

Revision: HCFA-PM-93-1 (BPD)
January 1993

Corrected
ATTACHMENT 4.39-A
Page 1

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: OKLAHOMA

CATEGORICAL DETERMINATIONS

A. Categorical determinations regarding need of nursing facility (NF) services

The State mental health or mental retardation authority may make an advance group determination that NF services are needed in the following categories:

1. **Provisional Admission in Cases of Delirium.** Any person with mental illness, mental retardation or a related condition, as long as that person is not a danger to self and/or others, may be admitted to a Medicaid-certified nursing facility. If the individual is experiencing delirium, a screening will be done immediately after the delirium clears and completed within 7-9 days.
2. **Provisional Admission in Emergency Situations.** Any person with mental illness, mental retardation or a related condition, as long as that person is not a danger to self and/or others, may be admitted to a Medicaid-certified nursing facility for a period not to exceed 7 days pending further assessment in emergency situations requiring protective services. The request for screening will be made immediately upon admission to the NF and completed within 7-9 days.
3. **Respite Care Admission.** Any person with mental illness, mental retardation or a related condition, as long as that person is not a danger to self and/or others, may be admitted to a Medicaid-certified nursing facility to provide respite to in-home caregivers to whom the individual is expected to return following the brief NF stay. Respite care may be granted for up to 15 consecutive days per stay, not to exceed 30 days per calendar year. In rare instances where 15 consecutive days is insufficient, such as the illness of the caregiver, a request for screening will be made within 7-9 days following admission.

STATE	<i>Oklahoma</i>	A
DATE RECD	<i>10-12-94</i>	
DATE APPVD	<i>01-23-96</i>	
DATE EFF	<i>07-01-94</i>	
HCFA 179	<i>94-19</i>	

New 07-01-94

TN No. *94-19*

Supersedes

Approval Date *01/23/96*

Effective Date *07/01/94*

TN No.

SUPERSEDES: NONE - NEW PAGE

Revision: HCFA-PM-93-1 (BPD)
January 1993

Corrected
ATTACHMENT 4.39-A
Page 2

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: OKLAHOMA

CATEGORICAL DETERMINATIONS

B. Categorical determinations regarding need of specialized services (SS).

The State mental health and mental retardation authorities may make categorical determinations that specialized services are not needed in the following categories. In all other cases, a determination that specialized services are needed must be based on a more extensive individualized evaluation.

1. **Provisional Admission in Cases of Delirium.** Any person with mental illness, mental retardation or a related condition, as long as that person is not a danger to self and/or others, may be admitted to a Medicaid-certified nursing facility. If the individual is experiencing delirium, a screening will be done immediately after the delirium clears and completed within 7-9 days.
2. **Provisional Admission in Emergency Situations.** Any person with mental illness, mental retardation or a related condition, as long as that person is not a danger to self and/or others, may be admitted to a Medicaid-certified nursing facility for a period not to exceed 7-9 days pending further assessment in emergency situations requiring protective services. The request for screening will be made immediately upon admission to the NF and completed within 7-9 days.
3. **Respite Care Admission.** Any person with mental illness, mental retardation or a related condition, as long as that person is not a danger to self and/or others, may be admitted to a Medicaid-certified nursing facility to provide respite to in-home caregivers to whom the individual is expected to return following the brief NF stay. Respite care may be granted for up to 15 consecutive days per stay, not to exceed 30 days per calendar year. In rare instances where 15 consecutive days is insufficient, such as the illness of the caregiver, a request for screening will be made within 7-9 days following admission.

STATE	<u>Oklahoma</u>	
DATE REVIS	<u>10-12-94</u>	
DATE APPROV	<u>01-23-96</u>	A
DATE EFF	<u>07-01-94</u>	
HCFA 179	<u>94-19</u>	

New 07-01-94

TN No. 94-19
Supersedes Approval Date 01/23/96 Effective Date 07/01/94
TN No. **SUPERSEDES: NONE - NEW PAGE**