1 ENGROSSED SENATE BILL NO. 640 By: Treat of the Senate 2 and 3 Cox of the House 4 5 6 [Oklahoma Medicaid Program - standards for certain payments - determination of eligibility - guidelines 7 for determining medical necessity - quarterly redetermination of eligibility - codification effective date] 8 9 10 11 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA: 12 SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 5028 of Title 63, unless there 13 is created a duplication in numbering, reads as follows: 14 15 The Oklahoma Health Care Authority shall make payments to Α. 16 nursing facilities pursuant to the state Medicaid plan for individuals who meet applicable financial requirements and are 17 determined to require at least the following services and supports: 18 Skilled nursing services or rehabilitation therapy on a 19 1. daily basis ordered by a physician for the treatment of one or more 20 conditions of sufficient severity that the individual's needs exceed 21 the routine care that can be given by an untrained person and 22 require the assessment, supervision, planning, and intervention of 23 licensed nurses; or 24

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Substantial or complete assistance in four or more
 activities of daily living or in any one of three critical
 activities of daily living that require twenty-four-hour staff
 availability, including toileting, positioning, and transferring; or

5 3. Twenty-four-hour supervision and assistance necessitated by 6 severe or moderate cognitive impairment that places the individual 7 at risk or presents a risk to others.

B. 1. The requirements of subsection A of this act shall also
be adopted in determining initial and continued eligibility of aged
and disabled individuals to receive Medicaid services under waivers
approved by the Centers for Medicare and Medicaid Services pursuant
to Section 1915(c) of the Social Security Act as an alternative to
nursing facility admission.

14 2. Eligibility for home and community-based waiver services 15 shall be extended to individuals who meet the requirements of 16 subsection A and elect to receive waiver services and who are 17 determined by the Authority to be at high risk for nursing home 18 admission but for the expeditious provision of such services.

C. 1. In applying the requirements of subsection A to
determine medical necessity for nursing facility services and homeand community-based waiver services, the Authority shall utilize the
Minimum Data Set 3.0 Resident Assessment Instrument (MDS-RAI) to
assemble pertinent medical and functional information relative to

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individual applicant health status, medical needs, and cognitive and
 functional deficits.

2. Prior to implementing the medical necessity determination 4 requirements of subsection A, the Authority shall obtain the advice 5 of a technical expert panel and from essential stakeholders with 6 respect to the most appropriate and efficient use of the MDS-RAI and 7 an associated acuity scale and scoring mechanism.

8 3. Not later than January 1, 2016, the Authority shall retain
9 the services of a qualified independent contractor organization to
10 administer the requirements of this section.

D. Following an initial determination of medical necessity and commencement of nursing facility services or home- and communitybased waiver services, the Authority shall provide for a redetermination of the recipient's need for continuation of services on a quarterly basis or upon a significant change in the recipient's condition.

E. The provisions of this act shall be implemented with respect
to Medicaid-eligible individuals initially applying for nursing
facility or home-based or community-based services on or after
January 1, 2016.

F. The provisions of this act shall not apply to individualswith intellectual disabilities.

23 SECTION 2. This act shall become effective September 1, 2015.24

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4	Presiding Officer of the Senate
5	Passed the House of Representatives the day of,
6	2015.
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