



STATE FISCAL YEAR 2021 TRIBAL CONSULTATION SUMMARY

July 1, 2020 – July 30, 2021

OHCA is committed to engage in active communication with tribal governments during the decision-making and priority-setting process. OHCA convenes regularly scheduled and ad hoc tribal consultation meetings throughout the year. It is OHCA's practice to consult on all matters including direct, indirect and no impact to Indian Health Services, tribal facilities, and Urban Indian Clinics (I/T/Us), and American Indian/Alaska Native (AI/AN) SoonerCare members. This report consists of SFY21 proposed rules, state plan and waiver amendments that were considered during tribal consultation.

**69 Total Items
Considered**

**51 Total Items
Considered with
Tribal Impact**

- Pending: 12
- Withdrawn: 4
- Effective: 35

Proposed Rule, State Plan, and Waiver Amendments

Medicare Advantage Plans (Medicare Part C) — The proposed revisions, regarding the payment of Medicare deductibles, coinsurance, and copays, will standardize Medicare Part A, Part B, and Part C language in policy.

Consultation: 07/07/2020; Status: *Emergency Rule Effective 11/02/2020; Permanent Rule Effective 09/01/2021.*



ADDRESS

4345 N. Lincoln Blvd.
Oklahoma City, OK 73105



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okhca.org
mysoonercaare.org



PHONE

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



SUPPORT Act Medication-Assisted Treatment (MAT) — The proposed revisions formalize the State's coverage of MAT to treat substance use disorders in accordance with Section 1006(b) of the SUPPORT Act, HR 6 by allowing coverage for all FDA-approved drugs to treat Opioid Use Disorders (OUD) and establishing reimbursement rates for MAT providers.

Consultation: 07/07/2020; Status: Emergency Rule Effective 01/01/2021; Permanent Rule Effective 09/01/2021. State Plan Amendment Effective 07/01/2021.

ADvantage Waiver — The proposed revisions to the ADvantage waiver will add new language allowing an Oklahoma Department of Human Services (OKDHS) nurse to assess the applicant remotely via electronic communication, in the applicant's home, or other appropriate setting using the Uniform Comprehensive Assessment Tool (UCAT) for the initial level of care (LOC) assessment. Additionally, policy revisions will describe the procedures and requirements involved in administering the UCAT and determining the medical level of care of a member based upon the assessment.

Consultation: 07/07/2020; This item became effective on July 1, 2021.

Coverage for Adults in SoonerCare - Due to the passage of State Question 802 (SQ 802), the OHCA will add adults 19-64 years of age as a new eligibility group in the SoonerCare program as described in Section 435.119 of Title 24 of the Code of Federal Regulations.

Consultation: 07/07/2020; Medicaid Expansion Rules Status: Emergency Rule Effective 07/01/2021; Permanent Rule is Pending. State Plan Amendment Effective 07/01/2021.

Therapy Assistants and Clinical Fellows — The OHCA originally presented policy changes to add provider qualifications, coverage, and reimbursement for services provided by therapy assistants and speech language pathology clinical fellows during the March 3, 2020 Tribal consultation. Due to public comment received, the OHCA has made revisions to its policy request. OHCA will continue to seek adding provider qualifications, coverage, and reimbursement for services performed by physical therapy assistants, occupational therapy assistants, speech language pathology assistants (SLPAs), and speech language pathology clinical fellows. However, as compared to the original request to reimburse all assistants and clinical fellows at 85% of the rate of the fully licensed practitioner, the OHCA will seek to reimburse provisionally licensed speech language pathology clinical fellows at 100% of the fully licensed therapist rate and reimburse assistants (OT, PT, ST) at 85% of the fully licensed therapist rate. Additionally, the requested effective date of this proposal changed from 1/1/2021 to 2/1/2021.

Consultation: 09/01/2020; Status: Emergency Rule Effective 02/01/2021; Permanent Rule Effective 09/01/2021. State Plan Amendment Effective: 02/01/2021.

SUPPORT Act Drug Utilization Review (DUR) Standard — The proposed revisions update the standard for retrospective drug utilization reviews in accordance with Section 1004(b) of the SUPPORT Act, HR 6 including the standards of "excessive utilization" and "inappropriate or



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medically unnecessary care or prescribing or billing practices that indicate abuse or excessive utilization.”

Consultation: 09/01/2020; *State Plan Amendment Effective: 10/01/2020.*

Insure Oklahoma Changes — The OHCA will revise policies, including but not limited to, the 1115(a)-demonstration waiver and agency rules, to reflect changes to the Insure Oklahoma (IO) program. Effective July 1, 2021, all IO Individual Plan (IP) members, and IO Employer-Sponsored Insurance (ESI) members with incomes at or below 133% of the federal poverty level (FPL), will transition to and be provided services by the SoonerCare program under the expansion adult option. Additionally, revisions will clarify that IO ESI members’ FPL threshold is 134%-200%.

Consultation: 09/01/2020; *Status: Emergency Rule Effective 07/01/2021; Permanent Rule is Pending. Waiver Amendment: Pending CMS approval.*

Bariatric Surgery Revisions — The proposed revisions will update bariatric surgery requirements and guidelines to reflect current business practice. Additional revisions will involve fixing grammatical and/or formatting errors, as well as, revoking obsolete sections.

Consultation: 09/01/2020; *Status: Permanent Rule Effective 09/01/2021*

Disaster Relief COVID-19 Mobile Testing Authority — In response to the COVID-19 public health emergency, the OHCA provided notice of the second submitted disaster relief Title XIX state plan amendment to the Centers for Medicare and Medicaid Services (CMS). Effective [March 1st](#), 2020, the agency will allow for testing to diagnose or detect COVID-19 and COVID-19 antibodies within non-office settings, such as mobile test sites. The agency also provided notice of the request to allow for self-collected test systems that the FDA has authorized for home use; however, since submission to CMS, the agency has decided only to move forward with the request to allow for mobile testing sites only.

Consultation: 09/01/2020; *This became effective on March 1st, 2020 and will be in effect until the termination of the public health emergency.*

Child Support Cooperation Exemption for Recipients of Indian Health Services — Policy revisions are needed to note a difference in the Medicaid agency’s process for medical child support referrals due to changes in federal regulations at 42 CFR 433.152 and 45 CFR 303.11. Policy revisions are needed to reflect the provisions within the federal regulation which notes that the Medicaid agency may not refer a case to the state child support agency for medical support enforcement when the Medicaid referral is based solely upon health care services provided through an Indian Health Program. System changes will be implemented to ensure compliance with agency and federal regulations.

Consultation: 09/01/2020; *Status: Emergency Rule Effective 12/18/2020; Permanent Rule Effective 09/01/2021*



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PHONE

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Residential SUD Services — The proposed amendment will add coverage and reimbursement of residential substance use disorder (SUD) services for individuals (under age 64) residing in a facility with 16 beds or less to the Oklahoma state plan and rules. **This item requests an expedited 30-day tribal consultation comment period.**

Consultation: 09/01/2020; **Status:** *Emergency Rule Effective 01/01/2021; Permanent Rule Effective 09/01/2021. State Plan Amendment Effective: 10/01/2020.*

The Oklahoma Department of Human Services (DHS) Development Disabilities — To comply with federal regulations, DDS will implement a provider rate increase for current job coaching services for individuals. Additionally, DDS will make changes to their group job coaching services and group enhanced job coaching services based on new group sizes for participants. The services are available to waiver recipients on the Medicaid competitive In-Home Supports Waiver for Adults, Homeward Bound Waiver and Community Based Waiver. These changes are necessary to support individuals who work in integrated settings; and allow DHS to better empower and support Oklahomans with developmental disabilities.

Consultation: 09/01/2020; **This item became effective on July 1, 2021.**

Diabetes Self-Management Education and Support (DSMES) Services — The proposed revisions will clarify DSMES provider requirements for registered dietitians, registered nurses, and pharmacists. Revisions will also add other health care providers with Certified Diabetes Care and Education Specialist (CDCES) or Board-Certified Advanced Diabetes Management (BC-ADM) certifications as eligible DSMES providers.

Consultation: 11/03/2020; **Status:** *Emergency Rule Effective 05/01/2021; Permanent Rule is Pending. State Plan Amendment Effective: 05/01/2021.*

Programs of All Inclusive-Care for the Elderly (PACE) — The proposed revisions will update policy regarding enrollment denials for PACE to reflect current business practices. Additional policy changes will add language to clarify and establish OHCA's role in reviewing justifications for expedited appeals from PACE organizations. These proposed rule changes will align policy with Section 460.122 of Title 42 of the Code of Federal Regulations.

Consultation: 11/03/2020; **Status:** *Permanent Rule Effective 09/01/2021.*

Developmental Disabilities Services (DDS) — The proposed revisions will change the timeframe for the physical health examinations and medical evaluations that are required when applying for the DDS Home and Community-Based Services waiver from 90 days to one (1) calendar year. Additionally, changes will add language for remote services that are provided in the member's home, family home, or employment site. Revisions will also address the new agency companion household criteria and new agency champion provider requirements, as well as modify the procedures for the DDS home profile process. Finally, changes will establish new criteria on how the member is to obtain assistive technology devices and will clarify instructions to staff whom are providing Stabilization Services authorized through remote supports.



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Consultation: 11/03/2020; Status: Emergency Rule Effective 01/01/2021; Permanent Rule Effective 09/01/2021

Dental Revisions — The proposed revisions will add "scaling in the presence of a generalized moderate or severe gingival inflammation" as a new procedure to dental policy. Additional revisions will specify that a caries risk assessment form must be documented when submitting a prior authorization for crowns. Further revisions will clarify billing language for administering nitrous oxide and involve cleanup of formatting and grammatical errors.

Consultation: 11/03/2020; Status: Permanent Rule Effective 09/01/2021.

Disaster Relief Supplemental Payments to Nursing Facilities for Ventilator-dependent Individuals— In response to the COVID-19 public health emergency, the OHCA submitted a disaster relief State Plan Amendment (DRSPA) request to CMS on September 21, 2020, to allow for a supplemental payment for the provision of Durable Medical Equipment Supplies and Appliances (DMEPOS) to nursing facilities serving ventilator-dependent individuals, with a retroactive effective date of July 1, 2020.

Consultation: 11/03/2020; This became effective on July 1, 2020 and will be in effect until the termination of the public health emergency.

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.

Consultation: 01/05/2021; Status: Permanent Rule Effective 09/01/2021.

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 ages 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.

Consultation: 01/05/2021; State Plan Amendment Effective: 01/01/2021.

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



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additional ABA-related certification requirements. Other revisions will involve limited rewriting aimed at clarifying policy language.

Consultation: 01/05/2021; **Status:** *Permanent Rule Effective 09/01/2021. State Plan Amendment Effective: 09/01/2021.*

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.

Consultation: 01/05/2021; **Status:** *Permanent Rule Effective 09/01/2021.*

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.

Consultation: 01/05/2021; **Status:** *Permanent Rule Effective 09/01/2021.*

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.

Consultation: 01/05/2021; **Status:** *Permanent Rule Effective 09/01/2021.*

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.

Consultation: 01/05/2021; **Status:** *State Plan Amendment Effective: 07/01/2021.*

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



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when clinically appropriate and medically necessary; policy currently only allows for either an abdominal or vaginal ultrasound.

Consultation: 01/05/2021; Status: Permanent Rule Effective 09/01/2021.

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.

Consultation: 01/05/2021; Status: Permanent Rule Effective 09/01/2021.

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

Consultation: 01/05/2021; This item became effective on August 13, 2021.

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.

Consultation: 01/05/2021; This became effective on August 24, 2020 and will be in effect until the termination of the public health emergency. The agency is taking steps to make this become 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



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Helpline: 800-987-7767



presumptive eligibility (HPE) determinations for non-MAGI individuals discharging from the inpatient hospital setting and transferring into a long-term care (LTC) facility.

Consultation: 01/05/2021; *This became effective on December 14, 2020 and will be in effect until the termination of the public health emergency.*

Remove Reasonable Limits on Amounts for Necessary Medical or Remedial Care Not Covered under Medicaid — The proposed revisions will remove the rules that allow reasonable limitations to be considered before a medical expense, not covered under SoonerCare, can be deducted from an individual's post-eligibility income when determining the vendor payment for SoonerCare services in a long-term care facility. The rules, being removed, were previously approved but not yet implemented and may be reconsidered after the public health emergency (PHE) declaration expires.

Consultation: 03/02/2021; *Status: Emergency Rule Effective 07/01/2021; Permanent Rule is Pending.*

Home Health Ordering Provider Disaster Relief Request — In response to the COVID-19 public health emergency (PHE), the OHCA submitted a disaster relief State Plan Amendment (DRSPA) request to the Centers for Medicare & Medicaid Services (CMS) to allow nurse practitioners, clinical nurse specialists, or physician assistants, working in accordance with State law to order home health services as per the Coronavirus Aid, Relief, and Economic Security (CARES) Act.

Consultation: 03/02/2021; *This became effective on March 27, 2020 and will continue to remain in effect after the expiration of the public health emergency.*

Hospice Services — The State is seeking to add hospice benefits for the expansion population and adults enrolled in a managed care organization (MCO). Currently, hospice is only provided to children under age 21.

Consultation: 03/02/2021; *Permanent Rule is Pending. State Plan Amendment is pending CMS approval. The MCO waiver amendment was put on indefinite hold due to Oklahoma Supreme Court Opinion 2021 OK 30.*

Adult Expansion Alternative Benefits Plan (ABP) Update — The Oklahoma Health Care Authority (OHCA) seeks to remove the 24-day limitation for inpatient physician services, add medication assisted treatment (MAT) services, and add residential substance abuse disorder (SUD) treatment services to the Adult Expansion ABP.

Consultation: 03/02/2021; *State Plan Amendment Effective: 7/1/21.*

State Plan Personal Care Services — The proposed revisions will remove a member's legal guardian as a service provider of State Plan personal care services. This proposed change reflects guidance received from the Centers for Medicare and Medicaid Services (CMS). Further



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Helpline: 800-987-7767



revisions better define State Plan personal care services, align rules with current business practices, and correct formatting and grammatical errors.

Consultation: 03/02/2021; Status: Emergency Rule Effective 07/01/2021; Permanent Rule is Pending.

Medicaid Expansion—The proposed revisions will expand Medicaid eligibility for individuals, age nineteen (19) and under age sixty-five (65), with incomes at or below 133% of the federal poverty level (FPL) by creating a "new adult group" as per Section 435.119 of Title 42 of the Code of Federal Regulations. Additionally, proposed changes will remove references to the Insure Oklahoma (IO) Individual Plan (IP) program as the program is being terminated. The adults currently being served by IO IP will transition to the new adult Medicaid expansion population and will be eligible to receive more comprehensive services. Further, adults currently receive a limited prosthetics and orthotics benefit. Policy will be revised to reflect a more comprehensive coverage of prosthetics and orthotics available to expansion adults. Finally, revisions will align and better clarify policy with current practice and correct grammatical errors.

Consultation: 03/02/2021; Status: Emergency Rule Effective 07/01/2021; Permanent Rule is Pending. State Plan Amendment Effective: 07/01/2021.

Alternative Benefit Plan (ABP) for Expansion Adults Benefits Update — The Oklahoma Health Care Authority (OHCA) seeks to remove section 1945 health homes as well as add hospice services to the Adult Expansion ABP benefits provided to those eligible under the Expansion Adult eligibility group as per 42 CFR 435.119. Subject to funding availability, the OHCA is also proposing to add certain dental benefits including but not limited to examinations, medically necessary oral pathology, images, and anesthesia for adults receiving benefits through the ABP.

Consultation: 05/04/2021; State Plan Amendment to add dental services to the ABP Effective: 07/01/2021. State Plan Amendment to remove health homes and add hospice is pending CMS approval.

Ordering Providers for Home Health Services — In addition to physicians, the OHCA will allow nurse practitioners, clinical nurse specialists, or physician assistants, working in accordance with State law, to order home health services, inclusive of medical supplies, equipment, and appliances, to comply with federal regulation.

Consultation: 05/04/2021; This became effective on March 27, 2020 and will continue to remain in effect after the expiration of the public health emergency.

Third Party Liability Payment of Claims — A Title XIX State Plan Amendment (SPA) will be submitted to CMS to notate that the OHCA requires providers to bill liable third parties when services covered under the plan are furnished to a member on whose behalf child support enforcement is being carried out. This change is needed to align with current policy and practice as the OHCA is the payer of last resort.



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Consultation: 05/04/2021; *State Plan Amendment Effective: 07/01/2021.*

Adult Expansion Alternative Benefits Plan (ABP) Update — The OHCA will revise the original content describing long-term care coverage available to Expansion Adults within the ABP by including the correct name of the service, the appropriate State Plan reference, and any applicable service amount limitation.

Consultation: 05/04/2021; *State Plan Amendment Effective: 7/1/2021.*

Payments from Trusts for Clothing Expenses not counted as Income — The proposed revisions update policy regarding trust accounts and countable income for aged, blind, and disabled (ABD) members. In accordance with amended Supplemental Security Income (SSI) rules, payments from the trust to the member or to a third party for the purpose of providing for the member's clothing needs are not countable income in determining eligibility, thus requiring an update to OHCA rules.

Consultation: 05/04/2021; *Status: Emergency Rule Effective 07/19/2021; Permanent Rule is Pending.*

COVID-19 Disaster Relief State Plan Amendments (DRSPA) — In response to the COVID-19 public health emergency (PHE), the OHCA submitted the following DRSPA requests to the Centers for Medicare & Medicaid Services (CMS):

COVID-19 Vaccine Rate Increase — On March 15, 2021, CMS increased the Medicare payment rate for the administration of the COVID-19 vaccine. Effective for services furnished on or after March 15, 2021, the OHCA will reimburse eligible providers the new Medicare payment rate of \$40 for each administration of the COVID-19 vaccine. The all-inclusive payment rate for COVID-19 vaccines administered within tribal/IHS facilities is not changing.

Consultation: 05/04/2021; *This became effective on March 15, 2021 and will be effective until the end of the public health emergency.*

COVID-19 Supplemental Payment for Nursing Facilities — The OHCA will allow a temporary supplemental payment for long-term care facilities and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) to support increased costs due to COVID-19. The effective date for the supplemental payments will be retroactive to July 1, 2020, and will end on June 30, 2021. If the PHE is extended past June 30, 2021, supplemental payments will continue to be made to eligible facilities.

Consultation: 05/04/2021; *This became effective on July 1, 2020 and will be effective until the end of the public health emergency.*



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Admin: 405-522-7300
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Medically Fragile Waiver - The proposed revisions to the Medically Fragile Waiver will add new language to the existing Private Duty Nursing and Skilled Nursing service definitions to allow osteopathic physicians, nurse practitioners, clinical nurse specialists, or physician assistants, working in accordance with State law, to order home health services. Additionally, the waiver amendment includes minor grammatical and punctuation corrections with references to Quality Assurance and Community Living Services (QA/CLS) changed to Long Term Services and Supports (LTSS).

Consultation: 05/04/2021; *This item became effective on October 1, 2021.*

Dental Services for Adults – Senate bill 1046 (SB1046) mandates the Oklahoma Health Care Authority (OHCA) expand current dental benefits offered to Medicaid adult members. The OHCA will add dental examinations, x-rays, dental cleanings, fluoride, dental fillings, scaling and root planning, as well as dentures and partial dentures as covered services for SoonerCare adult members. Adult SoonerCare members will have access to the aforementioned dental services effective July 1, 2021. Policy will delineate coverage as well as any applicable service limitation(s). Newly added dental services will be reimbursed pursuant to the current established reimbursement methodology within the State Plan. *This item requests a 14-day expedited tribal consultation.*

Consultation: 06/08/2021; *Emergency Rule and Permanent Rule are Pending. State Plan Amendment Effective: 07/01/2021.*

Adult Expansion Alternative Benefits Plan (ABP) Update – The OHCA will revise the original content of the ABP to note that infusion therapy is a covered service. Additionally, the ABP will reflect the request to add the adult dental services noted within the summary above. *This item requests a 14-day expedited tribal consultation.*

Consultation: 06/08/2021; *State Plan Amendment Effective: 7/1/2021.*

Statewide HIE (OKSHINE) - The proposed policy is necessary to comply with Senate Bill 574 which creates the state designated health information exchange, Oklahoma State Health Information Network and Exchange (OKSHINE), which will be established, overseen, and facilitated by the OHCA. The proposed policy will add program description; definitions; outline the user requirements; and needed certifications. **This item requests a 14-day expedited tribal consultation.**

Consultation: 06/08/2021; *Status: Emergency Rule Effective 07/19/2021; Permanent Rule is Pending.*



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COVID-19 Disaster-relief Request(s):

OHCA requested the following COVID-19 related change through a disaster relief Home and Community-Based Service (HCBS) Appendix K:

The COVID-19 pandemic has placed a great amount of financial strain on the provider community. Providers have experienced lockdowns causing non-budgeted overtime costs, increased cost for personal protective equipment, and a tightening labor market. The proposed rate increase seeks to temporarily provide additional compensation to HCBS providers during the public emergency.

Oklahoma has deemed it necessary to reimburse HCBS 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 not exceed 20% of the provider's current rate for the following services:

DDS Waiver 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
- Supported Employment

ADvantage Waiver Services

- Skilled Nursing
- Personal Care
- Respite
- Adult Day
- Assisted Living
- Hospice
- Nursing Facility Respite

The services provided by these rates are available to recipients on the Medicaid In Home Supports Waiver for Children, In-Home Supports Waiver for Adults, Homeward Bound Waiver, Community Waiver and ADvantage Waiver. ***The retroactive add-on payment rate will be for the time period of October 1, 2020, through December 31, 2020.***



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