



STATE OF OKLAHOMA
OKLAHOMA HEALTH CARE AUTHORITY

I/T/U Public Notice 2019-05

June 5, 2019

RE: Oklahoma Health Care Authority (OHCA) Proposed Rule, State Plan, and Waiver Amendments

Dear Tribal Representative:

The purpose of this letter is to give you notice of proposed changes that will be reviewed at the tribal consultation meeting held on June 18, 2019 at 11:00 a.m. in the Oklahoma Health Care Authority (OHCA) Charles Ed McFall Board Room located at 4345 N Lincoln, Oklahoma City, OK. The OHCA invites you to attend this meeting, and we welcome any comments regarding the proposed changes. The agency is committed to active communication with tribal governments during the decision-making and priority-setting process and therefore keeps you apprised of all proposed changes.

Enclosed are summaries of the current proposed rules, state plans, and waiver amendments for your review. The summaries describe the purpose of each change.

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

Additionally, the OHCA posts all proposed changes on the agency's [Policy Change Blog](#) and the [Native American Consultation Page](#). This public website is designed to give all constituents and stakeholders an opportunity to review and make comments regarding upcoming policy changes. To ensure that you stay informed of proposed policy changes, you may sign up for web alerts to be automatically notified when any new proposed policy changes are posted for comment.

The 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 policy changes, please use the online comment system found on the [Policy Change Blog](#) and/or the [Native American Consultation Page](#).

Sincerely,

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Dana Miller
Director, Tribal Government Relations

Proposed Rule, State Plan, and Waiver Amendments

Telehealth Services — The proposed policy will revise language regarding parental consent and primary care provider notification for telehealth services provided in school settings. Additional policy changes include revisions regarding confidentiality of protected health information and adding language that defines telehealth program coverage and limitations. Policy revisions are needed to comply with Senate Bill 575 (SB 575) which amended Oklahoma Statutes (O.S.) 25, Sections 2004 and 2005.

Nursing Facility Rate Changes — For the rate period beginning July 1, 2019, a proposed amendment to the state plan will recalculate the Quality of Care fee for regular nursing facilities and nursing facilities serving residents with Acquired Immune Deficiency Syndrome.

Therapeutic Foster Care (TFC) / Intensive Treatment Family Care (ITFC) Policy Revisions – The Oklahoma Department of Human Services (DHS) seeks to increase the established rate for the Qualified Behavioral Health Aide (QBHA) / Treatment Parent Specialist (TPS) who provides services to children in TFC. Additionally, the Oklahoma DHS seeks to establish a rate for the QBHA/TPS who provides services to children in ITFC. The QBHA/TPS serves as an integral member of the TFC/ITFC team who provides high levels of care for the child, participates in the development and implementation of interventions, transports the child to therapy, documents interventions, and helps the child practice learned skills. The proposed rate will be higher for the QBHA/TPS providing services to children in ITFC, as children served in ITFC often present with more complex behavioral health needs that require more frequent intervention by the QBHA/TPS. Further, the State is proposing to increase the rate in an effort to increase access to services for eligible children, as medically necessary.

Step Therapy Exception — The OHCA is considering regulatory changes in order to comply with Senate Bill 509 (SB509), which was signed into law by the Governor on April 16, 2019. The new law requires OHCA (and all Oklahoma insurance carriers) to revise current step therapy protocols for medications approved by the Drug Utilization Review (DUR) Board to provide for exceptions to the drug step therapy protocol in cases when: the required prescribed drug will likely cause an adverse reaction or harm; the prescription drug will likely be ineffective; the patient has already tried the prescription drug and discontinued use; or the prescription drug is not in the best interest of the patient, based on medical necessity; or the patient is stable on another prescription drug.

Insurers (including OHCA) must respond to requests for exceptions or appeals within 72 hours, absent exigent circumstances exist, in which case they must respond within 24 hours. Patients may appeal any exception decision within these same time constraints. The new legislation becomes effective on November 1, 2019; however, implementation of policy will take effect on January 1, 2020.

Removing Barriers for Medication Assisted Treatment — The Oklahoma Health Care Authority (OHCA) is continuing to engage in an effort to combat the prescription drug abuse epidemic in Oklahoma. Medication Assisted Treatment (MAT) is the use of medications with counseling and behavioral therapies to treat substance use disorders and prevent opioid overdose. The proposed revisions will reduce barriers for Medication Assisted Treatment (MAT) by removing the prior authorization and copays. These revisions will exclude select products from the prescription limits and amend the cost sharing language to include prescriptions with \$0 copay.

ADvantage and State Plan Personal Care in Fiscal Year 2020 — The First Regular Session of the Fifty Seventh Oklahoma Legislature has mandated a four percent (4%) rate increase for *ADvantage* and State Plan Personal Care direct care services, and *ADvantage* case management, adult day health and assisted living services. Additionally, *ADvantage* skilled nursing and therapy services are also

being increased by the same amount (4%) so as to be in keeping with these same services provided through DHS Developmental Disabilities Services waivers who often share the same provider pool.

A waiver amendment will be required for the above rate increases as these amounts exceed the rates currently contained within the waiver for Fiscal Year 2020. The waiver amendment will also include a legislatively mandated minimum authorization of 200 case management units for every new *ADvantage* member for the initial service plan year.

All rate increases and authorization limits will become effective upon approval by CMS.