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State/Territory Name: OK

State Plan Amendment (SPA) #: 24-0014

This file contains the following documents in the order

listed:1) Approval Letter

2) CMS 179 Form/Summary Form (with 179-like data)

3) Approved SPA Pages

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, MD 21244-1850



Financial Management Group

April 11, 2024

Traylor Rains, Director
Oklahoma Health Care Authority
4345 N. Lincoln Blvd.
Oklahoma City, OK 73105

RE: Oklahoma State Plan Amendment (SPA) 24-0014

Dear Director Rains:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 24-0014. This SPA establishes an emergency interim payment methodology for inpatient and outpatient hospitals affected by the Change Healthcare cybersecurity incident.

We conducted our review of your submittal according to the statutory requirements in Title XIX of the Social Security Act and considering the flexibilities described in the March 15, 2024 Change Healthcare Cybersecurity Incident – CMS Response and State Flexibilities CMCS Informational Bulletin (CIB). We hereby inform you that Medicaid State plan amendment 24-0014 is approved effective February 21, 2024. We are enclosing the CMS-179 and the amended plan pages.

If you have any questions, please contact Fred Sebree at Fredrick.sebree@cms.hhs.gov.

Sincerely,



Rory Howe
Director

Enclosure

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER
2 4 — 0 0 1 4

2. STATE
O K

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
February 21, 2024

5. FEDERAL STATUTE/REGULATION CITATION
42 CFR 447.57(c), 447.205, 430.20; 1902(a)(73) of SSA

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2024 \$ 0.00
b. FFY 2025 \$ 0.00

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19-A, Introduction, Page 1
Attachment 4.19-B, Introduction, Page 3


8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
Attachment 4.19-A, Introduction, Page 1; NEW
Attachment 4.19-B, Introduction, Page 3; NEW

9. SUBJECT OF AMENDMENT
Establishes an emergency interim payment methodology for inpatient and outpatient hospitals affected by the Change Healthcare cybersecurity incident.

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:
The governor's office does not review state plan material.

11. SIGNATURE OF STATE AGENCY OFFICIAL


12. TYPED NAME
Traylor Rains

13. TITLE
State Medicaid Director

14. DATE SUBMITTED
04/05/2024

15. RETURN TO
Oklahoma Health Care Authority
Attn: Traylor Rains
4345 N. Lincoln Blvd.
Oklahoma City, OK 73105

cc: Kasie McCarty; Heather Cox


FOR CMS USE ONLY

16. DATE RECEIVED
4/5/2024

17. DATE APPROVED
April 11, 2024

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
2/21/2024

19. SIGNATURE OF APPROVING OFFICIAL


20. TYPED NAME OF APPROVING OFFICIAL
Rory Howe

21. TITLE OF APPROVING OFFICIAL
Director, FMG

22. REMARKS

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES
INPATIENT HOSPITAL SERVICES**

Emergency Interim Payments

Effective retroactively to February 21, 2024, and effective for affected services provided through June 30, 2024, Hospitals are eligible, upon request, to receive payments for Inpatient hospital services in amounts representative of prior claims payment experience for Inpatient hospital services that are not otherwise paid as a result of the Change Healthcare cybersecurity incident.

The average payment is based on the total claims for Inpatient hospital services paid to the individual Hospital, inclusive of 60% of Medicaid base payments for Inpatient hospital services made under the Medicaid state plan, between October 1, 2023, and December 31, 2023, divided by 13 weeks. The payment will be made for services provided through June 30, 2024, on a weekly basis. This is not an advanced payment or prepayment prior to services furnished by providers. These payments will be reconciled to the final payment amount the provider was eligible to receive under the Medicaid state plan for Inpatient hospital services during the timeframe for which it was receiving interim payments under this provision. The reconciliation will be completed within 90 days or 12 weeks following the last day of the quarter in which the state is able to again process payments for claims following the resolution of the Change Healthcare cybersecurity incident.

If the reconciliation results in discovery of an overpayment to the provider, the state will attempt to recoup the overpayment amounts within 90 days or 12 weeks and will return the federal share within the timeframe specified in 42 CFR 433.316 and 433.320 regardless of whether the state recoups the overpayment amount from the provider, unless an exception applies under 42 CFR part 433, subpart F.

If the reconciliation results in an underpayment to the provider, the state will make an additional payment to the provider in the amount of the underpayment within 90 days. The state will follow all applicable program integrity requirements relating to interim payments to providers and the associated reconciliation process. The state will ensure that hospitals receiving payments under this interim methodology for Inpatient hospital services will continue to furnish Inpatient hospital services to Medicaid beneficiaries during the interim payment period and that access to Inpatient hospital services is not limited.

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES
OTHER TYPES OF CARE**

Emergency Interim Payments

Effective retroactively to February 21, 2024, and effective for affected services provided through June 30, 2024, Hospitals are eligible, upon request, to receive payments for Outpatient hospital services in amounts representative of prior claims payment experience for Outpatient hospital services that are not otherwise paid as a result of the Change Healthcare cybersecurity incident.

The average payment is based on the total claims for Outpatient hospital services paid to the individual Hospital, inclusive of 60% of Medicaid base payments for Outpatient hospital services made under the Medicaid state plan, between October 1, 2023, and December 31, 2023, divided by 13 weeks. The payment will be made for services provided through June 30, 2024, on a weekly basis. This is not an advanced payment or prepayment prior to services furnished by providers. These payments will be reconciled to the final payment amount the provider was eligible to receive under the Medicaid state plan for Outpatient hospital services during the timeframe for which it was receiving interim payments under this provision. The reconciliation will be completed within 90 days or 12 weeks following the last day of the quarter in which the state is able to again process payments for claims following the resolution of the Change Healthcare cybersecurity incident.

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