

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
1301 Young Street, Room 833
Dallas, Texas 75202



Division of Medicaid & Children's Health, Region VI

January 9, 2012

Our Reference: SPA-OK-11-08

Dr. Garth Splinter, State Medicaid Director
Oklahoma Health Care Authority
2401 NW 23rd St., Suite 1A
Oklahoma City, Oklahoma 73107

Dear Dr. Splinter:

CMS has reviewed the proposed amendment to your Medicaid State Plan submitted under Transmittal Number 11-08. Effective October 1, 2011, the Oklahoma Title XIX State Plan has been amended to reflect the approved reimbursement methodology for the transitioning of the Family Planning waiver population to the State Plan.

Transmittal Number 11-08 is approved with an effective date of October 1, 2011 as requested. A copy of the HCFA-179, Transmittal No. 11-08 dated October 11, 2011 is enclosed along with the approved plan pages.

If you have any questions, please contact Jeffrey Branch at (214) 767-6449.

Sincerely,

A black rectangular redaction box covering the signature of Bill Brooks.

Bill Brooks
Associate Regional Administrator
Division of Medicaid and Children's Health

Enclosure

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 1 1 - 0 8	2. STATE Oklahoma
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	

TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE October 1, 2011
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5. TYPE OF PLAN MATERIAL (Check One)

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS A NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION 42 CFR 440.40 & 250 and 441.20	7. FEDERAL BUDGET IMPACT a. FFY 2012 <u>0</u> b. FFY 2013 <u>0</u>
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B, Page 15	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Same Page Revised 08-01-05, TN# 05-16
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10. SUBJECT OF AMENDMENT

Reimbursement methodology for transitioning family planning waiver population to the state plan as an option under P.L. 111-148 and as amended by P.L. 111-152.

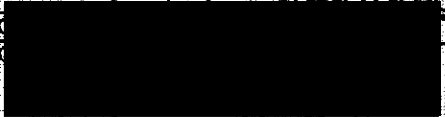
11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED The Governor does not review State
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL Plan material.

12. SIGNATURE OF STATE AGENCY OFFICIAL 	16. RETURN TO Oklahoma Health Care Authority Attn: Cindy Roberts 2401 N.W. 23rd., Suite 1A Oklahoma City, OK 73107
13. TYPED NAME Mike Fogarty	
14. TITLE Chief Executive Officer	
15. DATE SUBMITTED October 11, 2011	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED 11 October, 2011	18. DATE APPROVED 9 January, 2012
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19. EFFECTIVE DATE OF APPROVED MATERIAL 1 October, 2011	20. SIGNATURE 
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21. TYPED NAME BILL BROOKS	22. TITLE Associate Regional Administrator Division of Medicaid & Children's Health
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23. REMARKS

c. Mike Fogarty
Cindy Roberts
Garth Splinter
Tywanda Cox

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

Family Planning Services

4.c. Family Planning Services

(1) For each state fiscal year, the state will reimburse no more than 100% of the Medicare practitioner fee schedule rates in effect at the start of the year. As needed, rates will be adjusted to reflect changes in the Medicare rates at the beginning of each new state fiscal year.

(2) Services not covered by Medicare are reimbursed in accordance with the approved methodology as applicable:

(a) Contraceptives are reimbursed with the pharmacy methodology as approved in the current state plan Attachment 4.19-B Page 7.

(b) Lab services are reimbursed with the methodology approved in the current state plan Attachment 4.19-B Page 2-b.

(c) Sterilizations are reimbursed with the methodology approved in the current state plan Attachment 4.19-B Page 1-1a.

The fee schedule is uniformly applied to public and private providers unless otherwise described in the plan. The fee schedules for the above listed services are maintained in the Agency database and posted to the Agency's website (www.okhca.org). The Agency physician fee schedule is updated annually at the start of each State Fiscal year.

STATE <u>Oklahoma</u>	A
DATE REC'D <u>10-11-11</u>	
DATE APPV'D <u>1/9/2012</u>	
DATE EFF <u>10-1-11</u>	
HGFA 179 <u>11-08</u>	

SUPERSEDES: TN- 05-16

Revised 10-01-2011

TN# 11-08 Approval Date 1-9-12 Effective Date 10-1-11
 Supersedes
 TN# 05-16

Marks, Marsha L. (CMS/SC)

From: Marks, Marsha L. (CMS/SC)
Sent: Wednesday, January 11, 2012 6:58 AM
To: CMS SPA
Cc: Branch, Jeffrey A. (CMS/CMCHO); Jones, Michael J. (CMS/SC); Morales, Michael L. (CMS/CMCHO); Cieslicki, Mary E. (CMS/CMCS)
Subject: Approval for OK 11-08
Attachments: Approval Letter_OK SPA 11-08.docx; Final Approval for 11-08.pdf

See Attached. SPW has been updated

State: Oklahoma

Brief Description: The plan amendment is in response to a companion letter issued in conjunction with OK 11-05 and was approved by CMS on 29 July, 2011. The plan amendment revises the family planning reimbursement methodology to include the location and effective date of the fee schedule. The changes does not have a direct impact on Indians, Indian Health programs, or Urban Indian organizations.

Approval Date: 9 January, 2011

Effective Date: 1 October, 2011

Marsha Marks // Dept of Health & Human Services // Centers for Medicare & Medicaid Services // Dallas Regional Office // Division of Medicaid & Children's Health // Dallas Texas 75202 // 214-767-6280 // Fax 443-380-6499 // marsha.marks@cms.hhs.gov

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