

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: OKLAHOMA

METHODS AND STANDARDS FOR ESTABLISHING PAY RATES – OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

Except for a nominal recipient copayment (as specified in Attachment 4.18 of this State plan), if applicable, the Medicare agency uses the following general method for payment.

1. Payments are limited to State Plan rates and payment methodologies for the groups and payments listed below and designated with the letters "SP".

For specific Medicare services which are not otherwise covered by this State Plan, the Medicaid agency uses Medicare payment rates unless a special rate or method is set out on Page 3 in item 1 & 2 of this attachment (see 3. below).

2. Payments are up to the full amount of the Medicare rate for the groups and payments listed below, and designated with the letters "MR".
3. Payments are up to the amount of a special rate, or according to a special method, described on Page 3 in item ___ of this attachment, for those groups and payments listed below and designated with the letters "NR".
4. Any exceptions to the general methods used for a particular group or payment are specified on Page 3 in item ___ of this attachment (see 3. above).

STATE	<u>Oklahoma</u>	A
DATE REC'D.	<u>9-1-05</u>	
DATE APPROV'D.	<u>10-21-05</u>	
DATE EFF.	<u>8-1-05</u>	
HCPA 179	<u>05-04</u>	

02-08

Revised 08-01-05

TN# 05-04 Approval Date 10-21-05 Effective Date 8-1-05
Supersedes
TN# 02-08

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: OKLAHOMA

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Claims

QMBs:	Part A <u>MR/NR</u> Deductibles	<u>MR/NR</u>	Coinsurance
	Part B <u>MR/NR</u> Deductibles	<u>MR/NR</u>	Coinsurance

Other Medicaid Recipients	Part A <u>MR/NR</u> Deductibles	<u>MR/NR</u>	Coinsurance
	Part B <u>MR/NR</u> Deductibles	<u>MR/NR</u>	Coinsurance

Dual Eligible (QMB Plus):	Part A <u>MR/NR</u> Deductibles	<u>MR/NR</u>	Coinsurance
	Part B <u>MR/NR</u> Deductibles	<u>MR/NR</u>	Coinsurance

State: Oklahoma
Date Received: 28 March, 2013
Date Approved: 5 August, 2014
Date Effective: 1 January, 2013
Transmittal Number: 13-04

Revised 01-01-13

TN# 13-04 Approval Date 8/5/14 Effective Date 1/1/13
Supersedes
TN# 05-04

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER TYPES OF CARE

Payment of Deductible and Coinsurance for Medicare Part A and Part B Claims

1. Payment of Deductible and Coinsurance for Medicare Part A Claims:

The Medicaid agency uses the following method for specific Medicare hospital services which are not specifically addressed elsewhere in the State Plan:

Deductible – 75%
Coinsurance – 25%

Total payments from all sources will not be less than the Medicaid established rate of payment per claim.

For crossover claims on services that were rendered on or after January 1, 2016, payment for skilled nursing facility services will be made at 20 percent of the Medicare rate for coinsurance and deductible, if any.

For all other services, payment is made at a rate of 100 percent of the deductible and 46.25 percent of the coinsurance.

2. Payment of Deductible and Coinsurance for Medicare Part B Claims:

The Medicaid agency uses the following method for specific Medicare medical services and dialysis services which are not specifically addressed elsewhere in the State Plan:

Deductible – 75%
Coinsurance – 25%

Total payments from all sources will not be less than the Medicaid established rate of payment per claim.

Excluding durable medical equipment and transportation, payment is made at a rate of 100 percent of the deductible and 46.25 percent of the coinsurance for all other services.

Revised 01-01-16

TN# 16-13 Approval Date 04/20/2016 Effective Date 01/01/2016
Supersedes
TN# 15-10

State: Oklahoma
Date Received: January 26, 2016
Date Approved: April 20, 2016
Date Effective: January 1, 2016