

Kevin Corbett | Chief Executive Officer

J. Kevin Stitt | Governor

OHCA 2022-15

August 16, 2022

RE: Policy Revisions and Program Updates – Effective Sept. 12, 2022

Dear Provider,

The Oklahoma Health Care Authority will implement policy changes promulgated through the 2022 legislative session per the Oklahoma Administrative Procedures Act. All policy changes will be effective Sept. 12, 2022, and will be posted on the policy website on that date. In the interim, summaries of the changes are listed below.

Please note that the Oklahoma Administrative Code links identified below **will be updated** with the new policy changes on Sept. 12. If applicable, please forward this letter to your administrative, billing, and compliance departments.

These rule changes were posted to the <u>OHCA Proposed Policy Changes</u> page from Dec. 15, 2021, through Jan. 18, 2022, or Feb. 1, 2022, through Mar. 3, 2022, pursuant to the permanent rulemaking process.

Effective Sept. 12, 2022:

Lodging and Meals Revisions

The revisions outline who can request lodging and meal services and when the request must be submitted. A clause addressing emergency situations to override the time frame was added. The revisions outline the information that must be submitted with each request. Further revisions define meal requirements and what constitutes a meal. Additional revisions outline how lodging providers and members authorize the member's length of stay. Authorization for length of stay includes having the lodging provider create a document/attestation that lists all the dates the member stayed in the facility and requires the member's review and signature of the document/attestation before they check out of the lodging provider's facility. Furthermore, the revisions specify that it is the responsibility of both the lodging provider and the member to ensure the document/attestation is verified and signed. Additional changes add descriptions and processes for incidental charges and complaints. (Reference OAC 317:30-3-92).







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Private Duty Nursing (PDN) Revisions

The revisions update how assessments for PDN services are conducted. Additional revisions clarify who can sign the PDN treatment plan. (Reference OAC <u>317:30-5-555</u>, <u>317:30-5-557</u>, <u>317:30-5-558</u>, <u>317:30-5-560.2</u>).

Dental Revisions

The revisions update the certification requirements for primary care physicians to provide fluoride varnish during a well-child health screening. Additionally, the revisions update the timeframe for dental prophylaxis from once every one hundred and eighty-four (184) days to once every six (6) months. Finally, language regarding coverage for periodontal maintenance is added. (Reference OAC 317:30-3-65.8, 317:30-5-696, and 317:30-5-698).

Obstetric (OB) Ultrasound Coverage

The revisions amend policy to provide coverage of obstetric (OB) ultrasounds in the emergency room (ER) setting when medically necessary and without prior authorization. (Reference OAC <u>317:30-5-22</u>).

Laboratory Services

The revisions remove outdated language referencing "custom panels particular to the ordering provider" from the list of non-compensable laboratory services to reflect current business practices. (Reference OAC <u>317:30-5-20</u> and <u>317:30-5-20.1</u>).

OHCA encourages you to review each rule change in its entirety. If you have any questions regarding these rule changes, please call the OHCA provider helpline at 800-522-0114.

Thank you for the services you provide to SoonerCare members.

Sincerely,

Traylor Rains

State Medicaid Director



Admin: 405-522-7300

Helpline: 800-987-7767