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State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 19-0001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved Page

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



Regional Operations Group

May 7, 2019

Our Reference: SPA OK 19-0001

Becky Pasternik-Ikard Chief Executive Officer 4345 N. Lincoln Blvd. Oklahoma City, Oklahoma 73105

Dear Ms. Pasternik-Ikard:

Enclosed is a copy of approved Oklahoma State Plan Amendment (SPA) No. 19-0001, with an effective date of January 1, 2019. This amendment was submitted to revise the state plan to comply with federal regulations and reflect that children under twenty-one (21) years of age, who are residing in an inpatient psychiatric facility must be provided all medically necessary services, regardless of whether such services are noted in the plan of care.

This letter affirms that OK 19-0001 is approved effective January 1, 2019 as requested by the State.

We are including the CMS-179 and the following amended plan page:

o Attachment 3.1-A, Page 7a-2

If you have any questions regarding this matter you may contact Stacey Shuman at 214-767-6479, or by email at stacey.shuman@cms.hhs.gov.

Sincerely,

Bill Brooks Director Centers for Medicaid & CHIP Services Regional Operations Group

Cc: Billy Bob Farrell, Branch Manager Jan Covello, CMS Baltimore

CENTERS FOR MEDICARE & MEDICAID SERVICES		0.000 0.000
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER	2. STATE
	1 9 — 0 0 01	Oklahoma
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	January 1, 2019	
5. TYPE OF PLAN MATERIAL (Check One)		
NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT a. FFY 2019 \$ 0	
42 CFR 440.160; Section 12005 of the Cures Act; 1905(a)(16) of the Act	a. FFY <u>2019</u> \$ <u>0</u> b. FFY 2020 \$ 0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)	
Attachment 3.1-A, Page 7a-2		
10. SUBJECT OF AMENDMENT		
EPSDT services provided to children in inpatient psychiatric facilities		
11 COVERNOR'S REVIEW (Check One)		
11. GOVERNOR'S REVIEW (Check One)		
☐ GOVERNOR'S OFFICE REPORTED NO COMMENT ☐ OTHER, AS SPECIFIED ☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED ☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL 16	S. RETURN TO	
	ahoma Health Care Authority	
10 TVDED NAME	n: Nicole Nantois 45 N. Lincoln Blvd.	
Becky Pasternik-ikard Ol	lahoma City, OK 73105	
14. TITLE Chief Executive Officer	•	
15. DATE SUBMITTED March 22, 2019		
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED March 22, 2019	B. DATE APPROVED May 7, 2019	
PLAN APPROVED - ONE COPY ATTACHED		
	SIGNATURE OF REGIONAL OFFICIAL	
January 1, 2019		
21. TYPED NAME	TITLE Director, Centers for Medicaid and CHIP Services	
Bill Brooks	Regional Operations Group, Sou	utn
23. REMARKS		

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

16. Inpatient Psychiatric Services for individuals under Age 21 (42 CFR 440.160)

(A) Eligible Providers (42 CFR 441.151; 42 CFR 440.160)

Inpatient psychiatric services for individuals under age 21 (or age 22 if the individual was receiving services prior to reaching age 22) are provided under the direction of a physician pursuant to an individual's plan of care and are limited to those who are receiving such services in an institution which is:

- A psychiatric hospital that undergoes a State survey to determine whether the hospital meets the
 requirements for participation in Medicare as a psychiatric hospital as specified in 42 CFR 482.60,
 or is accredited by a national organization whose psychiatric hospital accrediting program has been
 approved by CMS; or
- A hospital with an inpatient psychiatric program that undergoes a State survey to determine
 whether the hospital meets the requirements for participation in Medicare as a hospital, as specified
 in 42 CFR part 482, or is accredited by a national accrediting organization whose hospital
 accrediting program has been approved by CMS; or
- A psychiatric facility that is not a hospital (defined as a Psychiatric Residential Treatment Facility (PRTF) in 42 CFR 483.352) that is accredited by the Joint Commission on Accreditation of Healthcare Organizations (TJC), the Council on Accreditation for Families and Children, the Commission on Accreditation of Rehabilitation Facilities (CARF), or by any other accrediting organization, with comparable standards, that is recognized by the State.

Early and Periodic, Screening, Diagnostic, and Treatment (EPSDT) services that are determined medically necessary in order to correct or ameliorate health conditions are provided to individuals under age 21 in inpatient psychiatric hospitals and facilities regardless of whether such services are identified in the individual's plan of care.

The State assures that it meets all requirements in 42 CFR 440.160, 42 CFR 441 Subpart D, and 42 CFR 483 Subpart G.

(B) Services Provided under Arrangement

The State assures that psychiatric facilities:

- arrange for and oversee the provision of all services;
- maintain all medical records of care furnished to the individual; and
- ensure that all services are furnished under the direction of a physician.

State: Oklahoma

Date Received: 22 March, 2019 Date Approved: 7 May, 2019 Effective Date: 1 January, 2019 Transmittal Number: 19-0001

Revised 01/01/19

TN# 19-0001 Approval Date 05/07/2019 Effective Date 01/01/2019

Supersedes TN#_{_} 18-0002