

PUBLIC NOTICE

Pursuant to Section 440.386 and Section 447.205 of Title 42 of the Code of Federal Regulations, the Oklahoma Health Care Authority (OHCA) is required to provide public notice of its intent to submit a state plan amendment (SPA) to substantially modify the existing Adult Expansion Alternative Benefit Plan (ABP). The notice was sent to tribal providers of Indian Health Service, tribal government(s), and urban Indian health program (I/T/U) to inform them of the proposal on April 24, 2021 and June 22, 2021. The proposed changes were presented at the Tribal Consultation meetings on May 4, 2021 and will be presented on July 6, 2021 at 11AM via teleconference.

Adult Expansion ABP Benefits Update; Effective: October 1, 2021; contingent upon CMS approval.

The ABP provides benefits to Expansion Adults, as described in 42 CFR 435.119. The proposed service changes are to the benefit package within the Adult Expansion ABP. The Oklahoma Health Care Authority (OHCA) seeks to remove section 1945 health homes from the ABP and the State Plan as the program is terminating on September 30, 2021. Additionally, hospice services are an essential health benefit for expansion adults and it is currently substituted with health homes. The OHCA will add hospice services as a provided benefit within the ABP for expansion adults including an initial two 90-day periods when the member's life expectancy is six months or less and the member and/or family has elected hospice benefits, then for an unlimited number of 60-day periods during the remainder of the member's lifetime. Hospice care must be prior authorized and includes nursing care, physician services, medical equipment and supplies, drugs for symptom control and pain relief, home health aide and personal care, physical, occupational and/or speech therapy, medical social services, dietary counseling and grief and bereavement counseling to the member and/or family. With the exception of payment for physician services, reimbursement for hospice care will be made at one (1) of five (5) predetermined rates for each day in which an individual receives the respective type and intensity of the services furnished under the care of the hospice service provider. The levels of care are as follows: routine hospice care, continuous home care, inpatient respite care, and general inpatient care. The rates for hospice services are set by applying the full Medicaid daily rate, published annually by CMS for hospice services, then applying any applicable rate reduction percentages to the full Medicaid daily rate. The aforementioned rate methodology is used by the State unless the rate is less than the CMS established floor; in which case, the floor rates are calculated by taking the Medicaid hospice rates provided by CMS, applying the wage index to the wage component subject to index, and adding the non-weighted amount. A Service Intensity Add-On (SIA) payment will be made for a visit by a registered nurse (RN) or social worker when provided in the last seven (7) days of a member's life. Hospice services will be reimbursed pursuant to the established rate methodology for providers of Indian Health Services. Reimbursement for an independent physician's direct patient services is made in accordance with the usual SoonerCare fee schedule reimbursement methodology for physician services.

The estimated budget impact for SFY2022 will be an increase in the total amount of \$584,135.13; with \$58,413.51 in state share.

Adult Expansion ABP Benefits Update & Alternative Non-Pharmacological Treatments for Pain Management: Effective January 1, 2022; contingent upon CMS approval.

Per legislative directive from the 58th Oklahoma Legislature, the OHCA seeks to add coverage and reimbursement for chiropractor services and physical therapy services for the treatment of pain management in an effort to reduce or prevent the use of opioid medications for SoonerCare adult members, including Expansion Adults. Alternative non-pharmacological treatments for pain management services will include 12 hours, or 48 units (one unit of service is 15 minutes), of physical therapy provided by a physical therapist or physical therapy assistant. Members will also be eligible to receive 12 chiropractic visits.

Reimbursement for alternative non-pharmacological treatments for pain management services will follow the Agency's existing rate methodology for physical therapist and physical therapy assistants. Physical therapy services will be reimbursed pursuant to the established rate methodology for Indian Health Services when provided in Indian Health Service, tribal government(s), or urban Indian health program (I/T/U) facilities. Physical therapy services provided within Federally Qualified Health Centers (FQHC), and Rural Health Clinics (RHC) will receive the fee-for-service rate. Chiropractors will be reimbursed pursuant to the existing methodology for physician services which are updated annually, per the current State Plan; the fee-for-service rate will also apply to services provided in I/T/U facilities, FQHCs, and RHCs. Coverage of newly added services, as described, will also be added to the ABP.

The estimated budget impact for State Fiscal Year (SFY) 2022 is \$13,152,504 with \$4,228,530 state share. The estimated budget impact for SFY2023 is \$26,305,009 with \$8,457,060 state share.

Interested persons may visit oklahoma.gov/ohca/policies-and-rules/public-notice to view a copy of the public notice(s) and visit oklahoma.gov/ohca/policies-and-rules/proposed-changes to view a copy of the proposed state plan amendment and a link to provide public comments on the proposal. Persons wishing to present their views in writing or obtain copies of the proposed state plan amendments may do so via mail by writing to: Oklahoma Health Care Authority, Federal Authorities Unit, 4345 N. Lincoln Blvd., Oklahoma City, Oklahoma 73105, or by email at federal.authorities@okhca.org. Written comments or requests for copies of the proposed state plan amendments will be accepted by contacting OHCA as indicated. Comments submitted through the OHCA policy blog will be available for review online at oklahoma.gov/ohca/policies-and-rules/proposed-changes. Other written comments are available upon request at federal.authorities@okhca.org. Comments will be accepted from July 6 through August 5, 2021.

The Agency solicited input from Oklahoma's tribal representatives regarding the proposed changes herein in compliance with section 5006(e) of the American Recovery and Reinvestment Act of 2009 and in accordance with the Oklahoma State Plan tribal consultation policy. The Agency also assures that individuals under twenty-one (21) years of age, pursuant to EPSDT federal regulations, Section 440.345 of Title 42 of the Code of Federal Regulations and 1905(r) of the Social Security Act, may receive additional services if determined medically necessary.