



---

**Ellen M. Buettner** | Chief Executive Officer

**J. Kevin Stitt** | Governor

State Plan Amendment Rate Committee (SPARC)

Agenda

June 17, 2024

1:00 PM

OHCA Board Room  
4345 N. Lincoln Blvd  
Oklahoma City, OK

---

I. Welcome and Roll Call: **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)
- Aaron Morris (OHCA)
- Kasie McCarty (OHCA)
- Toney Welborn (OHCA)
- Sharon Butler (OSDH)
- Melissa Miller (ODMHSAS)
- Jennifer King (OHS)

**Public access via Zoom:**

[https://www.zoomgov.com/webinar/register/WN\\_5JtMGjM1TQi-svopLKrGjA](https://www.zoomgov.com/webinar/register/WN_5JtMGjM1TQi-svopLKrGjA)

\*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. Public Comments (2-minute limit): **Chair, Josh Richards**

III. Rate issues to be addressed: Presentation, discussion, and vote

- Regular Nursing Facility Rates
- (Presented by Fred Mensah, OHCA)
- AIDS Rate
- (Presented by Fred Mensah, OHCA)
- Regular ICF Rate



**ADDRESS**

4345 N. Lincoln Blvd.  
Oklahoma City, OK 73105



**WEBSITES**

oklahoma.gov/ohca  
mysoonerCare.org



**PHONE**

Admin: 405-522-7300  
Helpline: 800-987-7767



---

**Ellen M. Buettner** | Chief Executive Officer

**J. Kevin Stitt** | Governor

- F. (Presented by Fred Mensah, OHCA)
- G. Acute ICF Rate
- H. (Presented by Fred Mensah, OHCA)

IV. Adjournment: **Chair, Josh Richards**

FUTURE SPARC MEETING  
September 5, 2024  
9:30 am



**ADDRESS**

4345 N. Lincoln Blvd.  
Oklahoma City, OK 73105



**WEBSITES**

[oklahoma.gov/ohca](http://oklahoma.gov/ohca)  
[mysoonerCare.org](http://mysoonerCare.org)



**PHONE**

Admin: 405-522-7300  
Helpline: 800-987-7767

## **STATE PLAN AMENDMENT RATE COMMITTEE**

### **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 will also increase the rate for Regular Nursing Facilities as mandated by Senate Bill 1134 and reallocate the \$35 that was added to the base rate in SFY2024 to maintain Public Health Emergency supplemental payment levels to the pool of funds available for “Direct Care” and the “Other Cost” components as per the State Plan.

**4. CURRENT METHODOLOGY AND/OR RATE STRUCTURE.**

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

- A. Base Rate Component is \$158.56 per patient day.
- B. A Pay for Performance (PFP) Component defined as the dollars earned under the incentive payment program for Nursing Facilities 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

## **STATE PLAN AMENDMENT RATE COMMITTEE**

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 \$251,077,470. The current Quality of Care (QOC) fee is \$15.65 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. Also, there is a rate change because of the rate increase mandated by Senate Bill 1134 and the reallocation of the \$35 from the base rate to the pool of funds available for the “Direct Care and “Other Cost” components. The new Base Rate Component will be \$123.78 per patient day. The new combined pool amount for “Direct Care” and “Other Cost” components will be \$503,253,105. The new Quality of Care (QOC) fee will be \$15.87 per patient day.

### **6. BUDGET ESTIMATE.**

The estimated budget impact for SFY2025 will be an increase in the total amount of \$87,371,108; with \$28,666,460 in state share.

OHCA attests that it has adequate funds to cover the state share of the projected cost of services

### **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:

- A decrease to the base rate component from \$158.56 per patient day to \$123.78 per patient day.

An increase to the combined pool amount for “Direct Care” and “Other Cost” Components from \$251,077,470 to \$503,253,105 for the annual reallocation of the Direct Care Cost Component as per the State Plan.



## STATE PLAN AMENDMENT RATE COMMITTEE

**9. EFFECTIVE DATE OF CHANGE.**

July 1, 2024, upon approval by CMS

**STATE PLAN AMENDMENT RATE COMMITTEE**

**ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS) 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 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 facilities. This change will also increase the AIDS rate as mandated by Senate Bill 1134.

**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 \$266.18 per patient day. The Quality of Care (QOC) fee is \$15.65 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 also increases the AIDS rate as mandated by Senate Bill 1134. The rate for this provider type will be \$286.32 per patient day. The recalculated Quality of Care (QOC) fee will be \$15.87 per patient day.

**6. BUDGET ESTIMATE.**

The estimated budget impact for SFY2025 will be an increase in the total amount of \$142,548; with \$46,770 in state share.

OHCA attests that it has adequate funds to cover the state share of the projected cost of services.

## **STATE PLAN AMENDMENT RATE COMMITTEE**

**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 \$266.18 per patient day to \$286.32 per patient day.

**9. EFFECTIVE DATE OF CHANGE.**

July 1, 2024, upon approval by CMS

**STATE PLAN AMENDMENT RATE COMMITTEE**

**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 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. This change also increases Regular ICF/IID rate as mandated by Senate Bill 1134.

**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 \$155.23 per patient day.

The Quality of Care (QOC) fee is \$9.38 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 required annual recalculation of the Quality of Care (QOC) fee. This change will also increase the Regular ICF/IID rate as mandated by Senate Bill 1134.

The proposed rate for this provider type is \$170.44 per patient day.

The Quality of Care (QOC) fee will be \$9.75 per patient day.

**6. BUDGET ESTIMATE.**

The estimated budget impact for SFY2025 will be an increase in the total amount of \$2,285,123; with \$749,749 in state share.

OHCA attests that it has adequate funds to cover the state share of the projected cost of services.



## **STATE PLAN AMENDMENT RATE COMMITTEE**

**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 \$155.23 per patient day to \$170.44 per patient day.

**9. EFFECTIVE DATE OF CHANGE.**

July 1, 2024, upon approval by CMS

**STATE PLAN AMENDMENT RATE COMMITTEE**

**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. This change will also increase Acute ICF/IID rate as mandated by Senate Bill 1134.

**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 \$186.64 per patient day.

The Quality of Care (QOC) fee is \$10.26 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. This change also increases the Acute ICF/IID rate as mandated by Senate Bill 1134.

The proposed rate for this provider type is \$206.02 per patient day.

The recalculated Quality of Care (QOC) fee is \$ \$11.00 per patient day.

**6. BUDGET ESTIMATE.**

The estimated budget impact for SFY2025 will be an increase in the total amount of \$6,681,728; with \$2,192,275 in state share.

OHCA attests that it has adequate funds to cover the state share of the projected cost of services.



## STATE PLAN AMENDMENT RATE COMMITTEE

**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 \$186.64 per patient day to \$206.02 per patient day.

**9. EFFECTIVE DATE OF CHANGE.**

July 1, 2024, upon approval by CMS