

CHAPTER 10. CENTER HOME DIVISION PROGRAM

SUBCHAPTER 3. MAINTENANCE CHARGES, PATIENT FUNDS AND ASSETS

770:10-3-1. Care and maintenance charges

- (a) Residents of all Oklahoma Veterans ~~Centers~~Homes shall be assessed a care and maintenance charge based upon the level of care and treatment provided to them and grant assistance or other payments received on the resident's behalf.
- (b) The claim of the State for such care and treatment shall constitute a valid indebtedness against any such resident and his estate and shall not be barred by any statute of limitations. At the death of the resident, this claim shall be allowed and paid as other lawful claims against the estate. Failure to pay care and maintenance charges assessed is basis for discharge.
- (c) Nursing care shall include room and board in the nursing care of the Veterans ~~Center~~Home and the full range of medical and nursing services offered in-house at the ~~Center~~Home. Medical and nursing services shall minimally include: staff physician services, nursing care, all required medications and their administration, all necessary x-ray and laboratory services which are performed inhouse by the ~~Center~~Home and all required therapy services performed in-house by the ~~Center~~Home . Nursing care does not include those medical or other services not included above which a resident requires or receives outside those provided within and by the ~~Center~~Home, personal discretionary use items such as tobacco or the purchase of street clothes. Services provided by and through contractors or other third parties may be excluded as not performed by the ~~Center~~Home regardless of the location of services. (d) Care and maintenance charges begin on the day of admission and cease on the day of discharge or death. Care and maintenance charges for partial months of residency are pro-rated, ~~except in the event of a resident's expiration at the Center~~. If the resident expires at the ~~Center~~Home, the care and maintenance charge will end~~end~~ on the ~~first day of the month in on~~ first day of the month in on which ~~an~~ the Oklahoma Veterans ~~Center~~Home resident expires.
- (e) Care and maintenance charges:
- (1) ~~Are~~are due and payable on the first of each month for services received in the preceding month, for all veterans who have been Oklahoma Veterans Homes residents prior to September 1, 2025. Absent exigent circumstances as approved by the Central Office, electronic payment shall be required to satisfy monthly care and maintenance charges.
 - (2) Are due and payable in advance, on the day of admission, on a prorata basis for the month of admission, and continuing in advance, on the first day of each month thereafter during the veteran's Oklahoma Veterans Home residency, for all veterans who become Oklahoma Veterans Homes residents on or after September 1, 2025.
 - (3) Absent exigent circumstances as approved by the Central Office, electronic payment shall be required to satisfy monthly care and maintenance charges.
- (f) Payments by debit card, credit card, and other means of electronic funds transfer shall be subject to the following terms:
- (1) **"Nationally recognized"** credit card means any instrument or device, whether known as a credit card, credit plate, charge plate, debit card, or by any other name, issued with or without fee by an issuer for the use of the cardholder in lieu of a check, as defined by 12A Oklahoma Statute § 3-104(f), in obtaining goods, services or anything else of value or for the use of the cardholder in obtaining such goods, services, or anything else of value on credit and which, in either case, is accepted by over one thousand merchants in this state. The Oklahoma Department of Veterans Affairs shall determine which nationally recognized credit cards will be accepted for any payments due and owing to the Department.
 - (2) Implementation of payment by nationally recognized credit card and other means of electronic funds transfer will be phased in over a period of time as determined by the Department.
 - (3) The Oklahoma Department of Veterans Affairs will verify that sufficient credit is available before acceptance of creditcard to insure that no loss of state revenue will occur by the use of such card.
 - (A) If a person is at a designated receiving point and credit is not available, the person then has the opportunity to pay by other methods accepted by the Department.
 - (B) If a person mails in the credit card information and credit is not available, the transaction will re-processed in accordance with any authorization executed by the cardholder. Until payment is completed, the transaction will be classified as one with no remittance and a bill will be forthcoming.
 - (4) The Oklahoma Department of Veterans Affairs may add an amount up to that equal to the amount of the processing, service, or convenience charges incurred, not to exceed four percent (4%) of the amount of such payment as a service charge for the acceptance of such nationally recognized card.
 - (5) Persons wishing to pay by credit card must be willing to submit normally required credit card information to the Department. This includes, but is not limited to: card type (VISA, etc.), card number, card expiration date, card holder name as shown, and three digit verification, security, or personal identification number (PIN). The Department assumes no liability for unauthorized use of this information.
 - (6) **"Electronic funds transfer"** means any transfer of funds, other than a transaction originated by check, draft, or similar paper instrument, which is initiated through an electronic terminal, telephonic instrument, or computer or magnetic tape so as to order, instruct, or authorize a financial institution to debit or credit an account.
 - (7) **"Electronic terminal"** means an electronic device, other than a telephone operated by a person, through which a person may initiate an electronic funds transfer.

- (8) **"Financial institution"** means a State or National bank, a State or Federal savings and loan association, a mutual savings bank, a State or Federal credit union, or any other person who, directly or indirectly, holds an account belonging to another person.
- (9) **"State"** means any State, territory, or possession of the United States, the District of Columbia, the Commonwealth of Puerto Rico, or any political subdivision of any of the foregoing.
- (g) Care and maintenance charges shall be computed to maximize pensions, compensation, and aid and attendance benefits from the United States Department of Veterans Affairs and any other federal or state assistance or payments to which the resident is entitled. Existing and prospective residents shall make application for all available benefits and assistance from federal and state government sources. Failure to do so shall result in denial of admission, discharge, or assessment of the monthly care and maintenance charge as the full cost of care, less per diem payments received from the United States Department of Veterans Affairs.
- (h) Each resident shall be expected to pay each month from his or her assets, resources, or income, amounts billed for care and maintenance by an Oklahoma Veterans ~~Center~~Home. A resident shall apply for assistance or benefits through Medicaid, if his or her available resources are insufficient to pay the entire cost of care or maintenance on a current basis, and the ~~Center~~Home is eligible for Medicaid reimbursements.
- (i) The full cost of care cited in establishment of the maintenance charge may be:
- (1) a uniform rate for two or more Oklahoma Veterans ~~Centers~~Homes, which does not exceed the average cost of care across all Oklahoma Veterans ~~Centers~~Homes, or
 - (2) a ~~Center~~Home specific rate that is calculated for a particular ~~Center~~Home by using financial data for the cost of care at that Oklahoma Veterans ~~Center~~Home
 - (3) the Calculated rates described in (1) and (2) above will be adjusted annually on Demceber 1 of each year, to include the annual cost of living adjustment (COLA) as announced by any federal benefit programs or grants including but not limited to Social Security and Veterans Affairs.
- (j) Effective on and after the date of certification of an Oklahoma Veterans ~~Center~~Home to receive Medicaid payments, the maintenance charge assessed to each newly admitted or re-admitted resident to a Medicaid certified ~~Center~~Home shall be calculated based on the full cost of care, less per diem payments received from the United States Department of Veterans Affairs. Maintenance charges may be assessed based on a daily or monthly rate. Further adjustments to maintenance charges may be made to conform to requirements for receipt of payments of per diem from the United States Department of Veterans Affairs, Medicare payments, or Medicaid payments.
- (k) Monthly maintenance charges for a resident whose most recent admission occurs prior to September 14, 2018 shall be calculated as follows:
- (1) Computation of monthly maintenance charges shall be based on countable income, provided that the maintenance charge shall not exceed the full cost of care minus any per diem payment received from the United States Department of Veterans Affairs.
 - (A) The charge for nursing care to residents who contribute to the support of legal dependents shall be fifty percent (50%) of countable income subject to reduction for health insurance premiums and irrevocable burial policy premiums paid or payable. Notwithstanding any other language under this rule, a resident shall retain not less than \$150.00 per month of total monthly income which may be allocated from the income counted as available to the resident and need not be charged against the income allocated to the non-resident spouse. (B) The charge for nursing care to residents who do not contribute to the support of legal dependents shall be eighty-five percent (85%) of countable income subject to reduction for health insurance premiums and irrevocable burial policy premiums paid or payable. Notwithstanding any other language under this rule, a resident shall retain not less than \$150.00 per month of total monthly income.
 - (C) When two residents are married and both reside at a Veterans ~~Center~~Home, the maintenance charge for each will be assessed at 50% of the combined countable income subject to reduction for health insurance premiums and irrevocable burial policy premiums paid or payable. Notwithstanding any other language under this rule, when two residents are married to each other and both reside at the ~~Center~~Home, each may retain not less than \$150.00 per month of total monthly income.
 - (2) When the care and maintenance charge assessed any resident does not result in compliance with all statutory requirements, the percentage of charge against income will be increased or decreased accordingly for compliance.
 - (l) Monthly maintenance charges for a resident whose most recent admission occurs on or after September 14, 2018 but prior to the date of certification of the ~~Center~~ Home to receive Medicaid payments shall be calculated as follows:
 - (1) Except as specifically authorized herein, the monthly maintenance charge for residents of the Oklahoma Veterans ~~Centers~~Home shall be the full cost of care, less per diem payments received from the United States Department of Veterans Affairs.
 - (2) Residents awarded pension as defined by 38 CFR with aid and attendance pursuant to 38 CFR §3.352 from the United States Department of Veterans Affairs shall pay a monthly maintenance charge that is the least of:
 - (A) Full cost of care, less per diem payments received from the United States Department of Veterans Affairs;
 - or (B) Eighty-five (85%) percent of countable income subject to reduction for health insurance premiums and

irrevocable burial policy premium paid upon substantiation of coverage in force and premiums payable.

Notwithstanding any other language under this rule, a resident shall retain not less than \$150.00 per month of total monthly income; or

(C) If contributing to support for legal dependents, fifty percent (50%) of countable income subject to reduction for health insurance premiums and irrevocable burial policy premiums or payable. Notwithstanding any other language under this rule, a resident shall retain not less than \$150.00 per month of total monthly income which may be allocated from the income counted as available to the resident and need not be charged against the income allocated to the non-resident spouse.

(3) Admission of a surviving spouse, widow widower, or a Veteran that does not meet the United States Department of Veterans Affairs criteria as serving during a period of war as referenced in 38 U.S.C., Section 1521, may be conditioned upon ability to pay.

(4) When the care and maintenance charge assessed any resident does not result in compliance with all statutory requirements, the percentage of charge against income will be increased or decreased accordingly for compliance.

(m) The following shall govern evaluation of countable income under paragraphs (k) and (l), above:

(1) Income will be rounded to the nearest whole dollar when computing care and maintenance charges.

(2) Countable income shall include income of the resident, plus that of resident's legal dependents (if any) in the following categories:

(A) Gross income, as defined by 26 U.S.C. §61,

(B) Income earned internationally for the accounting period evaluated, whether or not reportable for income tax purposes.

(C) To the extent not included in subparagraph (m)(2)(A), all compensation, disability, and other amounts payable from private, state or federal benefit programs or grants, including but not limited to social security, department of agriculture, veterans affairs, or Native American tribes or related entities.

(D) Attributable aid and attendance, which shall consist of the difference between a partial award of aid and attendance and the maximum aid and attendance awardable through the United States Department of Veterans Affairs.

(E) Payments in compensation or reimbursement to or on behalf of a resident as the insured under long-term care insurance policies.

(3) Income or benefits paid shall be included without reduction for offsets, recoupment, judgments, past overpayments, debt repayment, automatic deductions, or withholding.

(4) Countable income shall exclude income earned by active employment of a working spouse or other legal dependent. (n)

The following are applicable only to calculation of maintenance charges under paragraphs (k) and (l) above:

(1) Dependents, for purposes of this rule and subsequent chapters, shall be legal spouse and minor children under the age of eighteen (18) or disabled children who became disabled prior to their eighteenth birthday or legal children through the age of twenty-one (21) years who are enrolled in school full-time.

(2) Health insurance premiums shall include premiums paid for general health, hospitalization, dental, vision, and prescription coverages for the resident, including but not limited to Medicare supplements. Health insurance premiums shall also include one half (1/2) of premiums paid for the same coverages if the resident and one or more other family members share benefits as co-insureds on joint or family coverage. Copays or deductibles shall not be considered premiums paid.

(3) Irrevocable burial policy premiums, as used in this rule, shall include premiums paid for irrevocable burial policies that provide for the funeral, burial, or final disposition of a resident with a death benefit not to exceed Ten Thousand Dollars (\$10,000.00).

(4) The reduction in care and maintenance charges for health insurance premiums and irrevocable burial policy premiums, when applicable, shall not be available retroactively, and shall apply prospectively from the date of receipt of documentation substantiating insurance coverage and premiums payable. Annual documentation substantiating coverage and premiums shall be required and if not furnished reductions may be discontinued until such time as documentation is received.

(o) Any resident, his/her guardian, spouse, or legally appointed agent, who knowingly withholds or falsifies income, expense, or resource data or who withholds payment of assessed care and maintenance charges may subject the resident to discharge and forfeiture of state or federal benefits and may subject the resident, or other parties responsible, to legal action related to the recovery of valid indebtedness to the State of Oklahoma. Failure to timely or accurately report income or misrepresentation of income may also result in one or more of the following: assessment of maintenance charges at the full cost of care, loss of full or partial benefit from state or federal sources, recoupment actions, or offset against future benefits.

(p) Residents on leave from a ~~Center~~ Home for outside hospitalization or medical care shall not be charged for care and maintenance after their fourth (4th) day of absence. Residents may be discharged during absences for hospitalization and readmitted in accordance with applicable regulatory priorities, in accordance with agency policy after exhaustion of days authorized for payment of per diem by the United States Department of Veterans Affairs.

(q) Residents on leave from a ~~Center~~Home for personal reasons of their own volition shall continue to be charged for care and maintenance for such period of their leave that their bed is being held open for them. Charges billable under this paragraph shall not be constrained by the income limitations on maintenance charges set forth in paragraphs (k) and (l) above. In the event that a resident incurs voluntary absences that exceed annual therapy days authorized for payment of per diem by the United States Department of Veterans Affairs, the ~~Center~~Home shall:

(1) Reflect any and all loss of per diem payments by billing the resident in the amount of the forfeited per diem on the resident's monthly statement, or

(2) Discharge and re-admit the resident in accordance with the ~~Center's~~Home's admission priorities, including but not limited to classification as discharge against medical advice, if applicable.

(r) Any resident of an Oklahoma Veterans ~~Center~~Home or his/her guardian may seek a reduction or waiver of care and maintenance charges for (1) financial hardship resulting from unreimbursed unusual medical expenses of the veteran resident, spouse or legal dependents or (2) financial hardship on residents with dependent children. Requests for reduction or waiver of care and maintenance charges for other reasons will not be considered. Dependents, for purposes of this section, shall be defined as set forth in subparagraph (n)(1), above. The procedure and process for the filing and adjudication of appeals for reduction or waiver of care and maintenance charges is as follows:

(1) The request for reduction or waiver shall be made in writing to the Administrator of the ~~Center~~Home where the veteran is a resident, by the veteran, a responsible family member of the veteran, and/or the veteran's guardian.

(2) The appealing party shall complete the appropriate Department forms, supply the ~~Center~~Home Administrator with pertinent financial data and shall sign said form attesting to the accuracy of the information recorded thereon.

(3) The Administrator shall submit a letter to the Executive Director of the Oklahoma Department of Veterans Affairs notifying him or her of the appeal request and stating the Administrator's recommendation in the matter.

Additionally, the Administrator shall attach copies of all information which describe the appealing party's financial status.

(4) The Executive Director will determine whether the appeals requests are in conformity with policy for presentation to the Oklahoma Veterans Commission and shall make a recommendation on the appeal request and forward the request to the Commission.

(5) The Commission shall consider all appeals information as presented by the Executive Director and then shall render a decision on said appeals by a majority vote.

(6) The Executive Director shall notify the appealing parties of the Commission's decisions on their appeals through the appropriate ~~Center~~Home Administrator within five (5) working days following the Commission action, along with any appeal procedures.

(7) Adverse decisions may be appealed to an independent Administrative Hearing Officer with the Oklahoma Department of Health. The decision of the Administrative Hearing Officer will be final.