



STATE OF OKLAHOMA
OKLAHOMA HEALTH CARE AUTHORITY

I/T/U Public Notice 2018-07

August 22, 2018

RE: Oklahoma Health Care Authority (OHCA) Proposed Rule, State Plan, and Waiver Amendments

Dear Tribal Representative:

The purpose of this letter is to give you notice of proposed changes that will be reviewed at the tribal consultation meeting held on September 4th, 2018 at 11 a.m. in the Oklahoma Health Care Authority (OHCA) Board Room at the OHCA's office, located at 4345 N Lincoln, Oklahoma City, OK. The OHCA invites you to attend this meeting, and we welcome any comments regarding the proposed changes. The agency is committed to active communication with tribal governments during the decision-making and priority-setting process and therefore keeps you apprised of all proposed changes.

Enclosed are summaries of the currently proposed rule, state plan, and waiver amendments for your review. The summaries describe the purpose of each change.

Please note that these are only proposed changes and have not yet taken effect. Before implementation, new changes must obtain budget authorization, the OHCA Board approval, and when applicable, federal approval and the governor's approval.

Additionally, the OHCA posts all proposed changes on the agency's [Policy Change Blog](#) and the [Native American Consultation Page](#). This public website is designed to give all constituents and stakeholders an opportunity to review and make comments regarding upcoming policy changes. To ensure that you stay informed of proposed policy changes, you may sign up for web alerts to be automatically notified when any new proposed policy changes are posted for comment.

The OHCA values consultation with tribal governments and will provide your representatives a reasonable amount of time to respond to this notification. If you have any questions or comments about the proposed policy changes, please use the online comment system found on the [Policy Change Blog](#) and/or the [Native American Consultation Page](#).

Sincerely,

Dana Miller
Director, Tribal Government Relations

Proposed Rule, State Plan, and Waiver Amendments

Program for All-Inclusive Care for the Elderly (PACE) — The proposed revisions to the PACE policy will update requirements for the Uniform Comprehensive Assessment Tool. These revisions are being made in order to reflect current business practices.

Exclusion of Certain Underpayments from Resources — The proposed revisions will update eligibility policy on countable income and resources, so that it is consistent with federal law. When determining the resources of an individual for eligibility for the Aged, Blind, and Disabled (ABD) program, the unspent portion of any Social Security retroactive payments are excluded for nine months.

Inpatient psychiatric services revisions — The proposed revisions will establish a prior authorization requirement for inpatient psychiatric services for adults. Revisions will also align the time requirement of the first individual treatment by the physician to the requirement of completion of the psychiatric evaluation. Other revisions will involve limited rewriting aimed at clarifying text.

Provider Rate Increase Update — Revisions are needed to increase the current reimbursement rates for all SoonerCare-contracted provider types by three percent (3%) with the following exemptions: services financed through appropriations to other state agencies, Durable Medical Equipment Prosthetics, Orthotics and Supplies (DMEPOS), non-emergency transportation capitated payments, services provided to Insure Oklahoma (IO) members, payments for drug ingredients/physicians supplied drugs, Indian Health Services/Tribal/Urban Clinics (I/T/U), Federally Qualified Health Centers (FQHCs), and Rural Health Centers (RHCs). Additionally, changes will be made to accommodate an increase to the current rates for SoonerCare-contracted long-term care facilities by four percent (4%). The four percent (4%) increase for long-term facilities is calculated only on the portion of the rate funded by state appropriations, resulting in an increase on the total rate of 3.2 percent (3.2%) for regular nursing facilities and 3.5 percent (3.5%) for regular and acute Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs). All rate increases must comply with state and federal law as well as state cost reimbursement methodologies. This is an update to the item presented at the May 16, 2018 Tribal Consultation where a two percent (2%) rate increase for all providers (less the exemptions aforementioned) and a three percent (3%) rate increase for long-term care facilities was proposed. This item will have an expedited tribal consultation period of 14 days.