

Oklahoma Health Care Authority

The Oklahoma Health Care Authority (OHCA) values your feedback and input. It is very important that you provide your comments regarding the proposed rule change by the comment due date. Comments can be submitted on the OHCA's [Proposed Changes Blog](#).

OHCA COMMENT DUE DATE: January 11, 2025

The proposed policy is an Emergency Rule. The proposed policy will be presented at the January 7, 2025, Tribal Consultation. Additionally, this proposal is scheduled to be presented to the Medical Advisory Committee on March 6, 2025, and the OHCA Board of Directors on March 26, 2025.

Reference: APA WF # 25-05

SUMMARY: Nursing Facility Durable Medical Equipment Alignment — The proposed emergency rule changes are necessary to avoid violation of federal regulations. The proposed changes will align agency rules with the Title XIX State Plan durable medical equipment (DME) reimbursement guidelines for nursing facilities, which stipulate that DME is included as part of the nursing facility rate methodology and is not billed separately.

LEGAL AUTHORITY

The Oklahoma Health Care Authority Act, Section 5007 (C)(2) of Title 63 of Oklahoma Statutes; the Oklahoma Health Care Authority Board; Title XIX State Plan

RULE IMPACT STATEMENT:

STATE OF OKLAHOMA OKLAHOMA HEALTH CARE AUTHORITY

SUBJECT: Rule Impact Statement
APA WF # 25-05

A. Brief description of the purpose of the rule:

The proposed emergency rule changes are necessary to avoid violation of federal regulations. The proposed changes will align agency rules with the Title XIX State Plan durable medical equipment (DME) reimbursement guidelines for nursing facilities, which stipulate that DME is included as part of the nursing facility rate methodology, and is not billed separately.

B. A description of the classes of persons who most likely will be affected by the proposed rule, including classes that will bear the cost of the proposed rule, and any information on cost impacts received by the agency from any private or public entities:

The proposed rule will have no affect on any classes of persons.

C. A description of the classes of persons who will benefit from the proposed rule:

The proposed rule changes will benefit SoonerCare members who receive services in a nursing facility by confirming DME coverage and supporting increased access to care.

- D. A description of the probable economic impact of the proposed rule upon the affected classes of persons or political subdivisions, including a listing of all fee changes and, whenever possible, a separate justification for each fee change:

There is no probable economic impact and there are no fee changes associated with the rule change for the above classes of persons or any political subdivisions.

- E. The probable costs and benefits to the agency and to any other agency of the implementation and enforcement of the proposed rule, the source of revenue to be used for implementation and enforcement of the proposed rule, and any anticipated affect on state revenues, including a projected net loss or gain in such revenues if it can be projected by the agency:

The agency estimates this to be budget neutral.

- F. A determination of whether implementation of the proposed rule will have an economic impact on any political subdivisions or require their cooperation in implementing or enforcing the rule:

The proposed rule changes will not have an economic impact on any political subdivision or require their cooperation in implementing or enforcing the rule changes.

- G. A determination of whether implementation of the proposed rule will have an adverse effect on small business as provided by the Oklahoma Small Business Regulatory Flexibility Act:

The agency does not anticipate that the proposed rule changes will have an adverse effect on small businesses.

- H. An explanation of the measures the agency has taken to minimize compliance costs and a determination of whether there are less costly or non-regulatory methods or less intrusive methods for achieving the purpose of the proposed rule:

The agency has taken measures to determine that there are no other legal methods to achieve the purpose of the proposed rule. Measures included a formal public comment period and tribal consultation.

- I. A determination of the effect of the proposed rule on the public health, safety and environment and, if the proposed rule is designed to reduce significant risks to the public health, safety and environment, an explanation of the nature of the risk and to what extent the proposed rule will reduce the risk:

The proposed rule should have no adverse effect on the public health, safety or environment.

- J. A determination of any detrimental effect on the public health, safety and environment if the proposed rule is not implemented:

The agency does not anticipate any detrimental effect on the public health and safety if the proposed rule is not passed.

- K. The date the rule impact statement was prepared and if modified, the date modified:

Prepared date: November 26, 2024

TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE
SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES
PART 9. LONG TERM CARE

317:30-5-133.2. Ancillary services

~~(a)~~ Ancillary services are those items which are not considered routine services. Ancillary services may be billed separately to the SoonerCare program, unless reimbursement is available from Medicare or other insurance or benefit programs. ~~Coverage criteria, utilization controls and program limitations are specified in Part 17 of OAC 317:30-5. Ancillary services are limited to the following services:~~

~~(1) Services requiring prior authorization:~~

- ~~(A) External breast prosthesis and support accessories.~~
- ~~(B) Ventilators and supplies.~~
- ~~(C) Total Parenteral Nutrition (TPN), and supplies.~~
- ~~(D) Custom seating for wheelchairs.~~

~~(2) Services not requiring prior authorization:~~

- ~~(A) Permanent indwelling or male external catheters and catheter accessories.~~
- ~~(B) Colostomy and urostomy supplies.~~
- ~~(C) Tracheostomy supplies.~~
- ~~(D) Catheters and catheter accessories.~~
- ~~(E) Oxygen and oxygen concentrators.~~

~~(i) PRN Oxygen. Members in nursing facilities requiring oxygen PRN will be serviced by oxygen kept on hand as part of the per diem rate.~~

~~(ii) Billing for Medicare eligible members. Oxygen supplied to Medicare eligible nursing home members may be billed directly to OHCA. It is not necessary to obtain a denial from Medicare prior to filing the claim with OHCA.~~

~~(b) Items not considered ancillary, but considered routine and covered as part of the routine rate include but are not limited to:~~

- ~~(1) Diapers.~~
- ~~(2) Underpads.~~
- ~~(3) Medicine cups.~~
- ~~(4) Eating utensils.~~
- ~~(5) Personal comfort items.~~