I/T/U Public Notice 2020-04

April 22nd, 2020

RE: Oklahoma Health Care Authority Proposed Rule, State Plan and Waiver Amendments

Dear Tribal Representative:

The purpose of this letter is to notify you of proposed changes that will be reviewed at the tribal consultation meeting on May 5th, 2020 at 11 a.m. OHCA invites you to attend this meeting via webinar, and we welcome any comments regarding the proposed changes. The agency is committed to active communication with tribal governments during the decision-making and priority-setting process to keep you apprised of all proposed changes.

Enclosed are summaries of the current proposed rules, state plan and waiver amendments for your review. The summaries describe the purpose of each change.

Please note that these are only proposed changes and have not yet taken effect. Before implementation, proposed changes must obtain budget authorization and approval by the OHCA board, and when applicable, federal and governor approval must be obtained.

Additionally, OHCA posts all proposed changes on the agency’s Policy Change Blog and the Native American Consultation Page. These public website pages are designed to give all constituents and stakeholders an opportunity to review and make comments regarding upcoming policy changes. To ensure that you stay informed of proposed policy changes, you may sign up for web alerts to be automatically notified when any new proposed policy changes are posted for comment.

OHCA values consultation with tribal governments and will provide your representatives a reasonable amount of time to respond to this notification. If you have any questions or comments about the proposed policy changes, please use the online comment system found on the Policy Change Blog and/or the Native American Consultation Page.

Sincerely,

Dana Miller
Director, Tribal Government Relations

Proposed Rule, State Plan, and Waiver Amendments

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Nursing Facility Rebasing and Quality Measure Update — For the rate period beginning July 1, 2020, a proposed amendment to the state plan and agency rules will recalculate the Quality of Care (QOC) fee for regular nursing facilities, nursing facilities serving residents with Acquired Immune Deficiency Syndrome (AIDS) and Regular Intermediate Care Facilities for Individuals with an Intellectual Disability (ICF/IID). The state will also make a one-time adjustment to the base rate to account for long-term care facility providers’ procurement of durable medical equipment, supplies, and appliances, including oxygen from the open market. Further revisions are proposed to enable the agency to update Pay-for-Performance (PFP) quality measures as the metrics are modified by Medicare.

Disaster Relief Authority Submissions — To promptly address the COVID-19 public health emergency, the Oklahoma Health Care Authority is providing notice that, if needed, the agency will submit emergency authority requests which will be processed by an amended public notice process, inclusive of tribal consultation.

Certified Community Behavioral Health (CCBH) Services – The proposed revisions replace the current process by which new rates for CCBHs are established. Currently, the rate for a new CCBH is based on the cost reporting year that ends June 30, using the facility’s most recent annual cost report data. Revisions clarify this process by adding a requirement for new CCBH to submit an initial 12-month cost report to set the provider-specific rate and allowing for retroactive adjustment to claims based on the provider-specific rate.

The Level of Care Criteria section has been updated - A packet of information used to conduct an initial evaluation is compiled and submitted to the Oklahoma Health Care Authority by DHS/DDS. Included in this packet of information is a medical evaluation. Currently, the medical evaluation must be current within 90 days of the requested waiver approval date, but that time period has been changed to within one year of requested waiver approval date. A cost limit has been added for Prevocational and Supported Employment services which allows an additional $5500 per member above the $23,131.00 individual cost limit. This additional limit will allow members to access individual placement opportunities with a Job Coach, Employment Training Specialist and stabilization. Estimate of Factor D for waiver years 4 and 5 has been updated based on Form 372 for FY18.