

Comments from Steven Crawford, MD:

Lord, deliver me from the man who never makes a mistake, and also from the man who makes the same mistake twice. [William Mayo](#)

The Oklahoma Legislature is considering a major change in the way health care is delivered to many Oklahomans. As Chair of the Medical Advisory Committee to the Oklahoma Health Care Authority (OHCA) and a member of the Committee since 1995 I have seen the evolution of the program that serves Oklahoma's Medicaid population.

I have observed the implementation of private managed Medicaid in Oklahoma that occurred in the 1990's. I then observed the dissolution of private managed Medicaid in Oklahoma because it was a program that could not succeed here financially. While the concept of managing care is a good one, OHCA has actually accomplished that with the implementation in 2009 of a patient-centered medical home (PCMH) primary care delivery system throughout the state. This physician-endorsed model incorporates a managed care component with traditional fee-for-service and incentive payments. OHCA's implementation of this program has been a model for the nation and many states have tried to implement a similar program in their states.

Now, once again, legislation is moving through the Legislature that would allow big private insurance companies, some based out of state to competitively bid to provide insurance for these patients, many who are medically high-risk and very fragile. Most people do not realize that the largest percentage of Medicaid dollars is spent on nursing home patients even though the majority of the patients are children and pregnant women who are mostly healthy. As physicians, we are very concerned about patient access to appropriate high-quality health care particularly in our extensive rural areas. OHCA has made major improvements in attracting physicians to participate in caring for these patients by providing adequate reimbursement for the care they give. However, if the Legislature approves legislation mandating the implementation of privatized managed Medicaid, all that changes and I believe, putting access to quality patient care at great risk for patients throughout the state

Since OHCA implemented the PCMH they have successfully kept their administrative costs much lower than any private insurance can afford, they have improved the quality of patient care and with one system for the state there is much less hassle for patients, doctors, hospitals and other providers. I strongly encourage our state leaders to not "go back to the future" as we are there now and are doing well – PLEASE DO NOT MAKE THE SAME MISTAKE TWICE!

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