



STATE OF OKLAHOMA
OKLAHOMA HEALTH CARE AUTHORITY

OHCA 2016-16

July 29, 2016

RE: Policy Revisions and Program Updates – Effective September 1, 2016

Dear Provider,

This letter is to inform you of the Oklahoma Health Care Authority's (OHCA) policy changes promulgated through the 2016 legislative session per the Administrative Procedures Act. All policy changes are effective September 1, 2016, and will be posted to the [policy website](#) on that date. In the interim, comprehensive summaries of the changes are listed below. Please note, the Oklahoma Administrative Code (OAC) links identified below will be updated with the new policy changes on September 1, 2016. Please forward this letter to your administrative, billing, and compliance departments.

These rule changes were posted to the OHCA Proposed Policy Changes [website](#) on December 16, 2015 through January 15, 2016 or January 15, 2016 through February 16, 2016 during the 2016 permanent rule making session.

Beginning September 1, 2016:

Conflict free case management

ADvantage waiver services policy at OAC [317:35-17-5](#) and [317:30-5-763](#) is amended to comply with federal regulations. The changes adhere to the CMS conflict free case management requirements. Further changes adhere to Home and Community Based settings requirements for Medicaid Assisted Living Programs that are directly related to the Assisted Living Service Option in the ADvantage program.

Quality of care procedures

Quality of care policy at OAC [317:30-5-131.2](#) is revised to clarify procedures for the completion and submission of the Quality of Care (QOC) Report. Rules are amended to correctly list the types of employee positions that are counted in staffing ratios and outline procedures for counting non-direct care workers when those employees are rendering direct care. Language is also updated to eliminate references to outdated submission methods such as certified mail, diskettes and electronic mail, while adding a requirement to submit QOC reports via the provider portal. The revised policy clarifies the types of information required in the QOC report and updates staff unit terminology.

Renewal updates

Long-Term Care (LTC) policy at OAC [317:50-1-3](#), [317:50-1-4](#), [317:50-1-5](#), [317:50-1-10](#), [317:50-1-13](#), [317:50-1-14](#), and [317:50-1-16](#) is revised to assure that the LTC waiver language and policy are the same. Additional revisions are to detail operation and procedural changes that have occurred since receiving the five year renewal.

This letter is provided for informational purposes only. The OHCA encourages you to review each rule change in its entirety. If you have any questions regarding the information provided in this letter, please contact (800) 522-0114.

Thank you for the services you provide to our SoonerCare members.

Sincerely,

A handwritten signature in cursive script that reads "Rebecca Pasternik-Ikard".

Rebecca Pasternik-Ikard
State Medicaid Director