



Tribal Consultation Meeting Agenda
11 AM, January 5th
Online Microsoft Teams Meeting

1. Welcome— Dana Miller, Director of Tribal Government Relations
2. Proposed Rule, State Plan, Waiver, and Rate Amendments— Dana Miller,
Director of Tribal Government Relations

Proposed Rule, State Plan, and Waiver Amendments

- State Treasurer’s Achieving a Better Life Experience (STABLE) Accounts
- OMB Rate for Tribal Providers of Residential Substance Use Disorder Services (SUD) in a Non-IMD
- Applied Behavior Analysis (ABA) Services Revisions
- Medicaid-Funded Abortion Certification Requirements
- Rural Health Clinic (RHC) and Federally Qualified Health Center (FQHC) Policy Revisions
- Peer Recovery Support Specialist (PRSS) Services in Indian Health Services, Tribal Programs and Urban Indian Clinics (I/T/Us)
- Lodging, Meals, and SooneRide
- Sunsetting of Behavioral Health Homes
- Audiologists Revisions
- Adult Inpatient Physician & Surgical Physician Visit Limitation
- ADvantage Waiver
- Obstetrical (OB) Ultrasound
- Clinical Trials
- Oklahoma Human Services (OHS) COVID-19 Add-On Payment for Waiver Providers
- Rate Revisions for the Specialty, Standard, and Extended Psychiatric Residential Treatment Facilities (PRTFs)
- Disaster Relief Funding for COVID-19 Vaccine Administration and ACIP Vaccine Administration
- Disaster Relief Non-MAGI Hospital Presumptive Eligibility



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3. Other Business and Project Updates- Dana Miller, Director of Tribal Government Relations
 - MCO RFP update – Traylor Rains, Deputy State Medicaid Director
 - SoonerCare ITU PCMH redesign – Andrew Cohen, PHPG Director and Scott Wittman, PHPG Director
4. Adjourn—Next Tribal Consultation Scheduled for 11 AM, March 2nd, 2021

Proposed Rule, State Plan, and Waiver Amendments

State Treasurer’s Achieving a Better Life Experience (STABLE) Accounts — Achieving a Better Life Experience (ABLE) accounts are tax-favored savings accounts administered by the Oklahoma State Treasurer's office for individuals with disabilities. Policy changes will further define eligibility rules for individuals making contributions to a STABLE account and then subsequently applying for SoonerCare long-term care services.

OMB Rate for Tribal Providers of Residential Substance Use Disorder Services (SUD) in a Non-IMD — The OHCA originally presented policy changes and a state plan amendment request to establish coverage and reimbursement of residential substance use disorder (SUD) treatment services for individuals under the age of 21 and individuals age 21-64 residing in facilities with 16 beds or less in September 2020. At the time of the submission, the State requested reimbursement for all providers at a State-defined per diem rate. However, since submission of OK SPA 20-0035, Residential SUD Services, the State has received further guidance from CMS of options for reimbursement methodologies of residential services to tribal providers. Therefore, the State will seek to reimburse tribal providers an outpatient OMB rate for residential substance use disorder services. ***This item requests an expedited 30-day tribal consultation comment period.***

Applied Behavior Analysis (ABA) Services Revisions — The proposed revisions will clarify individualized treatment plan requirements, common ABA-based techniques, medical necessity criteria, and required documentation for ABA treatment extension requests. The proposed revisions will also allow licensed psychologists to render ABA services without additional ABA-related certification requirements. Other revisions will involve limited rewriting aimed at clarifying policy language.



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Medicaid-Funded Abortion Certification Requirements — The proposed revisions will align with Title 63 of the Oklahoma Statutes §1-741.1 to require that the Certification for Medicaid-Funded Abortion form be completed by the physician and the patient before any medical procedure is rendered.

Rural Health Clinic (RHC) and Federally Qualified Health Center (FQHC) Policy Revisions — The proposed revisions will align RHC/FQHC policy language with the Oklahoma Medicaid State Plan, federal regulations, and the OHCA's current business practices.

Peer Recovery Support Specialist (PRSS) Services in Indian Health Services, Tribal Programs and Urban Indian Clinics (I/T/Us) — The proposed revisions will add coverage and OMB reimbursement of PRSS services in I/T/Us. Additionally, the proposed revisions will add coverage and reimbursement of residential substance use disorder (SUD) treatment services in I/T/Us. Other revisions will reorganize policy for clarity and correct grammatical errors.

Lodging, Meals, and SoonerRide — The proposed revisions will update the lodging and meals policy by changing the allowed mileage radius from one hundred miles or more to fifty miles or more. This change improves access to the lodging and meals benefit and to medically necessary care. Additional changes will reformat and organize the existing policy in order to provide better clarity on how the approval process works for the lodging and meals benefit. Furthermore, the proposed revisions will update and reformat the SoonerRide Non-Emergency Transportation (NEMT) policy to provide more clarity to providers and members. The proposed revisions will outline the specific services that SoonerRide NEMT offers and how members and long-term care facilities can request transportation assistance through SoonerRide NEMT. The proposed revisions to lodging and meals, as well as SoonerRide, will align policy with current business practices.

Sunsetting of Behavioral Health Homes — The Health Homes benefit will be phased out effective September 30, 2021; thereby, rendering the associated rule language obsolete. However, other care coordination models will still be in place to still serve this population. The policy will be removed from OHCA's Agency rules and the State Plan.



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Audiologist Revisions — The proposed revisions will update the educational requirements for audiologists in order to align OHCA policy with the requirements that are found in the Board of Examiners policy for Speech-Language Pathology and Audiology.

Adult Inpatient Physician & Surgical Physician Visit Limitation — The proposed revisions will remove the 24-day per state fiscal year limit for covered inpatient physician and surgical services provided to adult SoonerCare members. The limitation is removed to align with current practice. Additionally, the removal of the limitation will require a state plan amendment to the alternative benefit plan for adults in the expansion group.

ADvantage Waiver — The proposed revisions will align waiver policy with the OHCA's overarching Electronic Visit Verification (EVV) rules. Additional revisions will eliminate or update outdated policy and fix grammatical errors.

Obstetrical (OB) Ultrasound — The proposed revisions will update the OB ultrasound policy to allow for both an abdominal and vaginal ultrasound to be performed in the first trimester when clinically appropriate and medically necessary; policy currently only allows for either an abdominal or vaginal ultra sound.

Clinical Trials — The proposed revisions will add guidelines for coverage of clinical trials medical necessity criteria for coverage of routine care services during a clinical trial, and clarifying that experimental and investigational treatment is not covered.

Oklahoma Human Services (OHS) COVID-19 Add-On Payment for Waiver Providers— Pursuant to the 1915(c) Home And Community-Based Services (HCBS) Waiver Instructions and Technical Guidance Appendix K: Emergency Preparedness and Response, the OHS is seeking to implement a provider rate increase to effectively respond to the COVID-19 pandemic. The state requires the flexibility to adjust provider rates to account for the increased risk factors associated with COVID-19, overtime, and to ensure that essential services remain available for waiver service recipients. Oklahoma has deemed it necessary to reimburse providers with an additional retroactive add-on COVID-19 rate. This add-on payment will apply to all services in which face-to-face contact is essential for beneficiary health and safety. The amount of the retroactive add-on payment rate will be for the time period of April 1, 2020 through September 30, 2020 and will not exceed 20% of the provider's current rate. The service providers impacted by the rate increase include those who provide services to members on the Medicaid In-Home Supports



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Waiver for Children, In-Home Supports Waiver for Adults, Homeward Bound Waiver, Community Waiver, and ADvantage Waiver.

Rate Revisions for the Specialty, Standard, and Extended Psychiatric Residential Treatment Facilities (PRTFs) — The Oklahoma Mental Health & Substance Abuse (OMHSA) will seek approval of a State Plan Amendment (SPA) to revise rates for PRTFs. The established per diem base rate for standard populations will be restored from \$286.08 to \$336.57 (the rate prior to the 2016 budget reduction). The established per diem base rate for standard populations will be restored from \$271.61 to \$319.54 (the rate prior to the 2016 budget reduction). The established per diem base rate for specialty populations will increase from \$340.04 to \$550.00. ***This item requests an expedited 30-day tribal consultation comment period.***

Disaster Relief Funding for COVID-19 Vaccine Administration and ACIP Vaccine Administration – In response to the COVID-19 public health emergency, the OHCA submitted a disaster relief State Plan Amendment (DRSPA) request to the Centers for Medicare & Medicaid Services (CMS) on December 10, 2020. The request will allow physicians as well as pharmacists, pharmacy interns, and other qualified professionals, as per the Public Readiness and Emergency Preparedness (PREP) Act, to be reimbursed for the administration of the COVID-19 vaccine. Additionally, the OHCA will extend the current vaccine administration reimbursement methodologies, as per the Medicaid State Plan, to pharmacists and other qualified professionals described in the PREP Act for all Advisory Committee on Immunization Practices (ACIP) recommended vaccines. The DRSPA request has a retroactive proposed effective date of August 24, 2020 and will be in effect from the date of CMS approval until the termination of the public health emergency. The OHCA will be submitting a subsequent SPA request to CMS to make the requests above permanent.

Disaster Relief Non-MAGI Hospital Presumptive Eligibility – In response to the COVID-19 public health emergency, the OHCA submitted a disaster relief State Plan Amendment (DRSPA) request to CMS on December 14, 2020 to allow hospitals to make hospital presumptive eligibility (HPE) determinations for non-MAGI individuals discharging from the inpatient hospital setting and transferring into a long-term care (LTC) facility. The proposed request will be effective from the date of CMS approval until the termination of the public health emergency.



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