

## Table of Contents

State/Territory Name: Oklahoma

State Plan Amendment (SPA) #: 15-0009

This file contains the following documents in the order listed:

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

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**

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December 22, 2015

Dr. Garth Splinter  
State Medicaid Director  
Oklahoma Health Care Authority  
4345 North Lincoln Blvd.  
Oklahoma City, OK, 73105

Our Reference: SPA OK 15-09

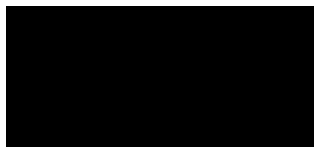
Dear Dr. Splinter:

We have reviewed the State's proposed amendment to the Oklahoma State Plan submitted under Transmittal Number 15-09, dated September 26, 2015. This state plan amendment revises the reimbursement methodology for Licensed Behavioral Health Practitioners (LBHPs) in an independent practice.

Based on the information submitted, we have approved the amendment for incorporation into the official Oklahoma State Plan with an effective date change of September 1, 2015. 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

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>	1. TRANSMITTAL NUMBER <b>1 5 - 0 9</b>	2. STATE <b>Oklahoma</b>
	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 <b>September 1, 2015</b>	

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*)

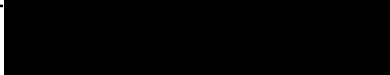
6. FEDERAL STATUTE/REGULATION CITATION <b>Social Security Act § 1902(a)(30)(A)</b>	7. FEDERAL BUDGET IMPACT a. FFY 2015 <b>(\$74,427)</b> b. FFY 2016 <b>(\$893,124)</b>
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  <b>Attachment 4.19-B, Page 8</b>	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> )  <b>Attachment 4.19-B, Page 8</b>

10. SUBJECT OF AMENDMENT

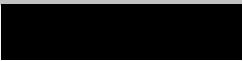
**Rate Methodology Change for Licensed Behavioral Health Practitioners in Independent Practice**

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. S  AL	16. RETURN TO  Oklahoma Health Care Authority Attn: Tywanda Cox 4345 N. Lincoln Blvd. Oklahoma City, OK 73105
13. TYPED NAME <b>Joel Nico Gomez</b>	
14. TITLE <b>Chief Executive Officer</b>	
15. DATE SUBMITTED	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED <b>26 September 2015</b>	18. DATE APPROVED <b>22 December 2015</b>

PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL <b>1 September 2015</b>	20. SIGNATURE  IAL
21. TYPED NAME <b>Bill Brooks</b>	22. TITLE <b>Associate Regional Administrator Division of Medicaid &amp; Children's Health</b>

23. REMARKS  
c: Tywanda Cox  
Nico Gomez

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES  
OTHER TYPES OF CARE**

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**4b. Early and Periodic screening, diagnostic and treatment (cont'd)**

7. Payment is made for Licensed Behavioral Health Practitioner Services on behalf of eligible individuals under 21 years of age through EPSDT.

**(a) Level 1**

Individuals in Independent Practice - Payment is made at 96.75 percent of the CY2013 Medicare Physician Fee Schedule for psychiatry services.

**(b) Level 2**

Individuals in Independent Practice - Payment is made at rates, which in the aggregate equate to 62.7 percent of the CY2013 Non-Facility Medicare Physician Fee Schedule for psychiatry services.

Except as otherwise noted in the plan, the rates are the same for both governmental and private providers of behavioral health practitioner services and the fee schedule and any annual/periodic adjustments to the fee schedule are published on the agency website at [www.okhca.org](http://www.okhca.org). The agency's fee schedule rates are set as of September 1, 2015 and in effect for services provided on or after that date.

State: Oklahoma  
Date Received: September 26, 2015  
Date Approved: December 22, 2015  
Date Effective: September 1, 2015  
Transmittal Number: 15-09

Revised 09-01-2015

TN # 15-0009 Approval Date 12/22/15Effective Date 09/01/15

Supersedes

TN # 14-29