

Oklahoma Health Care Authority

The Oklahoma Health Care Authority (OHCA) values your feedback and input. It is very important that you provide your comments regarding the proposed rule change by the comment due date. Comments can be submitted on the OHCA's [Proposed Changes Blog](#).

OHCA COMMENT DUE DATE: March 3, 2023

The proposed policy changes are Permanent Rules. The proposed policy changes were presented at the January 3, 2023 Tribal Consultation. The proposed rule changes will be presented at a Public Hearing on March 7, 2023. Additionally, this proposal is scheduled to be presented to the Medical Advisory Committee on March 2, 2023 and the OHCA Board of Directors on March 22, 2023.

SUMMARY:

Physician Assistant Rule Revisions — The proposed rule changes are necessary to ensure that previous amendments to the Physician Assistant Practice Act, that were made by the Legislature in 2020, are reflected in the rules.

LEGAL AUTHORITY

The Oklahoma Health Care Authority Act, Section 5007 of Title 63 of Oklahoma Statutes; the Oklahoma Health Care Authority Board; State of Oklahoma Physician Assistant Act, 59 O.S. 519-524

RULE IMPACT STATEMENT:

STATE OF OKLAHOMA OKLAHOMA HEALTH CARE AUTHORITY

SUBJECT: Rule Impact Statement
APA WF # 22-27

A. Brief description of the purpose of the rule:

The proposed rule changes are necessary to ensure that previous amendments to the Physician Assistant Practice Act, that were made by the Legislature in 2020, are reflected in the rules. The proposed revisions will update the term "supervising" physician to "delegating" physician; remove the application to practice requirements and replace it with the practice agreement requirement; and provide a timeframe of ten (10) business days for providers to submit any updated copy of the practice agreement due to changes. Other revisions will involve limited rewriting aimed at improving readability and overall flow of policy language.

B. A description of the classes of persons who most likely will be affected by the proposed rule, including classes that will bear the cost of the proposed rule, and any information on cost impacts received by the agency from any private or public entities:

No classes of persons will be affected by the proposed rule.

- C. A description of the classes of persons who will benefit from the proposed rule:

The proposed rule changes will benefit Physician Assistant providers by clarifying practice, services and reimbursement of allowable services as directed by the Physician Assistant Practice Act.

- D. A description of the probable economic impact of the proposed rule upon the affected classes of persons or political subdivisions, including a listing of all fee changes and, whenever possible, a separate justification for each fee change:

There is no probable impact of the proposed rule upon any classes of persons or political subdivisions.

- E. The probable costs and benefits to the agency and to any other agency of the implementation and enforcement of the proposed rule, the source of revenue to be used for implementation and enforcement of the proposed rule, and any anticipated effect on state revenues, including a projected net loss or gain in such revenues if it can be projected by the agency:

The proposed rule changes are budget neutral.

- F. A determination of whether implementation of the proposed rule will have an economic impact on any political subdivisions or require their cooperation in implementing or enforcing the rule:

There is no economic impact on political subdivisions.

- G. A determination of whether implementation of the proposed rule will have an adverse effect on small business as provided by the Oklahoma Small Business Regulatory Flexibility Act:

The proposed rule will not have an adverse effect on small business.

- H. An explanation of the measures the agency has taken to minimize compliance costs and a determination of whether there are less costly or non-regulatory methods or less intrusive methods for achieving the purpose of the proposed rule:

The agency has taken measures to determine that there is no less costly or non-regulatory method or less intrusive method for achieving the purpose of the proposed rule.

- I. A determination of the effect of the proposed rule on the public health, safety and environment and, if the proposed rule is designed to reduce significant risks to the public health, safety and environment, an explanation of the nature of the risk and to what extent the proposed rule will reduce the risk:

The proposed rule should have a positive effect on the public health, safety, and environment.

- J. A determination of any detrimental effect on the public health, safety and environment if the

proposed rule is not implemented:

The Agency does not anticipate any detrimental effect on the public health, safety, or environment if the proposed rule changes are not implemented.

K. The date the rule impact statement was prepared and if modified, the date modified:

Prepared: September 13, 2022

Modified: December 1, 2022

RULE TEXT:

**TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE**

SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES

PART 2. PHYSICIAN ASSISTANTS

317:30-5-30. Eligible providers

~~The Oklahoma Health Care Authority (OHCA) recognizes medical services rendered by a Physician Assistant in accordance with the rules and regulations covering the Authority's medical care program.~~

~~(1) The application for a Medicaid Provider agreement must be accompanied by copies of the physician assistant's current written authorization to practice from the Oklahoma State Board of Medical Licensure and Supervision. The Application to Practice must be jointly filed by the supervising physician and physician assistant and include a description of the physician's practice, methods of supervision and utilization of the physician assistant, and the name of alternate supervising physician(s) who will supervise the physician assistant in the absence of the primary supervising physician. At any time that the supervising physician(s) change, an updated copy of the certification must be submitted to OHCA, Provider Enrollment.~~

~~(2) All services provided by a Physician Assistant must be within the current practice guidelines for the State of Oklahoma.~~

Eligible providers shall:

(1) Have and maintain current license by the Oklahoma State Board of Medical Licensure and Supervision as specified in Section 519.6 of Title 59 of the Oklahoma Statutes;

(2) Have a current contract with the Oklahoma Health Care Authority (OHCA); and

(3) Have a practice agreement with a SoonerCare contracted delegating physician(s) (who is licensed and in good standing with the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners) concerning the scope of practice of the physician assistant (PA). If at any time the delegating physician(s) change, an updated copy of the practice agreement must be submitted within ten (10) business days to OHCA, Provider Enrollment.

317:30-5-31. ~~General coverage by category~~ Coverage

~~Physician Assistant services are subject to all rules and guidelines which apply to Physician services as specified at OAC 317:30-5, Part 1, Physicians.~~

The OHCA covers medical services (as described in OAC 317:30-5, Part 1, Physicians) by a physician assistant (PA) when rendered within the licensure and scope of practice of the PA. Services must be in compliance with the state-specific statutes including Title 59 O.S. § 519.2, rules and regulations of the applicable practice act.

317:30-5-32. ~~Utilization~~Reimbursement

~~Physician Assistant services are included in the Medicaid program in the same way as Physician services and are included in all utilization parameters (refer to OAC 317:30-5, Part 1). An office, nursing home, or hospital visit is considered as one of the allowed visits for a given period. Payment is not made to the Physician Assistant and supervising physician for the same service on the same day.~~

(a) Payment for services within the physician assistant's scope of practice shall be made when ordered or performed by the eligible physician assistant if the same service would have been covered if ordered or performed by a physician.

(b) Payment is not made to physician assistant when a service(s) is (are) performed simultaneously with the delegating physician and billed by the physician on the same day.

(c) Payment is made per the methodology established in the Oklahoma Medicaid State Plan.

317:30-5-33. Post payment utilization review [Revoked]

~~All inpatient services are subject to post payment utilization review by the OHCA or its designated agent. Post payment utilization reviews are subject to all rules and guidelines which apply to Physician services as specified at OAC 317:30-5, Part 1, Physicians.~~