

## **Oklahoma Health Care Authority**

It is very important that you provide your comments regarding the proposed rule change by the comment due date. Comments are directed to the [Oklahoma Health Care Authority \(OHCA\) Proposed Changes Blog](#).

**OHCA COMMENT DUE DATE:** May 17, 2017

The proposed policy is an Emergency Rule. The proposed policy was presented at the March 7, 2017 Tribal Consultation and is scheduled to be presented to the Medical Advisory Committee on May 18, 2017 and the OHCA Board of Directors on June 29, 2017.

**Reference:** APA WF #17-04A

### **SUMMARY:**

**MFP PRTF Wraparound Services Demonstration** – Living Choice Rules are revised to add an additional population to be served in the Money Follows the Person demonstration. Living Choice is developing its implementation plan to transition eligible individuals from a Psychiatric Residential Treatment Facility back into the community.

### **LEGAL AUTHORITY**

The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; 42 USC § 18001

### **RULE IMPACT STATEMENT:**

#### **STATE OF OKLAHOMA OKLAHOMA HEALTH CARE AUTHORITY**

**TO:** Tywanda Cox  
Health Policy

**FROM:** Traylor Rains-Sims  
Health Policy

**SUBJECT:** Rule Impact Statement  
APA WF # 17-04A

#### **A. Brief description of the purpose of the rule:**

Living Choice Rules are revised to add an additional population to be served in the Money Follows the Person (MFP) demonstration. Living Choice is developing its implementation plan to transition eligible individuals from a Psychiatric Residential Treatment Facility (PRTF) back into the community.

Oklahoma's MFP Demonstration for PRTF transitioning will focus on youth in transition, ages sixteen (16) through eighteen (18), who have been in an inpatient psychiatric residential facility for 90 or more days during an episode of care. The individuals will be eligible for transitional Health Home services under Oklahoma's Living Choice program. Services will be provided in accordance with an individualized plan of care under the direction of appropriate service providers. The goal is to improve health outcomes and reduce the number of days in out-of-home placements for this set of members.

- B. A description of the classes of persons who most likely will be affected by the proposed rule, including classes that will bear the cost of the proposed rule, and any information on cost impacts received by the agency from any private or public entities:

Youth ages 16 - 18 transitioning out of Psychiatric Residential Treatment Facilities will be affected by the proposed rule in that they will have access to care coordination services that will allow them to successfully transition to the community. No cost impacts have been received by the agency from any private or public entity.

- C. A description of the classes of persons who will benefit from the proposed rule:

Youth ages 16 - 18 transitioning out of Psychiatric Residential Treatment Facilities will be affected by the proposed rule in that they have access to care coordination services that will allow them to successfully transition to the community.

- D. A description of the probable economic impact of the proposed rule upon the affected classes of persons or political subdivisions, including a listing of all fee changes and, whenever possible, a separate justification for each fee change:

There is no probable impact of the proposed rule upon any classes of persons or political subdivisions.

- E. The probable costs and benefits to the agency and to any other agency of the implementation and enforcement of the proposed rule, the source of revenue to be used for implementation and enforcement of the proposed rule, and any anticipated effect on state revenues, including a projected net loss or gain in such revenues if it can be projected by the agency:

The Agency has determined there are no probable net costs to

OHCA as a result of the proposed rules. The Agency anticipates that the proposed changes would result in approximately \$695,739 total federal dollars, \$174,261 state dollars. State share will be paid by the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS).

- F. A determination of whether implementation of the proposed rule will have an economic impact on any political subdivisions or require their cooperation in implementing or enforcing the rule:

The proposed rule will not have an economic impact on any political subdivision nor will it require the cooperation of any political subdivision in implementing or enforcing the rule.

- G. A determination of whether implementation of the proposed rule will have an adverse effect on small business as provided by the Oklahoma Small Business Regulatory Flexibility Act:

The proposed rule will not have an adverse effect on small businesses as provided by the Oklahoma Small Business Regulatory Flexibility Act.

- H. An explanation of the measures the agency has taken to minimize compliance costs and a determination of whether there are less costly or non-regulatory methods or less intrusive methods for achieving the purpose of the proposed rule:

Throughout the year Agency staff gather relevant information through stakeholder involvement and public forums in order to communicate the planned actions of the Agency concerning rulemaking, as well as other issues. While it is difficult to balance the needs of SoonerCare members with those of the various providers, the Agency proposes rules with each of these issues and interests considered.

- I. A determination of the effect of the proposed rule on the public health, safety and environment and, if the proposed rule is designed to reduce significant risks to the public health, safety and environment, an explanation of the nature of the risk and to what extent the proposed rule will reduce the risk:

The proposed rule should have a positive effect on the public health and safety of SoonerCare members ages 16 - 18 transitioning from a PRTF by ensuring that their transition to the community following their inpatient stay is successful and reduces the overall recidivism rate.

- J. A determination of any detrimental effect on the public health, safety and environment if the proposed rule is not implemented:

The Agency has determined that the proposed rules will have no detrimental effect on the public health, safety and environment if they are not implemented.

K. The date the rule impact statement was prepared and if modified, the date modified:

Prepared: March 7, 2017.  
Modified

## **RULE TEXT**

### **TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE**

#### **SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES**

##### **PART 113. LIVING CHOICE PROGRAM**

#### **317:30-5-1207. Benefits for members ages sixteen (16) through eighteen (18) in a psychiatric residential treatment facility**

(a) Living Choice program participants, ages sixteen (16) through eighteen (18), may receive a range of necessary home and community based services for one year after transitioning to the community from a psychiatric residential treatment facility (PRTF) setting. In order to be eligible for the Living Choice program if they meet the following criteria:

(1) Have been in a PRTF facility for 90 or more days during an episode of care;

(2) Meet level 4 criteria on the Individual Client Assessment;

(3) Show critical impairment score of 25 and above on the Problems Subscale or a score of 44 and below on the Functioning Subscales; and

(4) May be in the custody of Oklahoma's Child Welfare Agency or Juvenile Justice Agency.

(b) Services must be billed using the appropriate Healthcare Common Procedure Code System and must be medically necessary.

(c) All services must be necessary for the individual to live successfully in the community, must be documented in the individual care plan and require prior authorization.

(d) Services that may be provided to members transitioning from a PRTF are found in OAC 317:30-5-252.

(e) Reimbursement will be for a monthly care coordination payment upon successful submission of a claim for one or more of the covered services listed in OAC 317:30-5-252.