PUBLIC NOTICE

Pursuant to 42 C.F.R. § 447.205, the Oklahoma Health Care Authority (OHCA) is required to give public notice of any significant proposed change in methods and standards for setting payment rates for services in the SoonerCare program. The Oklahoma Health Care Authority (OHCA) is establishing a rate methodology for vaccines. Additionally, changes are being made due to increases to Quality of Care fees for long-term care facilities. This notice also serves to announce the new state fiscal year (SFY) 2019 Miller Trust monthly income eligibility requirements. As a result of the annual long-term care facilities rate recalculation, the Miller Trust eligibility amount effective July 1, 2018 will increase from \$4,422 to \$4,443 per month. Further, the Department of Mental Health and Substance Abuse Services (ODMHSAS) is proposing rate increases to freestanding psychiatric hospitals, psychologists in independent practice, and for psychotherapy services provided by licensed behavioral health professionals and licensure candidates in outpatient behavioral health clinics. Various rate increases are proposed by the Oklahoma Department of Health and Human Services (DHS) including: ADvantage rate increases, respite services rate increase, homemaker rate increase, Habilitation Training Specialist (HTS) and Intensive Personal Supports (IPS) rate increase, community living group home increase, and Developmental Disabilities Services rate increases. The proposed changes will be presented in two public meetings: the State Plan Amendment Rate Committee (SPARC) on June 26, 2018, at 1:00 PM. and the OHCA Board meeting on June 28, 2018, at 1:00 PM. Both meetings will be held at the OHCA offices located at 4345 N. Lincoln Blvd., OKC, OK 73105 in the OHCA Board Room.

Vaccine Rate Methodology, Effective July 1, 2018

Language is being added to the Oklahoma State Plan to establish that the rate methodology used for vaccines is the equivalent to Medicare Part B, ASP + 6%. When ASP is not available, an equivalent price is calculated using Wholesale Acquisition Cost (WAC). If no Medicare, ASP, or WAC pricing is available, then the price will be calculated based on invoice cost. This proposed change is budget neutral.

Nursing Facilities Rate Changes, Title XIX State Plan Amendment, Effective: July 1, 2018. The changes below are due to the required annual recalculation of the Quality of Care (QOC) fee and/or Direct Care Allocation mandated in the Oklahoma Medicaid State Plan.

Regular Nursing Facilities

The Quality of Care fee for REGULAR NURSING FACILITIES will be \$11.48 per patient day and the base rate component will be \$107.98 per patient day. Additionally, the pool amount for the "Direct Care" and "Other" components will be \$158,938,847 to account for the Quality of Care (QOC) fee increase and the reallocation of the direct care cost component per the State Plan. The estimated budget impact for SFY 2019 will be an increase in the total amount of \$\$3,031,836; with \$\$1,169,379 state share.

Nursing Facilities Serving Residents with Acquired Immune Deficiency Syndrome (AIDS)

The Quality of Care fee for NURSING FACILITIES SERVING RESIDENTS with AIDS will be \$11.48 per patient day and the AIDS rate will be \$201.32 per patient day. The estimated budget impact for SFY 2019 will be an increase in the total amount of \$\$6,603; with \$\$2,547 state share.

Department of Mental Health & Substance Abuse Services (ODMHSAS) Rate Increases, Effective: July 1, 2018.

Pursuant to Oklahoma HB3707, the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) is proposing rate increases for Freestanding Psychiatric Hospitals, Psychologists in Independent Practice, and Psychotherapy Provided in Outpatient Behavioral Health Clinics.

Freestanding Psychiatric Hospitals:

ODMHSAS is proposing a rate increase of three percent (3%) to the rate methodology in effect as of June 30, 2018 for freestanding psychiatric hospitals, also named acute level 1 Inpatient Psychiatric Hospitals. The estimated budget impact for SFY2019 is \$334,498 total; \$129,016 state share.

Psychologists in Independent Practice

ODMHSAS is proposing a rate increase of three percent (3%) for psychologists in independent practice. The proposed rate methodology will reimburse psychologists in independent practice at 88.58% of the CY2013 Medicare Physician Fee Schedule. The estimated budget impact for SFY2019 is \$212,195 total; \$81,844 state share.

Psychotherapy Provided by Licensed Behavioral Health Professionals & Licensure Candidates in Outpatient Behavioral Health Clinics

ODMHSAS is proposing a rate increase of three percent (3%) for psychotherapy services provided by licensed behavioral health professionals and behavioral health licensure Candidates in outpatient behavioral health clinics. The current rate methodology for psychotherapy provided in outpatient behavioral health clinics is to reimburse at payment rates which in the aggregate equal to 71.75% of the 2007 Medicare Physician Fee Schedule. With this proposed 3 percent (3%) increase, behavioral health clinics would continue to not exceed the upper limit of 71.75% of the 2007 Medicare Physician Fee Schedule. The estimated budget impact for SFY2019 is \$3,826,697 total; \$1,475,957 state share.

Oklahoma Department of Human Services (DHS) Rate Increases, Effective: Upon CMS Approval.

ADvantage Rate Increases

Pursuant to House Bill 3708, the Department of Human Services is increasing certain provider rates for the ADvantage program. Rate increases include, but are not limited to, a seven percent (7%) rate increase for ADvantage direct care, ADvantage case management, and State Plan Personal Care direct care. A rate increase will stabilize existing programs enabling provider agencies to provide salaries comparable to similar type service salaries. The estimated annual ADvantage budget impact is an increase in the total amount of \$10,186,341; \$3,832,101 state share. The estimated annual State Plan budget (includes both Personal Care and Skilled Nursing) is an increase in the total amount of \$397,352; \$149,484 state share.

Respite Services Rate Increase

The Department of Human Services is proposing to increase the rate paid for respite per diem services provided to persons enrolled in the Developmental Disabilities Services (DDS) waiver programs. The increased rate is developed by taking the increased per diem rates and adding \$22.00 to the rate. The proposed change is estimated to be budget neutral. Other services that are more expensive are provided when respite is not available. The increase in the rate will allow for better recruitment and retention of respite providers.

Homemaker Rate Increase

The Department of Human Services is proposing to increase the rate paid for homemaker services used to provide direct care services to persons enrolled in the Developmental Disabilities Services (DDS) waiver programs. The proposed increased rate is requested to assure that access to homemaker services is available and that providers are able to recruit and retain staff to deliver the care required by the service recipients. The increased rate will allow providers to increase the hourly wages and/or benefits paid to direct support staff who provide homemaker services. The current rate is \$12.80 per hour (\$3.20 per 15-minute); the new proposed rate is \$15.40 per hour (\$3.85 per 15-minute). The proposed change is estimated to be budget neutral. Other services that are more expensive are provided when homemaker was not available.

Habilitation Training Specialist (HTS) and Intensive Personal Supports (IPS) Rate Increase

The Department of Human Services is proposing to increase the rate paid for Habilitation Training Specialist (HTS) and Intensive Personal Supports (IPS) services used to provide direct care services to persons enrolled in the Developmental Disabilities Services (DDS) waiver programs. The proposed increased rates are requested to assure that access to HTS/IPS serves are available and that providers are able to recruit and retain staff to deliver the care required by the service recipients. The provider's cost for liability insurance, worker's compensation, health insurance, and the amount necessary to pay competitive wages have increased since the existing rate was established as supported by costs reports. The increased rate proposal represents an increase of seven percent (7%) to the current rate of \$15.12 per hour (\$3.78 per 15-minute); the new proposed rate is \$16.20 per hour (\$4.05 per 15-minute) and is required for the rate to remain competitive. The increased rate will allow providers to increase the hourly wages and/or benefits

paid to direct support staff who provide HTS/IPS services. The estimated annual budget impact is an increase in the amount of \$7,560,000 total dollars; \$2,844,072 state share.

Community Living Group Home Increase

The Department of Human Services is proposing to increase the per diem paid for 6-bed through 12-bed Community Living Group Home services for adults in order to continue to provide specialized residential services to recipients with a diagnosis of severe/profound intellectual disabilities and complex physical needs. To ensure the Community Living Group Home providers are able to recruit and retain staff to deliver services, Developmental Disabilities Services (DDS) proposes the following rates: \$166.75 for 6-bed; \$143.00 for 7-bed; \$138.25 for 8-bed; \$122.75 for 9-bed; \$120.75 for 10-bed; 109.75 for 11-bed; and \$108.50 for 12-bed. These increases are required to provide salary equity in direct care staff in comparison to similar type service salaries. The estimated annual budget impact is an increase in the amount of \$2,033,079 total dollars; \$764,844state share.

Developmental Disabilities Services Increases

The Department of Human Services is proposing to increase the rate paid for specific Developmental Disabilities Services (DDS) waiver services that have a fixed and uniform rate configuration. A rate increase will stabilize existing programs enabling providing agencies to provide salaries comparable to similar type service salaries. The estimated annual budget impact is an increase in the amount of \$12,300,816 total dollars; \$4,627,567 state share.

Persons wishing to present their views in writing or obtain copies of the proposed changes may do so at the following address: Sandra Puebla, Oklahoma Health Care Authority, 4345 N. Lincoln Blvd., Oklahoma City, Oklahoma, 73105, or by email at Sandra.Puebla@okhca.org. Copies of the proposed changes are available for public review at the OHCA by contacting Sandra Puebla by telephone 405-522-7270 or at the email address above. She will link callers with local agencies in each county where copies of the proposed changes are available for public review. Written and oral comments will be accepted during regular business hours by contacting Mrs. Puebla as indicated. Comments submitted will be available for review by the public Monday – Friday, 9:00 AM to 4:30 PM, at OHCA located at the above address. The proposed changes may also be viewed and receive written comments on the agency's website at www.okhca.org.