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State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 13-0013

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

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



DIVISION OF MEDICAID & CHILDREN'S HEALTH - REGION VI

December 1, 2015

Dr. Garth Splinter
State Medicaid Director
Oklahoma Health Care Authority
4345 North Lincoln Blvd.
Oklahoma City, OK

Our Reference: SPA OK 13-13

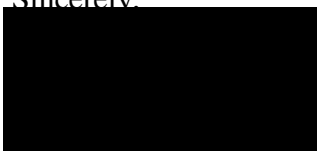
Dear Dr. Splinter:

We have reviewed the State's proposed amendment to the Oklahoma State Plan submitted under Transmittal Number 13-13, dated September 19, 2013. This state plan amendment revises qualifications for behavioral health rehabilitation specialists and behavior health case managers.

Based on the information submitted, we have approved the amendment for incorporation into the official Oklahoma State Plan with an effective date change of July 1, 2013. A copy of the CMS- 179 and approved plan page are enclosed with this letter.

If you have questions, please contact Suzette Seng at (214) 767-6478.

Sincerely,



Bill Brooks
Associate Regional Administrator

Cc: Tywanda Cox

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER	2. STATE
	1 3 - 1 3	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 July 1, 2013
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5. TYPE OF PLAN MATERIAL (Check One)

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

6. FEDERAL STATUTE/REGULATION CITATION Social Security Act § 1902(a)(30)(A)	7. FEDERAL BUDGET IMPACT a. FFY 2015 \$0.00 b. FFY 2016 \$0.00
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A, Page 6a-1.3a; Attachment 3.1-A, Page 6a-1.3b; Supplement 1 to Attachment 3.1-A, Page 1e; Supplement 1 to Attachment 3.1-A, Page 1f; Supplement 1 to Attachment 3.1-A, Page 1g; Attachment 3.1-A, Page 6a-1.8	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 3.1-A, Page 6a-1.3a, TN 10-32; Attachment 3.1-A, Page 6a-1.3b, TN 10-32; Supplement 1 to Attachment 3.1-A, Page 1e, TN 12-03; Supplement 1 to Attachment 3.1-A, Page 1f, TN 12-03; Supplement 1 to Attachment 3.1-A, Page 1g, TN 12-03; Attachment 3.1-A, Page 6a-1.8, TN 10-32
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10. SUBJECT OF AMENDMENT

Revise qualifications for Behavioral Health Rehabilitation Specialists and Behavioral Health Case Managers

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. [Redacted]

16. RETURN TO

13. TYPED NAME Joel Nico Gomez	Oklahoma Health Care Authority Attn: Tywanda Cox 4345 N. Lincoln Blvd. Oklahoma City, OK 73105
14. TITLE Chief Executive Officer	
15. DATE SUBMITTED September 19, 2013	

For Regional Office Use Only

17. DATE RECEIVED 19 September, 2013	18. DATE APPROVED 01 December, 2015
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL 1 July, 2013	20. SIG [Redacted] OFFICIAL
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21. TYPED NAME Bill Brooks	22. TITLE Associate Regional Administrator Division of Medicaid and Children's Health
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23. REMARKS

c: Tywanda Cox
Nico Gomez

**AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
CATEGORICALLY NEEDY**

13.d Rehabilitative Services (continued)

13.d.1. Outpatient Behavioral Health Services (continued)

C. Covered Services (continued)

**Individual Provider Qualifications
Rehabilitative Services**

Type of Service	Individual Provider Type	Qualifications
Behavioral health assessment, behavioral health service plan development, individual, family, group treatment	Behavioral Health Practitioners	<p>Level 1</p> <p>(A) Psychiatrists - Allopathic or Osteopathic physicians with a current license and board certification in psychiatry or board eligible in the state in which services are provided, or</p> <p>(B) Advanced Practice Registered Nurse (APRN) - Registered nurse with current licensure and certification of recognition from the board of nursing in the state in which services are provided and certified in a psychiatric mental health specialty; or</p> <p>(C) Clinical Psychologists - A clinical psychologist who is duly licensed to practice by the State Board of Examiners of Psychologists; or</p> <p>(D) Current resident in psychiatry; or</p> <p>(E) Physician Assistants (PA) - An Individual licensed in good standing in Oklahoma and has received specific training for and is experienced in performing mental health therapeutic, diagnostic, or counseling functions</p> <p>Level 2:</p> <p>(A) Licensed, Master's Prepared - Practitioners with a Master's degree and fully licensed to practice in the state in which services are provided, as determined by one of the licensing boards listed below: (1) Clinical Social Workers; (2) Professional Counselors; (3) Marriage & Family Therapists; (4) Behavioral Practitioners; or (5) Alcohol or Drug Counselor;</p>

Revised 07-01-13

TN# 13-13
Supersedes
TN# 10-32

Approval Date 12/01/2015

Effective Date 7/1/2013

State: Oklahoma
 Date Received: September 19, 2013
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**AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
CATEGORICALLY NEEDY**

13.d Rehabilitative Services (continued)**13.d.1. Outpatient Behavioral Health Services** (continued)**C. Covered Services** (continued)

**Individual Provider Qualifications
Rehabilitative Services** (continued)

Type of Service	Individual Provider Type	Qualifications
Behavioral health assessment, behavioral health service plan development, individual, family, group treatment (cont.)	Behavioral Health Practitioners (cont.)	(B) Licensure Candidates - An individual with a Master's degree or higher, actively and regularly receiving board approved clinical supervision, and extended supervision by a fully licensed clinician if board's supervision requirement is met by one of the licensing boards listed in Level 1 (C) or Level 2 (A) above, or (C) Psychological Clinicians – Professionals with a Master's degree or higher with certification to provide behavioral health services.
Psychosocial Rehabilitation Services, individual and group	<ul style="list-style-type: none"> • BHP • Certified Alcohol and Drug Counselor (CADC) • Behavioral Health Rehabilitation Specialist (BHRS) • Certified Behavioral Case Manager II (CM II) 	See description above for BHP See description in Supplement 1 to Attachment 3.1-A, Page 1e for CM II BHRS must have: (1) Current certification as a Behavioral Health Case Manager II (CM II) from ODMHSAS (2) BHRS designations made between July 1, 2010 through June 30, 2013 will be recognized until June 30, 2014.
Crisis Intervention Services	BHP	See description above for BHP
Psychological Testing / Assessment	<ul style="list-style-type: none"> • BHP • Psychometrists, • Psychological technician of a psychologist 	Certified psychometrist, psychological technician of a psychologist, or LBHP. Psychological technicians must have a bachelor degree and be actively involved in a Master level program that has already trained the applicant specifically to provide the service under the direct supervision of the psychologist under which the tech is working.
Medication Training and Support	<ul style="list-style-type: none"> • Registered Nurse • Physician Assistant • Advanced Registered Nurse Practitioner 	Licensed RN Licensed PA Licensed APRN
Alcohol and drug assessment, Alcohol and drug treatment plan development	<ul style="list-style-type: none"> • BHP 	See description above for BHP

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

CASE MANAGEMENT SERVICES (continued)

Target Group: Chronically and/or severely mentally ill age 18 years and older or children who are at imminent risk of out-of home placement due to psychiatric or substance abuse reasons.

Qualifications of providers:

Case managers performing the service must be:

1. Licensed Behavioral Health Professional (LBHP) as described on Attachment 3.1-A Page 1a-6.11;
2. Currently Certified Alcohol and Drug Counselor (CADC); or
3. Currently certified as a Behavioral Health Case Manager through the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS). In order to obtain certification as a case manager, individuals must meet the following requirements:
 - a. Case Manager II – meets the following:
 - i. Qualifications.
 - I. A bachelor's or master's degree in a behavioral health related field, earned from a regionally accredited college or university recognized by the United States Department of Education or a bachelor's or master's degree in education; or
 - II. Current licensure as a registered nurse in the State of Oklahoma with experience in behavioral health care; or
 - III. A Bachelor's or master's degree in a non-behavioral health related field and current certification from the United States Psychiatric Rehabilitation Association (USPRA).
 - IV. A bachelor's or master's degree in any field and proof of active progression toward obtaining a clinical licensure Master's or Doctoral degree from a regionally accredited college or university recognized by USDE.
 - ii. Training Requirements.
 - I. Behavioral health case management web-based training as specified by ODMHSAS,
 - II. Individuals who have not received a certificate in children's psychiatric rehabilitation from the US Psychiatric Rehabilitation Association (USPRA) must complete the behavioral health rehabilitation web-based training as specified by ODMHAS,
 - III. Complete one day of face-to-face behavioral health case management training, and
 - IV. Individuals not certified as Psychiatric Rehabilitation Practitioners (CPRP) must complete two days of face-to-face behavioral health rehabilitation training.
 - iii. Exam
 - I. Successful completion of web-based competency exams for behavioral health rehabilitation and behavioral health case management is required in order to be certified.
 - II. CPRP applicants for certification need only successfully complete the web-based competency exam for behavioral health case management.
 - iv. Case Manager II certifications issued on or before June 30, 2013 will continue to be recognized until June 30, 2014.
 - b. Case Manager I – meets the following:
 - i. Has a high school diploma and:
 - I. 60 college credit hours; or
 - II. 36 total months of experience working with persons who have a mental illness and/or substance abuse issues (documentation of experience must be on file with ODMHSAS).
 - ii. Complete two days of case management training as specified by ODMHSAS.
 - iii. Successful completion of web-based competency exam for behavioral health case management.

Revised 07-01-13

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

CASE MANAGEMENT SERVICES (continued)

Target Group: Chronically and/or severely mentally ill age 18 years and older or children who are at imminent risk of out-of home placement due to psychiatric or substance abuse reasons.

- c. Wraparound Facilitator Case Manager – LBHP, CADC or CM II and has the following:
 - i. Successful completion of the ODMHSS training for wraparound facilitation within six months of employment; and
 - ii. Participate in ongoing coaching provided by ODMHSAS and employing agency; and
 - iii. Successfully complete wraparound credentialing process within nine months of beginning process; and
 - iv. Direct supervision or immediate access and a minimum of one hour weekly clinical consultation with a Qualified Mental Health Professional, as required by ODMHSAS.
- d. Intensive Case Manager – LBHP, CADC or CM II and has the following:
 - i. A minimum of two years behavioral health case management experience, crisis intervention experience, and
 - ii. Must have attended the ODMHSAS intensive case management training.

Freedom of Choice:

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.

- Eligible recipients will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
- Eligible recipients will have free choice of the providers of other medical care under the plan.

Freedom of Choice Exception:

X Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

CASE MANAGEMENT SERVICES (continued)

Target Group: Chronically and/or severely mentally ill age 18 years and older or children who are at imminent risk of out-of home placement due to psychiatric or substance abuse reasons.

Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6)):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

- Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Limitations:

- Case Management does not include the following:
 - Activities not consistent with the definition of case management services under Section 6052 of the Deficit Reduction Act (DRA); the direct delivery of an underlying medical, educational, social, or other service to which an eligible individual has been referred. (2001 SMD)
 - Activities integral to the administration of foster care programs. (2001 SMD); and
 - Activities for which third parties are liable to pay. (2001 SMD)
- The State assures that individuals meeting provider qualifications under the plan to provide case management as well as other direct medical, educational, social or other services for which an eligible individual has been referred will not provide both case management and direct services to the same individual.

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13.d Rehabilitative Services (continued)**13.d.1. Outpatient Behavioral Health Services** (continued)**PACT Provider Type and Qualifications**

Individual Provider Type	Qualifications
Behavioral Health Rehabilitation Specialist (BHRS)	BHRS must have: (1) Current certification as a Behavioral Health Case Manager II (CM II) from ODMHSAS (2) BHRS designations made between July 1, 2010 and June 30, 2013 will be recognized until June 30, 2014, at which point individuals must meet qualifications in (1) above.
Registered Nurse or Physician Assistant	Medication Training and Support must be provided by a licensed registered nurse, or a physician assistant as a direct service under the supervision of a physician.

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