



STATE OF OKLAHOMA
OKLAHOMA HEALTH CARE AUTHORITY

OHCA 2016-10

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:

Hospital transfers

Diagnosis-related group (DRG) hospital policy at OAC [317:30-5-41](#) and [317:30-5-47](#) is amended to restore certain DRG outlier payments. DRG outlier payments will continue to be paid in the case of a qualifying transfer.

Reimbursement for joint injections

Medical services policy at OAC [317:30-5-9](#) is amended to allow payment for a joint injection and office visit if the claim is billed appropriately and medical documentation supports separate payments. Further, former policy state that payment was made for joint injections without a global coverage designation; however, all joint injection codes have a global coverage designation.

Complex Rehabilitation Technology provisions

Complex Rehabilitation Technology (CRT) policy at OAC [317:30-5-210](#) and [317:30-5-211.1](#) is amended to establish focused regulations and policies for products and services to comply with state legislation. The revisions designate specific HCPCS billing codes and establish specific supplier standards for companies that provide CRT. The revisions establish requirements and restrict the provision of CRT to only qualified suppliers.

Guidelines for diabetic testing supplies

Diabetic testing supplies policy at OAC [317:30-5-211.15](#) is amended to remove specific quantity limits and includes more general language about testing supplies being based on insulin use or type of diabetes. The revisions also specify that a prior authorization may be required for supplies beyond the standard allowance.

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,

Handwritten signature of Rebecca Pasternik-Ikard in cursive.

Rebecca Pasternik-Ikard
State Medicaid Director