

Table of Contents

State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 22-0020

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

May 5, 2022

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

Re: Oklahoma State Plan Amendment (SPA) 22-0020

Dear Mr. Rains:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) OK 22-0020. This amendment proposes to update the frequency of Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) dental oral prophylaxis services from every 184 days to every six months.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR 440.40. This letter is to inform you that Oklahoma Medicaid SPA 22-0020 was approved on May 3, 2022, with an effective date of September 1, 2022.

If you have any questions, please contact Stacey S. Steiner at 214-767-6479 or via email at stacey.steiner@cms.hhs.gov.

Sincerely,



James G. Scott, Director
Division of Program Operations

Enclosures

cc: Melody Anthony, OHCA
Sandra Puebla, OHCA
Kasie McCarty, OHCA
Sophia Hinojosa, CMS

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

1. TRANSMITTAL NUMBER <u>2 2 — 0 0 2 0</u>	2. STATE <u>O K</u>
3. PROGRAM IDENTIFICATION: TITLE <u>XIX</u> OF THE SOCIAL SECURITY ACT	
4. PROPOSED EFFECTIVE DATE September 1, 2022	
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 440.40	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>2022</u> \$ <u>0</u> b. FFY <u>2023</u> \$ <u>0</u>
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A, Page 1a-6.2	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 3.1-A, Page 1a-6.2; TN# 21-0006

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

9. SUBJECT OF AMENDMENT
State plan amendment to update the frequency of EPSDT dental oral prophylaxis services from every 184 days to every 6 months.

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:

11. AGENCY OFFICIAL
[Redacted]

12. TYPED NAME
Traylor Rains

13. TITLE
State Medicaid Director

14. DATE SUBMITTED
April 1, 2022

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

FOR CMS USE ONLY

16. DATE RECEIVED
April 1, 2022

17. DATE APPROVED
May 3, 2022

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
September 1, 2022

19. SIGNATURE OF APPROVING OFFICIAL
[Redacted]

20. TYPED NAME OF APPROVING OFFICIAL
James G. Scott

21. TITLE OF APPROVING OFFICIAL
Director, Division of Program Operations

22. REMARKS

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

4b. Early and Periodic Screening, Diagnosis and Treatment of Conditions Found (continued)

B. Diagnosis and Treatment

5. Dental Services - (42 CFR 440.100)

At a minimum, dental services include relief of pain and infection; limited restoration of teeth and maintenance of dental health; and oral prophylaxis every 6 months. Dental care includes emergency and preventive services and therapeutic services for dental disease, which, if left untreated, may become acute dental problems or may cause irreversible damage to the teeth or supporting structures. Other dental services may be provided based on medical necessity, including inpatient services in an eligible participating hospital and must be prior authorized.

6. Physical therapy, Occupational therapy, and Services for individuals with Speech, Hearing, and Language Disorders (42 CFR 440.110)

(a) Physical Therapy Services— Services are: 1) prescribed by a physician or other licensed provider of the healing arts; and 2) provided by a licensed physical therapist or a licensed physical therapist assistant under the supervision of a fully licensed physical therapist, working within the scope of his or her practice, in accordance with State law and 42 CFR 440.110(a).

(b) Occupational Therapy Services— Services are: 1) prescribed by a physician or other licensed provider of the healing arts; and 2) provided by a fully licensed occupational therapist or a licensed occupational therapist assistant under the supervision of a fully licensed occupational therapist, working within the scope of his or her practice, in accordance with State law and 42 CFR 440.110(b).

(c) Speech and Language Pathology Services— Services are: 1) referred by a physician or other licensed provider of the healing arts; and 2) provided by one of the following types of licensed practitioners working within the scope of his or her practice, in accordance with State law and 42 CFR 440.110(c):

- A fully licensed speech language pathologist; or
- A licensed speech language pathology assistant under supervision of a speech language pathologist; or
- A provisionally licensed clinical fellow under the supervision of a licensed speech language pathologist.

(d) Hearing Services - Hearing and hearing aid evaluations as appropriate when provided by a State licensed audiologist who meets the Federal qualifications specified at 42 CFR 440.110(c)(3).

(e) Assistive Technology Services/ Devices - The evaluation of a child with disabilities in order to recommend the proper assistive technology device. Services must be provided by a fully licensed speech language pathologist, fully licensed physical therapist or fully licensed occupational therapist [42 CFR 440.70(b)(3)].

7. Prescribed Drugs - (42 CFR 440.120)

Prescription drugs above the State plan limitation are provided when medically necessary.

Revised 09-01-22