

Table of Contents

State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 13-01

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

April 25, 2013

Our Reference: SPA OK 13-01

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

Dear Dr. Splinter:

We have reviewed the State's proposed amendment to the Oklahoma State Plan submitted under Transmittal Number 13-01, dated March 8, 2013. This state plan amendment requests an extension of the implementation date for recovery audit contractors (RAC), to be completed no later than July 1, 2013.

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 the approved plan pages are enclosed with this letter.

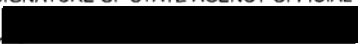

If you have any questions, please contact Lynn Ward at (214) 767-6327.

Sincerely,

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

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 1 3 - 0 1	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, 2013	
5. TYPE OF PLAN MATERIAL (Check One) <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS A NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION Section 6411 of the Affordable Care Act, 1902(a)(42) of the SSA		7. FEDERAL BUDGET IMPACT a. FFY <u>2013</u> \$ <u>0</u> b. FFY <u>2014</u> \$ <u>0</u>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.5-A, Page 1		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Same Page, Revised 1-1-12 TN#12-09	
10. SUBJECT OF AMENDMENT Implementation date change for RAC services. The State has bid the services and expects to award the contract no later than July 1, 2013.			
11. GOVERNOR'S REVIEW (Check One) <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED The Governor does not review State Plan material. <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL 		16. RETURN TO Oklahoma Health Care Authority Attn: Cindy Roberts 2401 NW 23rd Street, Suite 1A Oklahoma City, OK 73107	
13. TYPED NAME Nico Gomez			
14. TITLE Chief Executive Officer			
15. DATE SUBMITTED March 8, 2013			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED 21 March, 2013		18. DATE APPROVED 25 April, 2013	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL 1 July, 2013		20. SIGNATURE 	
21. TYPED NAME Bill Brooks		22. TITLE Associate Regional Administrator Division of Medicaid & Children's Health	
23. REMARKS c: Nico Gomez Cindy Roberts Tywanda Cox			

Attachment 4.5-A
Page 1

State OKLAHOMA

PROPOSED SECTION 4 - GENERAL PROGRAM ADMINISTRATION

4.5 Medicaid Recovery Audit Contractor Program

<p><u>Citation</u></p> <p>Section 1902(a)(42)(B)(i) of the Social Security Act</p>	<p><u>X</u> The State has established a program under which it will contract with one or more recovery audit contractors (RACs) for the purpose of identifying underpayments and overpayments of Medicaid claims under the State plan and under any waiver of the State plan.</p> <p><u>X</u> The State is seeking an exception to establishing such program for the following reasons:</p> <p>The State is currently in the procurement process and expects to have a RAC contract in place no later than July 1, 2013.</p>
<p>Section 1902(a)(42)(B)(ii)(I) of the Act</p>	<p><u>X</u> The State/Medicaid agency will implement contracts of the type(s) listed in section 1902(a)(42)(B)(ii)(I) of the Act. All contracts meet the requirements of the statute. RACs are consistent with the statute.</p> <p>Place a check mark to provide assurance of the following:</p> <p><u>X</u> The State will make payments to the RAC(s) only from amounts recovered.</p> <p><u>X</u> The State will make payments to the RAC(s) on a contingent basis for collecting overpayments.</p>
<p>Section 1902 (a)(42)(B)(ii)(II)(aa) of the Act</p>	<p>The following payment methodology shall be used to determine State payments to Medicaid RACs for identification and recovery of overpayments (e.g., the percentage of the contingency fee): The exact contingency fee percentage has not yet been determined for this contract.</p> <p><u>X</u> The State attests that the contingency fee rate paid to the Medicaid RAC will not exceed the highest rate paid to Medicare RACs, as published in the Federal Register.</p> <p>_____ The State attests that the contingency fee rate paid to the Medicaid RAC will exceed the highest rate paid to Medicare RACs, as published in the Federal Register. The State will only submit for FFP up to the amount equivalent to that published rate.</p>

SUPERSEDES: TN-12-09

TN No. 13-01
Supersedes
TN No. 12-09

Approval Date: 4-25-13

Effective Date: 7-1-13