PUBLIC NOTICE

Pursuant to 42 CFR § 447.205, the Oklahoma Health Care Authority (OHCA) is required to give public notice of any significant proposed change in methods and standards for setting payment rates for services in the SoonerCare program. The following method change will necessitate an amendment to the Oklahoma Medicaid State Plan. The proposed changes were presented at the Tribal Consultation meeting on September 1, 2020 at 11:00 AM via teleconference. Additionally, the proposal was presented virtually at the State Plan Amendment Rate Committee (SPARC) meeting on September 8, 2020 at 1 p.m., and it was virtually presented and voted upon during the OHCA Board meeting on September 16, 2020 at 3 p.m.

Residential Substance Use Disorder (SUD) Services; Effective date: October 1, 2020, contingent upon CMS approval.

The Oklahoma Health Care Authority (OHCA) in collaboration with the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) will seek approval of a State Plan Amendment (SPA) to add coverage and reimbursement of residential substance use disorder (SUD) services to the Oklahoma State Plan for individuals under the age of 21 and those age 21-64 residing in facilities with 16 beds or less. Residential SUD services will be provided in accordance with the American Society of Addiction Medicine (ASAM) Level 3 guidelines.

The proposed reimbursement methodology will have two (2) components:

- Per diem rates developed from historical ODMHSAS rates and the American Society of Addiction Medicine (ASAM) levels of care (LOC) placement criteria; and
- Performance-based bonus payments to promote the goals and outcomes of residential treatment.

ASAM Level of Care (LOC)	Placement Criteria	Service Description	Per Diem Rate
3.1	Clinically Managed Low-Intensity Residential Services for Adolescents	Halfway House Services	\$63.00
	Clinically Managed Low-Intensity Residential Services for Adults	Halfway House Services	\$46.00
3.3	Clinically Managed Population-Specific High Intensity Residential Services for adults only		
3.5	Clinically Managed Medium-Intensity Residential Services for Adolescents	Residential Treatment	\$135.00
	Clinically Managed High-Intensity Residential Services for Adults	Residential Treatment	\$ 85.00

Proposed Per Diem Rates:

		Intensive	
		Residential	\$160.00
		Treatment	
3.7		Medically	
	Medically Monitored High-Intensity Inpatient	Supervised	\$200.00
	Services for Adolescents	Withdrawal	\$200.00
		Management	
		Medically	
	Medically Monitored Intensive Inpatient	Supervised	\$200.00
	Services Withdrawal Management for Adults	Withdrawal	\$200.00
		Management	

Proposed Residential Family-Based Treatment Per Diem Rates:

ASAM LOC	Placement Criteria	Service Description	Per Diem Rate
3.1	Individuals with	Halfway House Services	\$117.00
	Dependent Children and Pregnant Women	Residential Treatment	\$180.00
3.5		Intensive Residential Treatment	\$250.00

Proposed Performance-Based Bonus Payments:

Providers will have the potential to earn a performance-based payment in the amount of 10% of qualifying per diem payments. To be eligible for these performance-based payments, providers must meet or exceed all state-defined benchmarks for the following metrics during the quarterly reporting period:

ASAM Level 3.1, 3.3, and 3.5 Providers

Measure	Benchmark
Percent of members admitted to/engaged in a lower level of care behavioral health service within seven (7) days of discharge	60% minimum
Percent of members who complete treatment	60% minimum
Percent of members who experience a reduction in drug use for all drugs of choice	85% minimum
Percent of members who are readmitted to the same or higher level of care behavioral health service within ninety (90) days of discharge	10% maximum

ASAM Level 3.7 Providers

Measure	Benchmark
Percent of members admitted to/engaged in a lower level of care behavioral health	60% minimum
service within seven (7) days of discharge	
Percent of members who complete treatment	60% minimum
Percent of members who are readmitted to the same or higher level of behavioral	10% maximum
health care service within ninety (90) days of discharge	

The estimated budget impact for SFY2021 is a total of \$523,643.65 with \$156,796.36 in state share. The estimated budget impact for SFY2022 is a total of \$727,041.37 with \$232,725.94 in state share. The budget impact includes the estimated cost of performance based payments.

Interested persons may visit www.okhca.org/PolicyBlog to view a copy of the proposed state plan amendment, public notice(s), and a link to provide public comments on the proposal. Due to the current public health emergency and the associated social distancing guidelines, persons wishing to present their views in writing or obtain copies of the proposed state plan amendment may do so via mail by writing to: Oklahoma Health Care Authority, Federal Authorities Unit, 4345 N. Lincoln Blvd., Oklahoma City, Oklahoma 73105, or by email at federal.authorities@okhca.org. Written comments or requests for copies of the proposed state plan amendment will be accepted by contacting OHCA as indicated. Comments submitted through the OHCA policy blog will be available for review online at www.okhca.org/PolicyBlog. Other written comments are available upon request at federal.authorities@okhca.org. Comments will be accepted September 16, 2020 through October 16, 2020.