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State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 14-28 NIRT

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Superseding Page Listing
- 4) Approved SPA Page(s)

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S3-14-28
Baltimore, Maryland 21244-1850



Financial Management Group

MAY 26 2015

Dr. Garth Splinter
State Medicaid Director
2401 NW 23rd Street, Suite 1A
Oklahoma City, Oklahoma 73107

RE: Oklahoma 14-28

Dear Dr. Splinter:

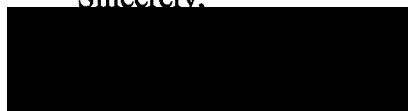
We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 14-28. This amendment proposes to change the nursing facility pool amounts and the base rate components for nursing facilities serving adults and AIDS patients.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. As part of the review process the State was asked to provide information regarding funding of the State share of expenditures under Attachment 4.19-D.

Based upon the information provided by the State, Medicaid State plan amendment 14-28 is approved effective July 1, 2014. We are enclosing the Form CMS-179 and the new plan pages.

If you have any questions, please call Tamara Sampson at (214) 767-6431.

Sincerely,



Timothy Hill
Director

A handwritten signature in black ink, appearing to be "T. Hill", written over the printed name and title.

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 1 4 - 2 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 July 1, 2014
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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 CFT 440.155	7. FEDERAL BUDGET IMPACT a. FFY 2014 <u>0</u> b. FFY 2015 <u>0</u>
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-D, Page 5 Attachment 4.19-D, Page 11	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Same Page, Revised 07-01-13, TN# 13-14 Same Page, Revised 07-01-13, TN# 13-14
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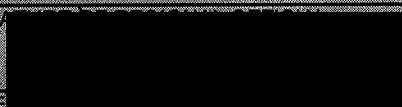
10. SUBJECT OF AMENDMENT

Nursing Facility Pool Amounts and Base Rate Component

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 Plan material.**
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

13. SIGNATURE OF STATE AGENCY OFFICIAL  Joel Nico Gomez	16. RETURN TO Oklahoma Health Care Authority Attn: Cindy Roberts 4345 N. Lincoln Oklahoma City, OK 73105
14. TITLE Chief Executive Officer	
15. DATE SUBMITTED September 30, 2014	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED 30-Sep-14	18. DATE APPROVED MAY 26 2015
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL 01-Jul-14	20. SIGNATURE OF REGIONAL OFFICE OFFICIAL 
21. TYPED NAME Kristin Fan	22. TITLE Deputy Director, FMG
23. REMARKS c: Nico Gomez Cindy Roberts Tywanda Cox Garth Splinter	

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES
FOR NURSING FACILITIES**

STANDARD NURSING FACILITIES SERVING ADULTS (CONTD)

For new facilities beginning operations in the current rate period, the rate will be the median of those established rates for the year.

For the rate period beginning 07-01-07 the total available pool amount for establishing Rate Components for Direct Care and Other Costs as described in 1 and 2 was set at \$99,275,444.

For the rate period beginning 11/01/08, the total available pool amount for establishing the rate components' described in 1 and 2 was set at \$118,007,540.

For the rate period beginning 01/01/10, the total available pool amount for establishing the rate components described in 1 and 2 was set at \$115,979,147.

For the rate period beginning 04/01/10, the total available pool amount for establishing the rate components described in 1 and 2 was set at \$99,248,541.

For the rate period beginning 11/01/10, the total available pool amount for establishing the rate components described in 1 and 2 is \$97,607,577.

For the rate period beginning 01/01/12, the total available pool amount for establishing the rate components described in 1 and 2 is \$102,318,569.

For the rate period beginning 09/01/12, the total available pool amount for establishing the rate components described in 1 and 2 is \$147,230,204.

For the rate period beginning 07/01/13, the total available pool amount for establishing the rate components described in 1 and 2 is \$162,205,189.

For the rate period beginning 07/01/14, the total available pool amount for establishing the rate components described in 1 and 2 is \$158,391,182.

3. As of July 1, 2007 Nursing Facilities Serving Adults and Aids Patients were/are able to earn additional reimbursement for "points" earned in the Oklahoma Focus on Excellence Quality Rating Program.

For the period beginning 07-01-07, facilities participating in the Focus on Excellence Program will receive an incentive component equal to one percent (1%) of the sum of the Base Rate component plus the Other Component as defined above in this section. Participation is defined as having signed a contract amendment agreeing to participate and successfully remanding the required monthly data entry and annual surveys by the required time. Incomplete submissions and non-submissions are a breach and the facility will not receive bonus payments for those Quality Measurements not reported or reported incompletely, the Oklahoma Health Care Authority will have the final determination if a disagreement occurs as to whether the facility has successfully submitted the required data and surveys.

For the period beginning 01-01-08, the reimbursement was set at the following levels:

Participation and/or 1 to 2 Points earned level:

The add-on is set at 1 % of the sum of the Base Rate and the Other Component

3 to 4 points earned:

The add-on is set at 2% of the sum of the Base Rate and the Other Component

5 to 6 points earned:

The add-on is set at 3% of the sum of the Base Rate and the Other Component

Revised 07-01-14

TN# 14-28 Approval Date MAY 26 2015 Effective Date 7-1-2014

Supersedes TN # 13-14

State: Oklahoma
Date Received: September 30, 2014
Date Approved: **MAY 26 2015**
Date Effective: July 1, 2014
Transmittal Number: 14-28

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES
FOR NURSING FACILITIES**

STANDARD NURSING FACILITY SERVING AIDS PATIENTS (CONTD)

B. RATE SETTING PROCESS

1. DEFINITIONS AND METHODOLOGY

Base Rate Component is the rate component representing the allowable cost of the services rendered in an AIDS nursing facility and for the period beginning November 1, 2010 is \$178.64, the difference in the costs reported for aids facilities and regular nursing facilities plus the average rate for November 1, 2010 for regular nursing facilities, not including the incentive payment component (\$193.79 less \$138.17 plus \$123.02); or \$178.64 per patient day. For the rate period beginning September 1, 2012, the Base Rate Component will be \$192.50. For the rate period beginning July 1, 2013, the Base Rate Component will be \$196.95. For the rate period beginning July 1, 2014, the Base Rate Component will be \$197.49.

- (A) *56 Okla. Stat. § 2002* requires that all licensed nursing facilities pay a statewide average per patient day *Quality of Care assessment fee* based on maximum percentage allowed under federal law of the average gross revenue per patient day. Gross revenues are defined as Gross Receipts (i.e. total cash receipts less donations and contributions). *The assessment is an allowable cost as it relates to Medicaid services and a part of the base rate component.*

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Revised 07-01-14

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