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.