



STATE OF OKLAHOMA
OKLAHOMA HEALTH CARE AUTHORITY

I/T/U Public Notice 2012-01

March 1, 2012

RE: Oklahoma Health Care Authority (OHCA) Proposed Rule Changes for State Health Programs

Dear Tribal Representative:

The purpose of this letter is to give you notice of proposed rule changes that will be reviewed at the Medical Advisory Committee (MAC) meeting held on March 7th, 2012. As you are aware, there will also be an in-person tribal consultation at OHCA regarding these rules on March 6th. OHCA is committed to active communication with Tribal Governments during the OHCA decision-making and priority-setting process and therefore keeps you apprised of all proposed rule changes.

Enclosed is a summary of the currently proposed rule changes for your review. The summary describes the purpose of each rule change and the anticipated impact on those affected. To view the complete proposal for the March 7th MAC, you can visit www.okhca.org/macagenda.

Please note that these are only proposed rule changes and have not yet taken effect. Before implementation, new rule changes must obtain budget authorization, federal approval (if applicable), OHCA Board approval, and the governor's approval.

Additionally, OHCA is now posting all proposed rule changes on the Agency's public website www.okhca.org/rule-changes. The proposed rule changes page is designed to give all constituents and stakeholders an opportunity to review and make comments regarding upcoming rule changes.

To ensure that you stay apprised of proposed rule changes, you may sign up for web alerts for the page and you will automatically be notified when any new rules 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 rule changes, please use the online comment system found at www.okhca.org/rule-changes. This system allows us to efficiently respond to comments and inquiries regarding our rules.

Sincerely,

A handwritten signature in cursive script, appearing to read "Dana Miller".

Dana Miller
Indian Health Director

OHCA Initiated

11-21 Living Choice Re-enrollment— OHCA rules for the Living Choice demonstration program are revised to clarify that individuals residing in a nursing facility or ICF/MR in lieu of incarceration are not eligible for the Living Choice program. Rules are also revised to add that Living Choice members who have completed their full 365 days of eligibility and are re-institutionalized for 90 consecutive days are eligible to re-apply for an additional 365 days of service.

OKDHS Initiated

11-39 Advantage Waiver Annual Clean-up Revisions— OHCA rules for the ADvantage Waiver are revised to remove language requiring transportation services to be provided by Adult Day Health Centers, provide clarification of family support services versus waiver services, add language clarifying "client support moderate risk", "client support high risk" and addition of language describing "client support low risk" and "environmental low risk". Policy is also revised to add eligibility language clarifying member reauthorization, recertification and redetermination, clarification regarding the member's level of need in order to be eligible for waiver services, clarification about the types of living arrangements allowable for ADvantage members, and clarification regarding the member's health, safety and welfare. Additionally, policy is revised to remove language allowing a financial eligibility assessment for individuals who are not applying for waiver services, add clarification regarding when a new level of care determination is required, removal of language requiring recertification of the member by a case manager and requiring an OKDHS nurse to provide medical certification at a minimum, annually. Lastly, changes include the addition of language regarding plan of care documentation when more than one member of a household receives waiver services, clarification regarding the use of family members as paid providers, clarification of conditions requiring a member's service plan goals, the removal of policy regarding the expedited eligibility determination process (SPEED) and other minor clean-up revisions.