, Adults 35,876, Percent 13%
- Caucasian: Children 320,706, Adults 190,631, Percent 68%
- Multiple Race: Children 37,236, Adults 7,096, Percent 6%
- Hispanic Ethnicity: Children 92,675, Adults 16,015, Percent 14%

**New Enrollees**

- Oklahoma SoonerCare members that have not been enrolled in the past 6 months.
  - Adults 9,332
  - Children 13,236
  - Total 22,568

**CHIP Breakdown of Total Enrollment**

Members qualifying for SoonerCare (Medicaid) eligibility under the CHIP program are under age 19 and have income between the maximum for standard eligibility and the expanded 185% of Federal Poverty Level (FPL) income guidelines.

<table>
<thead>
<tr>
<th>Age Breakdown</th>
<th>% of FPL</th>
<th>CHIP Enrollees</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRENATAL</td>
<td></td>
<td>2,540</td>
</tr>
<tr>
<td>INFANT</td>
<td>150% to 185%</td>
<td>1,374</td>
</tr>
<tr>
<td>01-05</td>
<td>133% to 185%</td>
<td>10,557</td>
</tr>
<tr>
<td>06-12</td>
<td>100% to 185%</td>
<td>28,565</td>
</tr>
<tr>
<td>13-18</td>
<td>100% to 185%</td>
<td>20,114</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>63,150</td>
</tr>
</tbody>
</table>

**Race is self-reported by members at the time of enrollment. The multiple race members have selected two or more races. Hispanic is an ethnicity not a race; Hispanics can be of any race and are accounted for in a race category above.**

**Other Breakdowns of Total Enrollment**

- Children 493,069, 65%
- Infants 150% to 185% 1,378
- Toddlers 13-18 20,114
- Total 63,150

Data was compiled by Reporting & Statistics as of the report date. Numbers frequently change due to certifications occurring after the data is extracted and other factors. This report is based on data within the system prior to the report date. A majority of the data is a “point in time” representation of the specific report month and is not cumulative. Unless stated otherwise, CHILD is defined as an individual under the age of 21. The data is valid as of the report date and is subject to change.
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**Total Enrollment Trend**

- Aug-11: 733,285
- Sep-11: 735,111
- Oct-11: 743,354
- Nov-11: 749,569
- Dec-11: 749,302
- Jan-12: 756,394

**Percent of Federal Poverty Level Totals**

- No Poverty Data, 6,035
- 0 - 50%, 210,418
- 51 - 100%, 150,868
- 101 - 133%, 96,452
- 134 - 150%, 31,058
- 151% and Above, 261,563

The “No Poverty Data” group consists of members with no poverty data and members enrolled with an aid category of U: DDSD State, R2: OJA not Incarcerated, or R4: OJA Incarcerated. These aid categories do not require poverty data or do not use the poverty data.

**Federal Government Approves Oklahoma Waiver For Hospital Provider Fee**

After months of working out details, Oklahoma was awarded federal approval for its Supplemental Hospital Offset Provider Payment (SHOPP) program. The Oklahoma Health Care Authority (OHCA) has been working toward approval of the hospital provider fee from the Centers for Medicare & Medicaid Services (CMS) to implement the change since the measure passed last legislative session.

House bill 1381 allows for a 2.5 percent fee to be put on certain Oklahoma hospitals. The revenue from the measure is then matched by the federal government and used primarily to maintain hospital reimbursement from the SoonerCare program. OHCA projects it will raise an additional $340 million for hospital payments. The legislation terminates the fee on Dec. 31, 2014.

“The unfortunate reality is at times when our provider community is needed and utilized the most; is often the same time the state is strapped for resources and has to look for new ways to fund its programs,” said Mike Fogarty, CEO of OHCA.

The law was signed by the governor on May 13, 2011, after being passed by the legislature with super majority approval. Forty-six states have some sort of provider fee to leverage federal funding in order to keep reimbursement rates up and Medicaid programs funded.

“When care for SoonerCare patients is fully funded, it makes hospital care more affordable for all Oklahomans. This program also protects existing SoonerCare payment rates for physicians and other SoonerCare providers,” said Craig W. Jones, president of the Oklahoma Hospital Association. “Today’s announcement highlights our governor’s and legislators’ commitment to improving access to care for all Oklahomans.”

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January 19, 2012

OHCA Contacts: Jo Kilgore - (405) 522-7474, Carter Kimble - (405) 522-7510

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