

Kevin Corbett | Chief Executive Officer

J. Kevin Stitt | Governor

State Plan Amendment Rate Committee (SPARC)
Agenda
June 21, 2022
1:00 PM
OHCA Board Room
4345 N. Lincoln Blvd
Oklahoma City, OK

I. <u>Welcome and Roll Call:</u> Chair, Josh Richards

This meeting will occur at the OHCA building at 4345 N. Lincoln Blvd., Oklahoma City, OK 73105. All Committee members will participate in person.

Committee Members:

- Josh Richards (Chair, OHCA)
- Melody Anthony (OHCA)
- Sandra Puebla (OHCA)
- Debra Montgomery (OHCA)
- Leigh Newby (OSDH)
- Melissa Miller (ODMHSAS)
- Steven Byrom (OKDHS)

Public access via Zoom:

https://okhca.zoom.us/webinar/register/WN p9BM2I4aQN6ILJvCq5gYUg

*Please note: Since the physical address for the OHCA SPARC Meeting has resumed, any live-streaming option provided is provided as a courtesy. Should such live-streaming option fail or have technical issues, the OHCA SPARC Meeting will not be suspended or reconvened because of this failure or technical issue.

- II. <u>Public Comments (2-minute limit):</u> Chair, Josh Richards
- III. Rate issues to be addressed: Presentation, discussion, and vote
 - A. Regular Nursing Facility Rates
 (Presented by Fred Mensah, OHCA)
 - B. AIDS Rate (Presented by **Fred Mensah**, OHCA)







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- C. Regular ICF Rate (Presented by Fred Mensah, OHCA)
- D. Acute ICF Rate (Presented by **Fred Mensah**, OHCA)
- E. Independent Psychologist Rate Increase (Presented by Melissa Miller, ODMHSAS)
- F. Outpatient BH Agency Rate Increase (Presented by Melissia Miller, ODMHSAS)
- G. Residential SUD Rate Increase (Presented by Melissa Miller, ODMHSAS)
- H. ADvantage Waiver & State Plan Personal Care Services (Presented by **Kathleen Kelley**, OHS)
- ADvantage Waiver Assistive Technology Services (Presented by Kathleen Kelley, OHS)
- J. ADvantage Waiver Remote Supports Services (Presented by Mark Lewis, OHS)
- K. DDS Waiver Extended Duty Nursing (Presented by Mark Lewis, OHS)
- L. DDS Waiver Non-Emergency Transportation Rate Increase (Presented by **Mark Lewis,** OHS)
- M. DDS Waiver Appendix K Permanent 25% Rate Increase (Presented by **Mark Lewis,** OHS)
- N. MFP Rate Increase (Presented by **David Ward**, OHCA)
- O. MFW Rate Increase (Presented by **David Ward**, OHCA)
- IV. Adjournment: Chair, Josh Richards

FUTURE SPARC MEETING September 6, 2022 2:00 PM





Helpline: 800-987-7767



REGULAR NURSING FACILITIES RATE INCREASE

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

The change is being made to increase the Quality of Care (QOC) fee for Regular Nursing Facilities per 56 O.S. 2011, Section 2002. This change allows the Oklahoma Health Care Authority (OHCA) to collect additional QOC fees from providers and match them with federal funds which provides rate increases to facilities. Additionally, the change allows OHCA to calculate the annual reallocation of the pool for the "Direct Care" and "Other Cost" components of the rate as per the State Plan. This change also proposes a revision to the Pay-for-Performance (PFP) program by requiring facilities that receive a scope and severity tag deficiency of "I" or greater to forfeit PFP incentive payment for any quarter they are out of compliance.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate methodology for Regular Nursing Facilities calls for the establishment of a prospective rate which consists of four components. The current components are as follows:

- A. Base Rate Component is \$123.22 per patient day.
- B. A Pay for Performance (PFP) Component defined as the dollars earned under this incentive payment program with an average payment of \$5.00 per patient day.
- C. An "Other Cost" Component which is defined as the per day amount derived from dividing 30% of the pool of funds available after meeting the needs of the Base and PFP Components by the total estimated Medicaid days for the rate period. This component once calculated is the same for each facility.
- D. A "Direct Care "Component which is defined as the per day amount derived from allocating 70% of the pool of funds available after meeting the needs of the Base and PFP Components to the facilities. This component is determined separately and is different for each facility. The method (as approved in the State Plan) allocates the 70%



pool of funds to each facility (on a per day basis) based on their relative expenditures for direct care costs.

The current combined pool amount for "Direct Care" and "Other Cost" components is \$251,196,155. The current Quality of Care (QOC) fee is \$15.31 per patient day.

5. NEW METHODOLOGY OR RATE STRUCTURE.

There is no change in methodology; however, there is a rate change for Regular Nursing Facilities because of the required annual recalculation of the Quality of Care (QOC) fee and reallocation of the pool for "Direct Care" and "Other Cost" components of the rate as per the State Plan. This change will also revise the Pay-for-Performance (PFP) program by requiring facilities that receive a scope and severity tag deficiency of "I" or greater to forfeit PFP incentive payment for any quarter they are out of compliance. The new Base Rate Component will be \$123.47 per patient day. The new combined pool amount for "Direct Care" and "Other Cost" components will be \$242,806,077. The new Quality of Care (QOC) fee will be \$15.56 per patient day.

6. BUDGET ESTIMATE.

The estimated budget impact for SFY2023 will be an increase in the total amount of \$4,131,457; with \$1,338,592 in state share coming from the increased QOC Fee (which is paid by providers).

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The Oklahoma Health Care Authority does not anticipate any negative impact on access to care.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

The Oklahoma Health Care Authority requests the State Plan Amendment Rate Committee to approve the following for Regular Nursing Facilities:

- An increase to the base rate component from \$123.22 per patient day to \$123.47 per patient day.
- A change to the combined pool amount for "Direct Care" and "Other Cost" Components from \$251,196,155 to \$242,806,077 for the annual reallocation of the Direct Care Cost Component as per the State Plan

9. EFFECTIVE DATE OF CHANGE.

July 1, 2022, pending CMS approval.



ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS) NURSING FACILITES RATE INCREASE

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

The change is being made to increase the Quality of Care (QOC) fee for nursing facilities serving residents with AIDS per 56 O.S. 2011, Section 2002. This change allows the Oklahoma Health Care Authority (OHCA) to collect additional QOC fees from providers and match them with federal funds which provides rate increases to the facilities. This change also proposes a revision to the Pay-for-Performance (PFP) program by requiring facilities that receive a scope and severity tag deficiency of "I" or greater to forfeit PFP incentive payment for any quarter they are out of compliance.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate methodology for nursing facilities serving residents with AIDS requires the establishment of a prospective rate which is based on the reported allowable cost per day. The current rate for this provider type is \$225.94 per patient day. The Quality of Care (QOC) fee is \$15.31 per patient day.

5. NEW METHODOLOGY OR RATE STRUCTURE.

There is no change in methodology; however, there is a rate change for nursing facilities serving residents with AIDS because of the required annual recalculation of the Quality of Care (QOC) fee. This change will also revise the Pay-for-Performance (PFP) program by requiring facilities that receive a scope and severity tag deficiency of "I" or greater to forfeit PFP incentive payment for any quarter they are out of compliance. The rate for this provider type will be \$226.97 per patient day. The recalculated Quality of Care (QOC) fee will be \$15.56 per patient day.



6. BUDGET ESTIMATE.

The estimated budget impact for SFY2023 will be an increase in the total amount of \$8,399; with \$2,721 in state share coming from the increased QOC Fee (which is paid by the facilities).

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The Oklahoma Health Care Authority does not anticipate any negative impact on access to care.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

The Oklahoma Health Care Authority requests the State Plan Amendment Rate Committee to approve the following for nursing facilities serving residents with AIDS:

• An increase to the AIDS rate from \$225.94 per patient day to \$226.97 per patient day.

9. EFFECTIVE DATE OF CHANGE.

July 1, 2022, pending CMS approval.



REGULAR INTERMEDIATE CARE FACILITIES FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES (ICF/IID) RATE INCREASE

1. IS THIS A RATE CHANGE OR A METHOD CHANGE?

Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT?

Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

The change is being made to increase the Quality of Care (QOC) Fee for Regular ICF/IID Facilities per 56 O.S. 2011, Section 2002. This change allows the Oklahoma Health Care Authority (OHCA) to collect additional QOC fees from providers and match them with federal funds which provides rate increases to facilities.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate methodology for Regular ICF/IID facilities requires the establishment of a prospective rate which is based on the reported allowable cost per day.

The current rate for this provider type is \$ \$131.09 per patient day.

The Quality of Care (QOC) fee is \$7.89 per patient day.

5. NEW METHODOLOGY OR RATE STRUCTURE.

There is no change in methodology; however, there is a rate change for Regular ICF/IID facilities because of the annual recalculation of the Quality of Care (QOC) fee.

The proposed rate for this provider type is \$ \$135.61 per patient day.

The recalculated Quality of Care (QOC) fee is \$9.38 per patient day.

6. BUDGET ESTIMATE.

The estimated budget impact for SFY2023 will be an increase in the total amount of \$835,799; with \$270,799 in state share coming from the increased QOC Fee (which is paid by providers).

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The Oklahoma Health Care Authority does not anticipate any negative impact on access to care.



8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

The Oklahoma Health Care Authority requests the State Plan Amendment Rate Committee to approve the following for Regular ICF/IID facilities:

• An increase in rate from \$131.09 per patient day to \$135.61 per patient day.

9. EFFECTIVE DATE OF CHANGE.

July 1, 2022, pending CMS approval.



ACUTE (16 BED-OR-LESS) INTERMEDIATE CARE FACILITIES FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES (ICF/IID) RATE INCREASE

1. IS THIS A RATE CHANGE OR A METHOD CHANGE?

Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT?

Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

The change is being made to increase the Quality of Care (QOC) Fee for Acute ICF/IID Facilities per 56 O.S. 2011, Section 2002. This change allows the Oklahoma Health Care Authority (OHCA) to collect additional QOC fees from providers and match them with federal funds which provides rate increases to facilities.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate methodology for Acute ICF/IID facilities requires the establishment of a prospective rate which is based on the reported allowable cost per day.

The current rate for this provider type is \$165.80 per patient day.

The Quality of Care (QOC) fee is \$9.79 per patient day.

5. NEW METHODOLOGY OR RATE STRUCTURE.

There is no change in methodology; however, there is a rate change for Acute ICF/IID facilities because of the annual recalculation of the Quality of Care (QOC) fee.

The proposed rate for this provider type is \$166.61 per patient day.

The recalculated Quality of Care (QOC) fee is \$10.05 per patient.

6. BUDGET ESTIMATE.

The estimated budget impact for SFY2023 will be an increase in the total amount of \$254,810; with \$82,558 \$in state share coming from the increased QOC Fee (which is paid by providers).



7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The Oklahoma Health Care Authority does not anticipate any negative impact on access to care.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

The Oklahoma Health Care Authority requests the State Plan Amendment Rate Committee to approve the following for Acute ICF/IID facilities:

• An increase in rate from \$165.80 per patient day to \$166.61 per patient day.

9. EFFECTIVE DATE OF CHANGE.

July 1, 2022, pending CMS approval.



RATE INCREASES FOR INDEPENDENT PSYCHOLOGIST SERVICES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

ODMHSAS seeks to implement rate increases for select independent psychologist services that currently fall below 80% of 2021 Medicare rates. ODMHSAS recommends increasing the current reimbursement rates that fall below 80% of the CY 2021 Medicare Physician Fee Schedule to equal 80% of the CY 2021 Medicare Physician Fee Schedule rates.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

Current rates for these services are:

Service	Rate	Unit
Assessment	\$127.61	Event
Family Psychotherapy with Patient Present	\$77.33	Session
Family Psychotherapy without Patient Present	\$64.47	Session
Psychotherapy, 30 minutes	\$53.36	30 min
Psychotherapy, 45 minutes	\$69.95	45 min
Psychotherapy, 60 minutes	\$102.67	60 min
Interactive Complexity Add-On	\$4.11	Event
Interpretation of results of evaluations	\$73.26	Event

5. NEW METHODOLOGY OR RATE STRUCTURE.

Proposed rates for these services are:

Service	Rate	Unit
Assessment	\$139.76	Event
Family Psychotherapy with Patient Present	\$80.36	Session
Family Psychotherapy without Patient Present	\$77.57	Session
Psychotherapy, 30 minutes	\$60.35	30 min
Psychotherapy, 45 minutes	\$79.98	45 min
Psychotherapy, 60 minutes	\$118.10	60 min
Interactive Complexity Add-On	\$11.64	Event
Interpretation of results of evaluations	\$93.29	Event



6. BUDGET ESTIMATE.

The estimated budget impact for SFY23 is \$634,402 total/\$190,574 state share. ODMHSAS attests that it has adequate funds to cover the state share of the projected cost of services per fiscal year.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The ODMHSAS has determined that this change will have a positive impact in that the rate increases support the independent psychologist provider network.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

The ODMHSAS requests the SPARC to approve the proposed rate increases for select independent psychologist services.

9. EFFECTIVE DATE OF CHANGE.

July 1, 2022, contingent upon CMS approval



RATE INCREASES FOR OUTPATIENT BEHAVIORAL HEALTH AGENCIES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

ODMHSAS seeks to implement rate increases for select services that are currently reimbursed less through SoonerCare than through ODMHSAS state funds. Other select services are increased due to lack of lack increases in recent years.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

Current rates for these services are:

Service	Rate	Unit
Individual Psychotherapy	\$17.70 (LBHP)/\$15.92 (Cand.)	15 min
Family Psychotherapy	\$17.70 (LBHP)/\$15.92 (Cand.)	15 min
Individual Assertive Community Treatment	\$32.11	15 min
(ACT)		
Individual Community Recovery	\$9.75	15 min
Support/Recovery Support Specialist		
Group Community Recovery	\$1.45	15 min
Support/Recovery Support Specialist		
Group Psychosocial Rehabilitation/PSR	\$4.08 adults/\$3.89 children	15 min
Model (DMH providers)		
Group Psychosocial Rehabilitation-Illness	\$3.89	15 min
Management and Recovery (DMH providers)		
Group Psychosocial Rehabilitation (private	\$2.72 adults/\$3.89 children	15 min
providers)		
Screening and Referral*	\$25.32	Event

^{*}Currently there is no established rate for complex screenings and ODMHSAS seeks to implement an enhanced rate for complex screening and referral services.



5. NEW METHODOLOGY OR RATE STRUCTURE.

Proposed rates for these services are:

Service	Rate	Unit
Individual Psychotherapy	\$19.03 (LBHP)/\$17.13 (Cand.)	15 min
Family Psychotherapy	\$19.03 (LBHP)/\$17.13 (Cand.)	15 min
Individual Assertive Community Treatment	\$38.53	15 min
(ACT)		
Individual Community Recovery	\$11.70	15 min
Support/Recovery Support Specialist		
Group Community Recovery	\$2.90	15 min
Support/Recovery Support Specialist		
Group Psychosocial Rehabilitation/PSR	\$5.71 adults/\$5.45 children	15 min
Model (DMH providers)		
Group Psychosocial Rehabilitation-Illness	\$5.45	15 min
Management and Recovery (DMH providers)		
Group Psychosocial Rehabilitation (private	\$3.81 adults/\$5.45 children	15 min
providers)		
Screening and Referral, Complex*	\$75.00	Event

^{*}Currently there is no established rate for complex screenings and ODMHSAS seeks to implement an enhanced rate for complex screening and referral services.

Increase amounts were developed through several means: 1) matching or nearly matching the rate paid for ODMHSAS funded services; 2) increasing rates by 20% to account for increased costs since the last rate update; or 3) increasing group services based on provider feedback on costs to provide services.

For complex screening and referral, the current rate of \$25 (rounded to the nearest dollar) was multiple by three based on the estimated time required to complete a complex screening versus a non-complex screening.

6. BUDGET ESTIMATE.

The estimated budget impact for SFY23 is \$12,335,499 total/\$3,862,017 state share. ODMHSAS attests that it has adequate funds to cover the state share of the projected cost of services per fiscal year.



7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The ODMHSAS has determined that this change will have a positive impact in that the rate increases support the outpatient behavioral health provider network.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

The ODMHSAS requests the SPARC to approve the proposed rate increases for select outpatient behavioral health agency services.

9. EFFECTIVE DATE OF CHANGE.

July 1, 2022, contingent upon CMS approval



RATE INCREASES FOR RESIDENTIAL LEVEL OF CARE SUBSTANCE USE DISORDER SERVICES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

ODMHSAS seeks to implement rate increases for residential level of care services for substance use disorder. Proposed rates are based on analysis of other states' rates for similar services and align with proposed rates for these services when reimbursed through ODMHSAS state funds.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

Current rates for these services are:

Service	Rate	Unit
Halfway House Services, Adults	\$46	Day
Halfway House Services, Adolescents	\$63	Day
Residential Treatment, Adults	\$85	Day
Residential Treatment, Adolescents	\$135	Day
Residential Treatment, Co-Occurring	\$100	Day
Intensive Residential Treatment, Adults	\$160	Day
Intensive Residential Treatment, Adolescents	\$160	Day
Medically Supervised Withdrawal Management, Adults	\$200	Day
Medically Supervised Withdrawal Management, Adolescents	\$200	Day

5. NEW METHODOLOGY OR RATE STRUCTURE.

Proposed rates for these services are:

Service	Rate	Unit
Halfway House Services, Adults	\$75	Day
Halfway House Services, Adolescents	\$75	Day
Residential Treatment, Adults	\$140	Day
Residential Treatment, Adolescents	\$160	Day
Residential Treatment, Co-Occurring	\$160	Day
Intensive Residential Treatment, Adults	\$180	Day
Intensive Residential Treatment, Adolescents	\$180	Day



Medically Supervised Withdrawal Management, Adults	\$300	Day
Medically Supervised Withdrawal Management, Adolescents	\$300	Day

Proposed rates are based on analysis of other states' rates for similar services and align with proposed rates for these services when reimbursed through ODMHSAS state funds.

6. BUDGET ESTIMATE.

The estimated budget impact for SFY23 is \$2,910,114 total/\$291,039 state share. ODMHSAS attests that it has adequate funds to cover the state share of the projected cost of services per fiscal year.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The ODMHSAS has determined that this change will have a positive impact in that the rate increases support the residential level of care substance use disorder provider network.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

The ODMHSAS requests the SPARC to approve the proposed rate increases for residential level of care substance use disorder services.

9. EFFECTIVE DATE OF CHANGE.

July 1, 2022, contingent upon CMS approval



ADVANTAGE WAIVER & STATE PLAN PERSONAL CARE SERVICES RATE INCREASES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

Oklahoma Human Services is seeking to implement a provider rate increase pursuant to 1915(c) Home and Community-Based Services Waiver Instructions and Technical Guidance.

The Oklahoma Legislature appropriated and specifically funded a 25% rate increase for providers contracted with Oklahoma Human Services (OHS) to support those organizations providing services to Oklahoma's seniors and physically disabled adults. These organizations provide direct care and nutrition services in a highly competitive labor market. Without this additional support, staffing shortages could result in adverse health and safety outcomes for the individuals served. OHS is proposing a rate increase of 25% on payments for ADvantage waiver services with a commensurate rate increase for State Plan Personal Care (SPPC) services.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate structure for ADvantage Waiver and SPPC services provided in the proposed rate changes are fixed and uniform rates established through the State Plan Amendment Rate Committee process, with the following waiver requirements:

- Consumer-directed rates for Personal Services Assistance and Advanced Personal Services Assistance are to be within 80% to 95% of the corresponding rates for Personal Care Services and Advanced Supportive/Restorative Services, respectively.
- Assisted Living Services are configured based on a modifier of the SPPC rate equivalent to 11.636, 15.702, and 21.964 for Standard, Intermediate and High tier levels, respectively.
- The proposed rates are consistent with both waiver requirements and the 25% rate increase.

Services and current rates are listed below:



State Plan Services	Code	Unit Type	Current Rate
State Plan Personal Care	T1019	15-min	\$4.21
Personal Care – Individual Provider	T1019	15-min	\$2.21
State Plan Skilled Nursing -			
Assessment/Evaluation	T1001	per visit	\$62.40

ADvantage Waiver Services	Code	Unit Type	Current Rate
Adult Day Health	S5100-U1	15-min	\$2.08
Adult Day Health - Therapy	S5105-TG	Session	\$11.70
Adult Day Health - Personal Care	S5105	Session	\$8.27
Adult Day Health - Laundry	S5105_U1	session	\$7.80
Case Management	T1016	15-min	\$15.29
Case Management - Very Rural	T1016-TN	15-min	\$21.89
Transitional Case Management	T1016-U3	15-min	\$15.29
Transitional Case Management - Very Rural	T1016-TN-U3	15-min	\$21.89
Personal Care	T1019	15-min	\$4.21
Advanced Supportive/Restorative Assistance	T1019-TF	15-min	\$4.52
In-Home Respite	T1005	15-min	\$4.21
Extended In-Home Respite	S9125	per diem	\$175.55
Registered Nurse Skilled Nursing	G0299	15-min	\$15.60
Licensed Practical Nurse Skilled Nursing	G0300	15-min	\$14.56
Extended State Plan Registered Nurse Skilled Nursing	G0299-TF	15-min	\$15.60
Extended State Plan Licensed Practical Nurse Skilled Nursing	G0300-TF	15-min	\$14.56
Nursing Assessment/Evaluation	T1002	15-min	\$15.60
Assisted Living Tier 1 Services	T2031	per diem	\$48.99
Assisted Living Tier 2 Services	T2031-TF	per diem	\$66.11
Assisted living Tier 3 Services	T2031-TG	per diem	\$92.47
Consumer-Directed Personal Assistance Services	S5125	15-min	\$3.56
Consumer-Directed Advanced Personal Services Assistance	S5125-TF	15-min	\$4.27
Consumer-Directed Goods & Services	T2025	15-min	\$1.04
Home Delivered Meals	S5170	per meal	\$5.15
Hospice Care	S9126	per diem	\$123.80



ADvantage Waiver Services	Code	Unit Type	Current Rate
Physical Therapy	G0151	15-min	\$20.80
Occupational Therapy	G0152	15-min	\$20.80

5. NEW METHODOLOGY OR RATE STRUCTURE.

The new rates are based on a 25% increase of existing rates.

State Plan Services	Code	Unit Type	Current Rate	New Rate
State Plan Personal Care	T1019	15-min	\$4.21	\$5.26
Personal Care – Individual Provider	T1019	15-min	\$2.21	\$2.76
State Plan Skilled Nursing -				
Assessment/Evaluation	T1001	per visit	\$62.40	\$78.00

ADvantage Waiver Services	Code	Unit Type	Current Rate	New Rate
Adult Day Health	S5100-U1	15-min	\$2.08	\$2.60
Adult Day Health - Therapy	S5105-TG	session	\$11.70	\$14.63
Adult Day Health - Personal Care	S5105	session	\$8.27	\$10.34
Adult Day Health - Laundry	S5105_U1	session	\$7.80	\$9.75
Case Management	T1016	15-min	\$15.29	\$19.11
Case Management - Very Rural	T1016-TN	15-min	\$21.89	\$27.36
Transitional Case Management	T1016-U3	15-min	\$15.29	\$19.11
Transitional Case Management - Very Rural	T1016-TN-U3	15-min	\$21.89	\$27.36
Personal Care	T1019	15-min	\$4.21	\$5.26
Advanced Supportive/Restorative Assistance	T1019-TF	15-min	\$4.52	\$5.65
In-Home Respite	T1005	15-min	\$4.21	\$5.26
Extended In-Home Respite	S9125	per diem	\$175.55	\$219.44
Registered Nurse Skilled Nursing	G0299	15-min	\$15.60	\$19.50
Licensed Practical Nurse Skilled Nursing	G0300	15-min	\$14.56	\$18.20
Extended State Plan Registered Nurse Skilled Nursing	G0299-TF	15-min	\$15.60	\$19.50
Extended State Plan Licensed Practical Nurse Skilled Nursing	G0300-TF	15-min	\$14.56	\$18.20
Nursing Assessment/Evaluation	T1002	15-min	\$15.60	\$19.50
Assisted Living Tier 1 Services	T2031	per diem	\$48.99	\$61.24
Assisted Living Tier 2 Services	T2031-TF	per diem	\$66.11	\$82.64



AD <i>vantage</i> Waiver Services	Code	Unit Type	Current Rate	New Rate
Assisted living Tier 3 Services	T2031-TG	per diem	\$92.47	\$115.59
Consumer-Directed Personal Assistance Services	S5125	15-min	\$3.56	\$4.45
Consumer-Directed Advanced Personal Services Assistance	S5125-TF	15-min	\$4.27	\$5.34
Consumer-Directed Goods & Services	T2025	15-min	\$1.04	\$1.30
Home Delivered Meals	S5170	per meal	\$5.15	\$6.44
Hospice Care	S9126	per diem	\$123.80	\$154.75
Physical Therapy	G0151	15-min	\$20.80	\$26.00
Occupational Therapy	G0152	15-min	\$20.80	\$26.00

6. BUDGET ESTIMATE.

In state fiscal year SFY2023, the total increase will be \$32,126,729 with a state share of \$8,214,805. In SFY2024, the total increase will be \$43,668,907 with a state share of \$14,148,726.

OHS attests it has adequate funding to pay the state share of the projected cost of services.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The rate increase will have a positive impact on access to care as providers are able to meet increased labor costs.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

Oklahoma Human Services requests the State Plan Amendment Rate Committee approve the proposed 25% rate increases.

9. EFFECTIVE DATE OF CHANGE.

October 1, 2022, contingent upon CMS approval.



ADVANTAGE WAIVER – ASSISTIVE TECHNOLOGY SERVICES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Method Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

The Community Living, Aging and Protective Services (CAP) division of Oklahoma Human Services is seeking to add Assistive Technology services to the ADvantage waiver.

Assistive Technology services include devices, controls and appliances specified in the member's person-centered service plan which enables them to increase their abilities to perform activities of daily living or to perceive, control or communicate with the environment in which they live. Devices may include communication technology that allows members to communicate with their providers via video or audio chat to ensure ongoing maintenance of health and welfare.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

Assistive Technology services are a new service category for the ADvantage waiver. There is no current methodology for the ADvantage waiver program.

5. NEW METHODOLOGY OR RATE STRUCTURE.

The proposed rate structure for Assistive Technology services is consistent with existing Medicaid rules. Only adaptive devices that are not covered under the existing state plan or waiver Environmental Accessibility Modifications or Specialized Medical Equipment services are included in this service definition. Service codes and rates will vary based on the nature of the Assistive Technology device.

6. BUDGET ESTIMATE.

In state fiscal year SFY2023, the total increase will be \$3,750,000 with a state share of \$958,875. In SFY 2024, the total increase will be \$6,250,000, with a state share of \$2,025,000.

OHS attests it has adequate funding to pay the state share of the projected cost of services.



7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The addition of Assistive Technology services will not have a negative impact on access to care.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

Oklahoma Human Services requests the State Plan Amendment Rate Committee approve the request for the addition of Assistive Technology services to the ADvantage waiver.

9. EFFECTIVE DATE OF CHANGE.

October 1, 2022, contingent upon CMS approval.



ADVANTAGE WAIVER - REMOTE SUPPORTS SERVICES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Method Change

IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

The Community Living, Aging and Protective Services (CAP) division of Oklahoma Human Services is seeking to add two new services related to Remote Supports to the ADvantage waiver. Remote Supports involves monitoring of a waiver member by remote staff using audio or video equipment, allowing for live, two-way communication with the member in their residence. Remote Supports is not a system to provide surveillance and HIPAA privacy and security rules apply to all covered service providers. Remote Supports allow for a member to choose the method of service delivery which best suits their needs. This service is less intrusive than requiring the physical presence of another person to meet the needs of the member. Remote supports will promote and enhance the independence and self-reliance of the member and decrease reliance on in-person paid staff.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

These are new services for the ADvantage waiver. There is no current methodology for the ADvantage waiver program.

5. NEW METHODOLOGY OR RATE STRUCTURE.

The proposed rate structure for Remote Supports services are the fixed and uniform rates established through the State Plan Amendment Rate Committee process for use in the Developmental Disabilities Services waivers.

Service	Service Code	Unit Type	New Rate
Remote Support services with paid emergency response staff	T2025-TF	15-min	\$2.62
Remote Support services with unpaid emergency response staff	T2025-TF-U4	15-min	\$1.75



6. BUDGET ESTIMATE.

In state fiscal year SFY2023, the total increase will be \$13,634,400 with a state share of \$3,486,316. In SFY2024, the total increase will be \$22,724,000 with a state share of \$7,362,576.

OHS attests it has adequate funding to pay the state share of the projected cost of services.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

Remote Supports services encourage independence, the promotion of member rights, the dignity of risk, and a member-centered level of health and safety oversight while decreasing reliance on in-person staffing. The addition of the services will not have a negative impact on access to care.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

Oklahoma Human Services requests the State Plan Amendment Rate Committee approve the request for implementation of Remote Supports services for the ADvantage waiver.

9. EFFECTIVE DATE OF CHANGE.

October 1, 2022, contingent upon CMS approval.



DEVELOPMENTAL DISABILITIES SERVICES INCREASES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE?

Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT?

Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

This proposal increases the rate for Extended Duty Nursing. The rate increase is needed to maintain an adequate pool of providers to provide services to waiver members requiring skilled nursing services. The service is available to adult members in the Homeward Bound Waiver and the Community Waiver.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate structure for extended duty nursing is a fixed and uniform rate established through the SPARC process. The current services, service codes and rates are as follows:

Extended Duty Nursing

T1000

\$6.76 per 15-minute unit

5. NEW METHODOLOGY OR RATE STRUCTURE.

The table below indicates the services and per service rate increase proposed:

Extended Duty Nursing T1000 \$10.00 per 15-minute unit

6. BUDGET ESTIMATE.

In SFY2023, the total increase will be \$750,000, with a state share of \$191,775. In SFY2024, the total increase will be \$1,000,000, with a state share of \$324,000.

OHS attests it has adequate funding to pay the state share of the projected cost of services.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

Increasing the Extended Duty Nursing rate will have a positive impact on access to care.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

Oklahoma Human Services requests the proposed rate for the Extended Duty Nursing waiver service be increased as presented.

9. EFFECTIVE DATE OF CHANGE.

October 1, 2022, contingent upon CMS approval.



DEVELOPMENTAL DISABILITIES SERVICES INCREASES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE?

Rate and Method Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT?

Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

This proposal permanently aligns the Non-Emergency Transportation waiver service with the federal mileage reimbursement rate. This service is available to adult members receiving services through the In Home Supports Waiver, the Homeward Bound Waiver and the Community Waiver.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate structure for Non-Emergency Transportation waiver service is a fixed and uniform rate established through the SPARC process. The current services, service codes and rates are as follows:

Non-Emergency Transportation

S0215

\$0.52 per mile

5. NEW METHODOLOGY OR RATE STRUCTURE.

The table below indicates the services and per service rate increase proposed:

Non-Emergency Transportation

S0215

\$0.625 per mile

6. BUDGET ESTIMATE.

In SFY2023, the total increase will be \$550,071, with a state share of \$140,653. In SFY2024, the total increase will be \$740,095, with a state share of \$239,791.

OHS attests it has adequate funding to pay the state share of the projected cost of services.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

Aligning the Non-Emergency Transportation services rate with the federal reimbursement rate will have a positive impact on access to care.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

Oklahoma Human Services requests the proposed rate for Non-Emergency Transportation be permanently linked to the federal mileage reimbursement rate as presented.



9. EFFECTIVE DATE OF CHANGE.

October 1, 2022, contingent upon CMS approval.



DEVELOPMENTAL DISABILITIES SERVICES INCREASES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE?

Rate and Method Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT?

Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

The Oklahoma Legislature appropriated funding to Oklahoma Human Services (OHS) to eliminate the waitlist and fund a 25% rate increase for waiver rates. Vendors compete for staff to provide direct care services in a highly competitive labor market. Without additional support, staffing shortages could result in adverse health and safety outcomes for the individuals served. OHS is proposing a rate increase of 25% on payments for the following services:

- Adult Day
- Agency Companion
- Daily Living Supports
- Extended Duty Nursing
- Group Home
- Habilitation Training Specialist
- Homemaker
- Intensive Personal Supports
- Nursing
- Prevocational
- Respite
- Specialized Foster Care
- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Supported Employment
- Psychological Services



Services provided by these rates are available to members receiving services from the In Home Supports Waiver for Children, In-Home Supports Waiver for Adults, Homeward Bound Waiver and Community Waiver.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate structure for services provided in the proposed rate changes are fixed and uniform rates established through the SPARC. The services, current service codes and rates are as follows:

Procedure Description	C	code		Service Unit	Current Rate	Prop Rate
				15		
Adult Day Services	S5100			Minutes	2.08	2.60
Agency Companion – Close	S5126	U1		Day	100.36	125.45
Agency Companion - Close Therapeutic Leave	S5126	U1	TV	Day	100.36	125.45
Agency Companion – Enhanced	S5126			Day	130.52	163.15
Agency Companion - Enhanced - Therapeutic Leave	S5126	TV		Day	130.52	163.15
·				,		
Agency Companion – Pervasive	S5126	TF		Day	142.74	178.43
Agency Companion - Pervasive - Therapeutic Leave	S5126	TF	TV	Day	142.74	178.43
Audiological Exam/Treatment (45 minutes)	92507			Each	71.68	89.60
Audiology Comprehensive Recognition	92557			Each	35.59	44.49
Audiology Hearing Aid Evaluation	92591			Each	48.25	60.31
Audiology Reflex Testing	92568			Each	14.48	18.10
Audiology Tympanometry	92567			Each	15.05	18.81



Auditory evoked potentials for evoked						
response audiometry and/or testing of the central nervous sys.	92585			Each	120.14	150.18
Center-Based Pre-Vocational Svc - waiver						
funded	T2015	U1		Hour	5.20	6.50
Center-Based Pre-Vocational Svc - waiver funded – Telehealth	T2015	U1	GT	Hour	5.20	6.50
Center-Based Pre-Vocational Svc & TL - state funded	T2015	U1	SE	Hour	5.20	6.50
Community-Based Pre-Voc Svc - waiver funded	T2015	TF		Hour	10.40	13.00
Community-Based Pre-Voc Svc & TL - state funded	T2015	TF	SE	Hour	10.40	13.00
CONDITIONING PLAY AUDIOMETRY	92582			Each	65.07	81.34
				_	150.15	
Daily Living Supports	T2033			Day	160.16	200.20
Daily Living Supports-Telehealth	T2033	GT		Day	160.16	200.20
DLS - Therapeutic Leave	T2033	TV		Day	160.16	200.20
Employment Specialist	T2019			15 Minutes	6.28	7.85
Employment Specialist – Telehealth	T2019	GT		15 Minutes	6.28	7.85
Enhanced Community-Based Pre-Voc Svc - waiver funded	T2015			Hour	13.85	17.31
Enhanced Community-Based Pre-Voc Svc & TL - state funded	T2015	SE		Hour	13.85	17.31
	T0015			15	4.00	
Enhanced Job Coaching GROUPS of 2-3	T2019	TG	HQ	Minutes	4.32	5.40
Enhanced Job Coaching Service (Groups of 4-5)	T2019	TG		15 Minutes	4.04	5.05
EVALUATION OF AUDITORY					110 7	
REHABILITATION STATUS; EACH ADDITIONAL 15 MINUTES (LIST						
SEPARATELY IN ADDITIO	92627			Each	19.73	24.66



EVALUATION OF AUDITORY						
REHABILITATION STATUS; FIRST HOUR	92626			Each	83.38	104.23
EVOKED OTOACOUSTIC EMISSIONS;						
LIMITED (SINGLE STIMULUS LEVEL,						
EITHER TRANSIENT OR DISTORTION	02507			E a ala	20.67	25.04
PRODUCT Fytonsiya Pasidontial Symposts	92587			Each	20.67	25.84
Extensive Residential Supports	T2022	тс		D .	020.02	1 162 10
Extensive Residential Supports	T2033	TG		Day	929.92	1,162.40
Therapeutic Leave	T2033	TG	TV	Day	929.92	1,162.40
crapeatic zeave	12033	'	• •	Duy	323.32	1,102.10
Family Counseling - Group -				15		
Psychotherapy	90853	U1		Minutes	5.75	7.19
Family Counseling - Group -				15		
Psychotherapy-Telehealth	90853	U1	GT	Minutes	5.75	7.19
Family Counseling - Individual (without				15		
Client)	90846			Minutes	17.24	21.55
Family Counseling - Individual (without				15		
Client)-Telehealth	90846	GT		Minutes	17.24	21.55
Family Counseling - Individual with				15		
Consumer present	90847			Minutes	17.24	21.55
Family Counseling - Individual with				15		
Consumer present-Telehealth	90847	GT		Minutes	17.24	21.55
Group Home 10 Bed	T1020			Day	47.58	59.48
Group Home 11 Bed	T1020			Day	44.46	55.58
Group Home 12 Bed	T1020			Day	41.86	52.33
Group Home 6 Bed	T1020			Day	75.40	94.25
Group Home 7 Bed	T1020			Day	64.48	80.60
Group Home 8 Bed	T1020			Day	56.42	70.53
Group Home 9 Bed	T1020			Day	51.48	64.35
Group Home Alternative Living Home 4						
Bed	T1020			Day	303.68	379.60



					1
Group Home Community Living 10 bed	T1020		Day	125.58	156.98
Group Home Community Living 11 bed	T1020		Day	114.14	142.68
Group Home Community Living 12 bed	T1020		Day	112.84	141.05
Group Home Community Living 6 Bed	T1020		Day	173.42	216.78
Group Home Community Living 7 bed	T1020		Day	148.72	185.90
Group Home Community Living 8 bed	T1020		Day	143.78	179.73
Group Home Community Living 9 bed	T1020		Day	127.66	159.58
Hearing Aid Check; Binaural	92593		Each	43.54	54.43
HEARING AID CHECK; MONAURAL	92592		Each	43.53	54.41
HEARING AID EXAMINATION AND SELECTION; MONAURAL	92590		Each	48.25	60.31
Homemaker	S5130		15 Minutes	4.00	5.00
Homemaker-Respite	S5150		15 Minutes	4.00	5.00
Homemaker-Respite-EVV	S5150	32	15 Minutes	4.00	5.00
Homemaker-State Fund	S5130	SE	15 Minutes	4.00	5.00
HTS - Habilitation Training Specialist	T2017		15 Minutes	4.21	5.26
HTS - Habilitation Training Specialist - EVV	T2017	32	15 Minutes	4.21	5.26
HTS - Habilitation Training Specialist - state funded	T2017	SE	15 Minutes	4.21	5.26
HTS - Habilitation Training Specialist- Telehealth	T2017	GT	15 Minutes	4.21	5.26
HTS - No Supervising Agency - Independent	T2017	U1	15 Minutes	1.90	2.38



Individual Placement in Community- Based, Pre-Vocational	T2015	U4		Hour	16.84	21.05
Individual Placement in Community- Based, Pre-Vocational - Telehealth	T2015	U4	GT	Hour	16.84	21.05
Individual Placement in Community- Based, Pre-Vocational, state funded	T2015	U4	SE	Hour	16.84	21.05
Individual Placement in Job Coaching, Supported Employment	T2019	U4		15 Minutes	6.25	7.81
Individual Placement in Job Coaching, Supported Employment - Telehealth	T2019	U4	GT	15 Minutes	6.25	7.81
Individual Placement in Job Coaching, Supported Employment, state funded	T2019	U4	SE	15 Minutes	6.25	7.81
Intensive Personal Supports	T2017	TF		15 Minutes	4.21	5.26
Intensive Personal Supports - state funded	T2017	TF	SE	15 Minutes	4.21	5.26
Job Coaching (Groups of 4-5)	T2019	TF		15 Minutes	3.47	4.34
Job Coaching GROUPS of 2-3	T2019	HQ		15 Minutes	3.75	4.69
Job Stabilization/Extended Svc	T2019	U1		15 Minutes	1.44	1.80
Job Stabilization/Extended Svc - Telehealth	T2019	U1	GT	15 Minutes	1.44	1.80
Nursing - Intermittent Skilled Care	T1001			Visit	52.52	65.65
Nutrition Therapy, Initial Assessment & Intervention	97802	U5		15 Minutes	34.18	42.73
Nutrition Therapy, Reassessment & Intervention	97803	U5		15 Minutes	29.40	36.75
Nutrition Therapy, Reassessment & Intervention-Telehealth	97803	U5	GT	Each	30.03	37.54
Occupational Therapy	G0152			15 Minutes	20.80	26.00
Occupational Therapy-Telehealth	G0152	GT		15 Minutes	20.80	26.00
Physical Therapy	G0151			15 Minutes	20.80	26.00



				15		
Physical Therapy-Telehealth	G0151	GT		Minutes	20.80	26.00
Pre-Voc HTS - Supplemental Supports & TL - state funded	T2015	TG	SE	Hour	13.10	16.38
Pre-Voc HTS - Supplemental Supports - waiver funded	T2015	TG		Hour	13.10	16.38
Psychological - Cognitive/Behavior Treatment - Group	90853			15 Minutes	10.78	13.48
Psychological - Cognitive/Behavior Treatment - Group - Telehealth	90853	GT		15 Minutes	10.78	13.48
Psychological Services - Therapy	H0004			15 Minutes	21.56	26.95
Psychological Services - Therapy - Telehealth	H0004	GT		15 Minutes	21.56	26.95
PSYCHOTHERAPY, 30 MINUTES WITH PATIENT AND/OR FAMILY MEMBER	90832			30 Minutes	52.00	65.00
PURE TONE AUDIOMETRY (THRESHOLD); AIR AND BONE	92553			Each	34.17	42.71
PURE TONE AUDIOMETRY (THRESHOLD); AIR ONLY	92552			Each	27.92	34.90
Remote Supports With Unpaid Staff	T2017	U4		15 Minutes	1.45	1.81
Remotes Supports With Paid Staff	T2017	U4		15 Minutes	2.62	3.28
Respite - Close -	S5151			Day	40.00	50.00
Respite - Intermittent -	S5151			Day	19.00	23.75
Respite - Maximum	S5151			Day	79.04	98.80
Respite in Agency Companion - Contractor - Close	S5151			Day	123.24	154.05
Respite in Agency Companion - Contractor - Pervasive	S5151			Day	165.62	207.03
Respite in Agency Companion - Contractor- Enhanced	S5151			Day	153.40	191.75
Respite in Agency Companion - Contractor- Enhanced - STATE FUNDED	S5151	SE		Day	153.40	191.75



Respite in Community Living Group Home - 6 bed setting	S5151			Day	196.30	245.38
Respite in Community Living Group Home - 7 bed setting	S5151			Day	171.60	214.50
Respite in Community Living Group Home - 8 bed setting	S5151			Day	166.66	208.33
Respite in Community Living Group Home - 9 bed setting	S5151			Day	150.54	188.18
Respite in Community Living Group Home 10 bed setting	S5151			Day	148.46	185.58
Respite in Community Living Group Home 11 bed setting	S5151			Day	137.02	171.28
Respite in Community Living Group Home 12 bed setting	S5151			Day	135.72	169.65
Respite in Group Home - 10 bed setting	S5151			Day	70.46	88.08
Respite in Group Home - 11 bed setting	S5151			Day	67.34	84.18
Respite in Group Home - 12 bed setting	S5151			Day	64.74	80.93
Respite in Group Home - 6 bed setting	S5151			Day	98.70	123.38
Respite in Group Home - 7 bed setting	S5151			Day	87.36	109.20
Respite in Group Home - 8 bed setting	S5151			Day	79.30	99.13
Respite in Group Home - 9 bed setting	S5151			Day	74.36	92.95
Respite, In Own Home - Close	S9125	TF		Day	28.50	35.63
Respite, In Own Home - Intermittent	S9125	U1		Day	19.00	23.75
Respite, In Own Home - Maximum	S9125			Day	57.04	71.30
Self Directed HTS	T2017	U1	TF	15 Minutes	4.21	5.26
Self-Directed Individual Placement in Job Coaching, Supported Employment	T2019	U4	TF	15 Minutes	6.25	7.81



			15		
Skilled Nursing - Licensed Practical Nurse	G0300		Minutes	14.56	18.20
Skilled Nursing - Licensed Practical Nurse- Telehealth	G0300	GT	15 Minutes	14.56	18.20
Skilled Nursing - Registered Nurse	G0299		15 Minutes	15.60	19.50
Skilled Nursing - Registered Nurse- Telehealth	G0299	GT	15 Minutes	15.60	19.50
Specialized Family Care Adult - Close	S5140	U1	Day	30.00	37.50
Specialized Family Care Adult - Maximum	S5140		Day	56.16	70.20
Specialized Family Care Child - Close	S5145	U1	Day	30.00	37.50
Specialized Family Care Child - Maximum	S5145		Day	56.16	70.20
SPEECH AUDIOMETRY THRESHOLD	92555		Each	21.38	26.73
SPEECH AUDIOMETRY THRESHOLD; WITH SPEECH RECOGNITION	92556		Each	33.87	42.34
Speech/Language Services	G0153		15 Minutes	19.54	24.43
Speech/Language Services-Telehealth	G0153	GT	15 Minutes	19.54	24.43
Transportation - Adapted	A0130		Mile	1.35	1.69
Use of vertical electrodes (list separately in addition to code for primary procedure)	92547		Each	8.63	10.79
Value-Based Incentive Quality Payment	T2025	UK	Each	500.00	625.00
Vehicle Modification Assessment	T2024		Each	20.80	26.00
VISUAL REINFORCEMENT AUDIOMETRY (VRA)	92579		Each	43.42	54.28



5. NEW METHODOLOGY OR RATE STRUCTURE.

The new rates are based on a 25% increase of existing rates.

				Service	Prop	
Procedure Description	С	ode		Unit	Rate	Net Annual Cost
Adult Day Services	S5100			15 Minutes	2.60	\$643,669.22
Agency Companion - Close	S5126	U1		Day	125.45	\$234,064.20
Agency Companion - Close Therapeutic Leave	S5126	U1	TV	Day	125.45	\$2,025.45
Agency Companion - Enhanced	S5126			Day	163.15	\$902,367.33
Agency Companion - Enhanced - Therapeutic Leave	S5126	TV		Day	163.15	\$12,732.59
Agency Companion - Pervasive	S5126	TF		Day	178.43	\$762,522.34
Agency Companion - Pervasive - Therapeutic Leave	S5126	TF	TV	Day	178.43	\$15,600.01
Audiological Exam/Treatment (45 minutes)	92507			Each	89.60	\$0.00
Audiology Comprehensive Recognition	92557			Each	44.49	\$321.09
Audiology Hearing Aid Evaluation	92591			Each	60.31	\$105.27
Audiology Reflex Testing	92568			Each	18.10	\$0.00
Audiology Tympanometry	92567			Each	18.81	\$73.11
Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous sys.	92585			Each	150.18	\$0.00
Center-Based Pre-Vocational Svc - waiver funded	T2015	U1		Hour	6.50	\$597,440.87
Center-Based Pre-Vocational Svc - waiver funded - Telehealth	T2015	U1	GT	Hour	6.50	\$0.00
Center-Based Pre-Vocational Svc & TL - state funded	T2015	U1	SE	Hour	6.50	\$0.00



Community-Based Pre-Voc Svc - waiver funded	T2015	TF		Hour	13.00	\$299,098.16
Community-Based Pre-Voc Svc & TL - state funded	T2015	TF	SE	Hour	13.00	\$0.00
Tunded	12013	11	JL	Hour	13.00	\$0.00
CONDITIONING PLAY AUDIOMETRY	92582			Each	81.34	\$0.00
Daily Living Supports	T2033			Day	200.20	\$30,512,716.01
Daily Living Supports-Telehealth	T2033	GT		Day	200.20	\$298,263.79
DLS - Therapeutic Leave	T2033	TV		Day	200.20	\$1,965.60
Employment Specialist	T2019			15 Minutes	7.85	\$389,604.44
Employment Specialist - Telehealth	T2019	GT		15 Minutes	7.85	\$0.00
Enhanced Community-Based Pre-Voc Svc - waiver funded	T2015			Hour	17.31	\$292,896.26
Enhanced Community-Based Pre-Voc Svc & TL - state funded	T2015	SE		Hour	17.31	\$0.00
Enhanced Job Coaching GROUPS of 2-3	T2019	TG	HQ	15 Minutes	5.40	\$189,752.88
Enhanced Job Coaching Service (Groups of 4-5)	T2019	TG		15 Minutes	5.05	\$161,166.75
EVALUATION OF AUDITORY REHABILITATION STATUS; EACH ADDITIONAL 15 MINUTES (LIST	12020				5.00	¥ 202,2000
SEPARATELY IN ADDITIO	92627			Each	24.66	\$0.00
EVALUATION OF AUDITORY REHABILITATION STATUS; FIRST HOUR	92626			Each	104.23	\$0.00
EVOKED OTOACOUSTIC EMISSIONS; LIMITED (SINGLE STIMULUS LEVEL, EITHER TRANSIENT OR DISTORTION PRODUCT	92587			Each	25.84	\$0.00
Extensive Residential Supports	T2033	TG		Day	1,162.40	\$867,035
Extensive Residential Supports Therapeutic Leave	T2033	TG	TV	Day	1,162.40	\$250,000
Family Counseling - Group - Psychotherapy	90853	U1		15 Minutes	7.19	\$134.86



Family Counseling - Group - Psychotherapy-Telehealth	90853	U1	GT	15 Minutes	7.19	\$0.00
Family Counseling - Individual (without Client)	90846			15 Minutes	21.55	\$9,955.84
Family Counseling - Individual (without Client)-Telehealth	90846	GT		15 Minutes	21.55	\$860.43
Family Counseling - Individual with Consumer present	90847			15 Minutes	21.55	\$30,621.93
Family Counseling - Individual with Consumer present-Telehealth	90847	GT		15 Minutes	21.55	\$5,500.58
Group Home 10 Bed	T1020			Day	59.48	\$7,190,001.97
Group Home 11 Bed	T1020			Day	55.58	\$0.00
Group Home 12 Bed	T1020			Day	52.33	\$0.00
Group Home 6 Bed	T1020			Day	94.25	\$0.00
Group Home 7 Bed	T1020			Day	80.60	\$0.00
Group Home 8 Bed	T1020			Day	70.53	\$0.00
Group Home 9 Bed	T1020			Day	64.35	\$0.00
Group Home Alternative Living Home 4 Bed	T1020			Day	379.60	\$0.00
Group Home Community Living 10 bed	T1020			Day	156.98	\$0.00
Group Home Community Living 11 bed	T1020			Day	142.68	\$0.00
Group Home Community Living 12 bed	T1020			Day	141.05	\$0.00
Group Home Community Living 6 Bed	T1020			Day	216.78	\$0.00
Group Home Community Living 7 bed	T1020			Day	185.90	\$0.00
Group Home Community Living 8 bed	T1020			Day	179.73	\$0.00



Group Home Community Living 9 bed	T1020			Day	159.58	\$0.00
Hearing Aid Check; Binaural	92593			Each	54.43	\$688.72
HEARING AID CHECK; MONAURAL	92592			Each	54.41	\$71.23
HEARING AID EXAMINATION AND SELECTION; MONAURAL	92590			Each	60.31	\$0.00
Homemaker	S5130			15 Minutes	5.00	\$138,550.89
Homemaker-Respite	S5150			15 Minutes	5.00	\$269,421.27
Homemaker-Respite-EVV	S5150	32		15 Minutes	5.00	\$18,735.27
Homemaker-State Fund	S5130	SE		15 Minutes	5.00	\$0.00
HTS - Habilitation Training Specialist	T2017			15 Minutes	5.26	\$23,394,431.99
HTS - Habilitation Training Specialist - EVV	T2017	32		15 Minutes	5.26	\$4,318,199.74
HTS - Habilitation Training Specialist - state funded	T2017	SE		15 Minutes	5.26	\$0.00
HTS - Habilitation Training Specialist- Telehealth	T2017	GT		15 Minutes	5.26	\$0.00
HTS - No Supervising Agency - Independent	T2017	U1		15 Minutes	2.38	\$0.00
Individual Placement in Community-Based, Pre-Vocational	T2015	U4		Hour	21.05	\$445,950.90
Individual Placement in Community-Based, Pre-Vocational - Telehealth	T2015	U4	GT	Hour	21.05	\$0.00
Individual Placement in Community-Based, Pre-Vocational, state funded	T2015	U4	SE	Hour	21.05	\$0.00
Individual Placement in Job Coaching, Supported Employment	T2019	U4		15 Minutes	7.81	\$493,561.84
Individual Placement in Job Coaching, Supported Employment - Telehealth	T2019	U4	GT	15 Minutes	7.81	\$117,091.22
Individual Placement in Job Coaching, Supported Employment, state funded	T2019	U4	SE	15 Minutes	7.81	\$0.00



				15		
Intensive Personal Supports	T2017	TF		Minutes	5.26	\$4,240,817.38
				15		40.00
Intensive Personal Supports - state funded	T2017	TF	SE	Minutes	5.26	\$0.00
Job Coaching (Groups of 4-5)	T2019	TF		15 Minutes	4.34	\$2,334,788.09
Job Coaching GROUPS of 2-3	T2019	HQ		15 Minutes	4.69	\$579,499.00
Job Stabilization/Extended Svc	T2019	U1		15 Minutes	1.80	\$55,284.04
Job Stabilization/Extended Svc - Telehealth	T2019	U1	GT	15 Minutes	1.80	\$0.00
Nursing - Intermittent Skilled Care	T1001			Visit	65.65	\$220,864.51
Nutrition Therapy, Initial Assessment & Intervention	97802	U5		15 Minutes	42.73	\$0.00
Nutrition Therapy, Reassessment & Intervention	97803	U5		15 Minutes	36.75	\$550,204.70
Nutrition Therapy, Reassessment &						,
Intervention-Telehealth	97803	U5	GT	Each	37.54	\$2,591.02
Occupational Therapy	G0152			15 Minutes	26.00	\$213,653.36
Occupational Therapy-Telehealth	G0152	GT		15 Minutes	26.00	\$442.47
Physical Therapy	G0151			15 Minutes	26.00	\$357,692.51
				15		
Physical Therapy-Telehealth	G0151	GT		Minutes	26.00	\$24,156.33
Pre-Voc HTS - Supplemental Supports & TL - state funded	T2015	TG	SE	Hour	16.38	\$0.00
Pre-Voc HTS - Supplemental Supports - waiver funded	T2015	TG		Hour	16.38	\$535,862.43
Psychological - Cognitive/Behavior Treatment - Group	90853			15 Minutes	13.48	\$0.00
Psychological - Cognitive/Behavior Treatment - Group - Telehealth	90853	GT		15 Minutes	13.48	\$0.00
Psychological Services - Therapy	H0004			15 Minutes	26.95	\$600,903.17



Psychological Services - Therapy - Telehealth	H0004	GT	15 Minutes	26.95	\$7,961.47
PSYCHOTHERAPY, 30 MINUTES WITH PATIENT AND/OR FAMILY MEMBER	90832		30 Minutes	65.00	\$0.00
PURE TONE AUDIOMETRY (THRESHOLD); AIR AND BONE	92553		Each	42.71	\$0.00
PURE TONE AUDIOMETRY (THRESHOLD); AIR ONLY	92552		Each	34.90	\$0.00
Remote Supports With Unpaid Staff	T2017	U4	15 Minutes	1.81	\$0.00
Remotes Supports With Paid Staff	T2017	U4	15 Minutes	3.28	\$0.00
Respite - Close -	S5151		Day	50.00	\$12,111.86
Respite - Intermittent -	S5151		Day	23.75	\$0.00
Respite - Maximum	S5151		Day	98.80	\$0.00
Respite in Agency Companion - Contractor - Close	S5151		Day	154.05	\$0.00
Respite in Agency Companion - Contractor - Pervasive	S5151		Day	207.03	\$0.00
Respite in Agency Companion - Contractor- Enhanced	S5151		Day	191.75	\$0.00
Respite in Agency Companion - Contractor- Enhanced - STATE FUNDED	S5151	SE	Day	191.75	\$0.00
Respite in Community Living Group Home - 6 bed setting	S5151		Day	245.38	\$0.00
Respite in Community Living Group Home - 7 bed setting	S5151		Day	214.50	\$0.00
Respite in Community Living Group Home - 8 bed setting	S5151		Day	208.33	\$0.00
Respite in Community Living Group Home - 9 bed setting	S5151		Day	188.18	\$0.00
Respite in Community Living Group Home 10 bed setting	S5151		Day	185.58	\$0.00
Respite in Community Living Group Home 11 bed setting	S5151		Day	171.28	\$0.00



Respite in Community Living Group Home						40.00
12 bed setting	S5151			Day	169.65	\$0.00
Respite in Group Home - 10 bed setting	S5151			Day	88.08	\$0.00
Respite in Group Home - 11 bed setting	S5151			Day	84.18	\$0.00
Respite in Group Home - 12 bed setting	S5151			Day	80.93	\$0.00
Respite in Group Home - 6 bed setting	S5151			Day	123.38	\$0.00
Respite in Group Home - 7 bed setting	S5151			Day	109.20	\$0.00
Respite in Group Home - 8 bed setting	S5151			Day	99.13	\$0.00
Respite in Group Home - 9 bed setting	S5151			Day	92.95	\$0.00
Respite, In Own Home - Close	S9125	TF		Day	35.63	\$0.00
Respite, In Own Home - Intermittent	S9125	U1		Day	23.75	\$0.00
Respite, In Own Home - Maximum	S9125			Day	71.30	\$0.00
Self Directed HTS	T2017	U1	TF	15 Minutes	5.26	\$68,195.78
Self-Directed Individual Placement in Job Coaching, Supported Employment	T2019	U4	TF	15 Minutes	7.81	\$0.00
Skilled Nursing - Licensed Practical Nurse	G0300			15 Minutes	18.20	\$7,397.80
Skilled Nursing - Licensed Practical Nurse- Telehealth	G0300	GT		15 Minutes	18.20	\$0.00
Skilled Nursing - Registered Nurse	G0299			15 Minutes	19.50	\$38,014.25
Skilled Nursing - Registered Nurse- Telehealth	G0299	GT		15 Minutes	19.50	\$0.00
Specialized Family Care Adult - Close	S5140	U1		Day	37.50	\$0.00
Specialized Family Care Adult - Maximum	S5140			Day	70.20	\$519,552.69



Specialized Family Care Child - Close	S5145	U1	Day	37.50	\$0.00
Specialized Family Care Child - Maximum	S5145		Day	70.20	\$160,694.24
SPEECH AUDIOMETRY THRESHOLD	92555		Each	26.73	\$0.00
SPEECH AUDIOMETRY THRESHOLD; WITH					
SPEECH RECOGNITION	92556		Each	42.34	\$0.00
			15		
Speech/Language Services	G0153		Minutes	24.43	\$189,582.22
			15		
Speech/Language Services-Telehealth	G0153	GT	Minutes	24.43	\$21,140.50
Transportation - Adapted	A0130		Mile	1.69	\$287,588.59
Use of vertical electrodes (list separately in					
addition to code for primary procedure)	92547		Each	10.79	\$0.00
Value-Based Incentive Quality Payment	T2025	UK	Each	625.00	\$0.00
Vehicle Modification Assessment	T2024		Each	26.00	\$0.00
VISUAL REINFORCEMENT AUDIOMETRY					
(VRA)	92579		Each	54.28	\$0.00

6. BUDGET ESTIMATE.

In SFY2023, the total increase will be \$62,922,148 with a state share of \$16,089,193. In SFY2024, the total increase will be \$83,896,197, with a state share of \$27,182,368. OHS attests it has adequate funding to pay the state share of the projected cost of services.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The rate increase will have a positive impact on access to care.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

Oklahoma Human Services requests the proposed 25% rate increase be approved as presented.

9. EFFECTIVE DATE OF CHANGE.

October 1, 2022, contingent upon CMS approval.



MONEY FOLLOWS THE PERSON/OKLAHOMA'S LIVING CHOICE RATE INCREASES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

Oklahoma Health Care Authority (OHCA) is seeking to implement a provider rate increase pursuant to 1915(c) Home and Community-Based Services Waiver Instructions and Technical Guidance.

The Oklahoma Legislature appropriated and specifically funded a 25% rate increase for providers contracted with Oklahoma Human Services (OHS) to support those organizations providing services to Oklahoma's seniors and physically disabled adults. The intent moving forward is to standardize provider rates across the 1915(c) Home and Community Based Services and the Money Follows the Person Demonstration. Without this additional support, staffing shortages could result in adverse health and safety outcomes for the individuals served. OHCA is proposing a rate increase of up to 25% on payments for the Money Follows the Person/Oklahoma's Living Choice services.

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate structure for the Money Follows the Person/Oklahoma's Living Choice provided in the proposed rate changes are fixed and uniform rates established through the State Plan Amendment Rate Committee process, with the following waiver requirements:

 Additionally, the proposed rates will be consistent with the 1915(c) HCBS waiver programs operated by OHS.

Services and current rates are listed below:

Living Choice Services	Code	Unit Type	Current Rate
Adult Day Health	S5100	15-min	\$1.97
Adult Day Health – Personal Care	S5105	Session	\$7.88
Adult Day Health – Therapy	S5105	Session	\$10.50



Living Choice Services	Code	Unit Type	Current Rate
Advanced Supportive/Restorative Assistance	T1019-TF	15-min	\$4.57
Assisted Living Tier 1 Services	T2031	per diem	\$49.33
Assisted Living Tier 2 Services	T2031-TF	per diem	\$66.57
Assisted living Tier 3 Services	T2031-TG	per diem	\$93.11
Case Management	T1016	15-min	\$15.41
Case Management - Very Rural	T1016-TN	15-min	\$22.06
Institutional Case Management	T1016-U7	15-min	\$15.41
Institutional Case Management - Very Rural	T1016-U7-TN	15-min	\$22.06
Transition Case Management	T1016-U3	15-min	\$15.41
Transition Case Management - Very Rural	T1016-U3-TN	15-min	\$22.06
Home Delivered Meals	S5170	per meal	\$5.41
Hospice Care	S9126	per diem	\$128.80
In-Home Respite	T1005	15-min	\$4.24
In-Home Extended Respite	S9125	per diem	\$179.40
Personal Care	T1019	15-min	\$4.24
Private Duty Nursing	T1000	15-min	\$8.17
RN Assessment/Evaluation	T1002	15-min	\$14.61
Skilled Nursing – Home Health Setting (LPN)	G0300	15-min	\$14.61
Skilled Nursing – Home Health Setting (RN)	G0299	15-min	\$14.61
Occupational Therapy	G0152	15-min	\$21.63
Physical Therapy	G0151	15-min	\$21.63
Respiratory Therapy	G0237	15-min	\$14.87
Speech/Language Therapy	G0153	15-min	\$21.63
Self-Direction Advanced Supportive/Restorative	S5125-TF	15-min	\$4.57
Self-Direction Extended Respite	S9125-U4	15-min	\$179.40
Self-Direction Respite	T1005-U4	15-min	\$4.24
Self-Direction Personal Care	T1019	15-min	\$4.24

5. NEW METHODOLOGY OR RATE STRUCTURE.

The new rates are based on an average of a 25% increase of existing rates.

Living Choice Services	Code	Unit Type	Current	New
Living Choice Services	Code	Unit Type	Rate	Rate
Adult Day Health	S5100	15-min	\$1.97	\$2.60
Adult Day Health – Personal Care	S5105	Session	\$7.88	\$10.34
Adult Day Health – Therapy	S5105	Session	\$10.50	\$14.63
Advanced Supportive/Restorative Assistance	T1019-TF	15-min	\$4.57	\$5.65



Living Choice Services	Code	Unit Type	Current	New
Living Choice Services	Code		Rate	Rate
Assisted Living Tier 1 Services	T2031	per diem	\$49.33	\$61.24
Assisted Living Tier 2 Services	T2031-TF	per diem	\$66.57	\$82.64
Assisted living Tier 3 Services	T2031-TG	per diem	\$93.11	\$115.59
Case Management	T1016	15-min	\$15.41	\$19.11
Case Management - Very Rural	T1016-TN	15-min	\$22.06	\$27.36
Institutional Case Management	T1016-U7	15-min	\$15.41	\$19.11
Institutional Case Management - Very Rural	T1016-U7-TN	15-min	\$22.06	\$27.36
Transition Case Management	T1016-U3	15-min	\$15.41	\$19.11
Transition Case Management - Very Rural	T1016-U3-TN	15-min	\$22.06	\$27.36
Home Delivered Meals	S5170	per meal	\$5.41	\$6.44
Hospice Care	S9126	per diem	\$128.80	\$154.75
In-Home Respite	T1005	15-min	\$4.24	\$5.26
In-Home Extended Respite	S9125	per diem	\$179.40	\$219.44
Personal Care	T1019	15-min	\$4.24	\$5.26
Private Duty Nursing	T1000	15-min	\$8.17	\$10.00
RN Assessment/Evaluation	T1002	15-min	\$14.61	\$19.50
Skilled Nursing – Home Health Setting (LPN)	G0300	15-min	\$14.61	\$18.20
Skilled Nursing – Home Health Setting (RN)	G0299	15-min	\$14.61	\$19.50
Occupational Therapy	G0152	15-min	\$21.63	\$26.00
Physical Therapy	G0151	15-min	\$21.63	\$26.00
Respiratory Therapy	G0237	15-min	\$14.87	\$18.60
Speech/Language Therapy	G0153	15-min	\$21.63	\$24.43
Self-Direction Advanced Supportive/Restorative	S5125-TF	15-min	\$4.57	\$5.65
Self-Direction Extended Respite	S9125-U4	15-min	\$179.40	\$219.44
Self-Direction Respite	T1005-U4	15-min	\$4.24	\$5.26
Self-Direction Personal Care	T1019	15-min	\$4.24	\$5.26

6. BUDGET ESTIMATE.

In SFY2023, the total increase will be \$361,559 with state share of \$43,929. In SFY 2024, the total increase will be \$482,079 with state share of \$58,573.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The rate increase will have a positive impact on access to care as providers are able to meet increased labor costs.



8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

Oklahoma Health Care Authority requests the State Plan Amendment Rate Committee approve the proposed 25% rate increases.

9. EFFECTIVE DATE OF CHANGE.

October 1, 2022, contingent upon CMS approval.



MEDICALLY FRAGILE WAIVER SERVICES RATE INCREASES

1. IS THIS A RATE CHANGE OR A METHOD CHANGE? Rate Change

2. IS THIS CHANGE AN INCREASE, DECREASE, OR NO IMPACT? Increase

3. PRESENTATION OF ISSUE – WHY IS THIS CHANGE BEING MADE?

Oklahoma Health Care Authority (OHCA) is seeking to implement a provider rate increase pursuant to 1915(c) Home and Community-Based Services Waiver Instructions and Technical Guidance.

The Oklahoma Legislature appropriated and specifically funded a 25% rate increase for providers contracted with Oklahoma Human Services (OHS) to support those organizations providing services to Oklahoma's seniors and physically disabled adults. The intent moving forward is to standardize provider rates across the 1915(c) Home and Community Based Services and the Money Follows the Person Demonstration. Without this additional support, staffing shortages could result in adverse health and safety outcomes for the individuals served. OHCA is proposing a rate increase of up to 25% on payments for the Medically Fragile waiver services

4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.

The current rate structure for the Medically Fragile Waiver provided in the proposed rate changes are fixed and uniform rates established through the State Plan Amendment Rate Committee process, with the following waiver requirements:

• Additionally, the proposed rates will be consistent with the 1915(c) HCBS waiver programs operated by OHS.

Services and current rates are listed below:

Medically Fragile Waiver Services	Code	Unit Type	Current Rate
Advanced Supportive/Restorative Assistance	T1019-TF	15-min	\$4.57
Case Management	T1016	15-min	\$15.41
Case Management - Very Rural	T1016-TN	15-min	\$22.06
Institutional Case Management	T1016-U7	15-min	\$15.41



Medically Fragile Waiver Services	Code	Unit Type	Current Rate
Institutional Case Management - Very Rural	T1016-U7-TN	15-min	\$22.06
Transitional Case Management	T1016-U3	15-min	\$15.41
Transitional Case Management - Very Rural	T1016-U3-TN	15-min	\$22.06
Home Delivered Meals	S5170	per meal	\$5.41
Hospice Care	S9126	per diem	\$128.80
In-Home Respite	T1005	15-min	\$4.24
In-Home Extended Respite	S9125	per diem	\$179.40
Personal Care	T1019	15-min	\$4.24
Private Duty Nursing	T1000	15-min	\$8.17
RN Assessment/Evaluation	T1002	15-min	\$14.61
RN Assessment/Evaluation - Transitional	T1002	15-min	\$14.61
Skilled Nursing – Home Health Setting (LPN)	G0300	15-min	\$14.61
Skilled Nursing – Home Health Setting (RN)	G0299	15-min	\$14.61
Occupational Therapy	G0152	15-min	\$21.63
Physical Therapy	G0151	15-min	\$21.63
Respiratory Therapy	G0237	15-min	\$14.87
Speech/Language Therapy	G0153	15-min	\$21.63
Self-Direction Advanced Supportive/Restorative	S5125-TF	15-min	\$4.57
Self-Direction Extended Respite	S9125-U4	15-min	\$179.40
Self-Direction Respite	T1005-U4	15-min	\$4.24
Self-Direction Personal Care	T1019	15-min	\$4.24

5. NEW METHODOLOGY OR RATE STRUCTURE.

The new rates are based on an average of a 25% increase of existing rates.

Medically Fragile Waiver Services	Code	Unit Type	Current Rate	New Rate
Advanced Supportive/Restorative Assistance	T1019-TF	15-min	\$4.57	\$5.65
Case Management	T1016	15-min	\$15.41	\$19.11
Case Management - Very Rural	T1016-TN	15-min	\$22.06	\$27.36
Institutional Case Management	T1016-U7	15-min	\$15.41	\$19.11
Institutional Case Management - Very Rural	T1016-U7-TN	15-min	\$22.06	\$27.36
Transitional Case Management	T1016-U3	15-min	\$15.41	\$19.11
Transitional Case Management - Very Rural	T1016-U3-TN	15-min	\$22.06	\$27.36
Home Delivered Meals	S5170	per meal	\$5.41	\$6.44
Hospice Care	S9126	per diem	\$128.80	\$154.75
In-Home Respite	T1005	15-min	\$4.24	\$5.26



Medically Fragile Waiver Services	Code	Unit Type	Current Rate	New Rate
In-Home Extended Respite	S9125	per diem	\$179.40	\$219.44
Personal Care	T1019	15-min	\$4.24	\$5.26
Private Duty Nursing	T1000	15-min	\$8.17	\$10.00
RN Assessment/Evaluation	T1002	15-min	\$14.61	\$19.50
RN Assessment/Evaluation - Transitional	T1002	15-min	\$14.61	\$19.50
Skilled Nursing – Home Health Setting (LPN)	G0300	15-min	\$14.61	\$18.20
Skilled Nursing – Home Health Setting (RN)	G0299	15-min	\$14.61	\$19.50
Occupational Therapy	G0152	15-min	\$21.63	\$26.00
Physical Therapy	G0151	15-min	\$21.63	\$26.00
Respiratory Therapy	G0237	15-min	\$14.87	\$18.60
Speech/Language Therapy	G0153	15-min	\$21.63	\$24.43
Self-Direction Advanced Supportive/Restorative	S5125-TF	15-min	\$4.57	\$5.65
Self-Direction Extended Respite	S9125-U4	15-min	\$179.40	\$219.44
Self-Direction Respite	T1005-U4	15-min	\$4.24	\$5.26
Self-Direction Personal Care	T1019	15-min	\$4.24	\$5.26

6. BUDGET ESTIMATE.

In SFY2023, the total increase will be \$5,699,867 with state share of \$1,457,456. In SFY2024, the total increase will be \$7,599,823 with state share of \$2,462,343.

7. AGENCY ESTIMATED IMPACT ON ACCESS TO CARE.

The rate increase will have a positive impact on access to care as providers are able to meet increased labor costs.

8. RATE OR METHOD CHANGE IN THE FORM OF A MOTION.

Oklahoma Health Care Authority requests the State Plan Amendment Rate Committee approve the proposed 25% rate increases.

9. EFFECTIVE DATE OF CHANGE.

October 1, 2022, contingent upon CMS approval.