

2012

protective
health
services





oklahoma state department of health

vision

creating a state of health

mission

To protect and promote the health of the citizens of Oklahoma, to prevent disease and injury, and to assure the conditions by which our citizens can be healthy.

values

honesty > to be truthful in all our endeavors; to be forthright with one another and with our customers, communities, suppliers, and stakeholders.

integrity > to say what we mean, to deliver what we promise, and to fulfill our commitments to each other and our customers.

respect > to treat one another and our customers with dignity and fairness, appreciating the diversity and uniqueness of each individual.

accountability > to take responsibility for our actions, and those of our agency and to fearlessly seek clarification and guidance whenever there is doubt.

trustworthiness > to build confidence in one another and our customers through team work and open, candid communication.

customer service > to provide quality and effective services to all.



Public health impacts your life and that of your family every day through our assurance of quality in health care and consumer services. We oversee business and occupational licenses ranging from grocery stores, restaurants, hotels, and tattoo artists to ambulances, hospitals, surgical centers, and nursing homes.

Through our licensure and inspection services, we assure compliance with laws and rules that reflect current public health standards. We strive to identify unhealthy conditions and correct them before they result in injury and disease.

In addition to performing routine inspections, we are at work promoting the health of the citizens of Oklahoma when emergencies or natural disasters occur. During ice storms, we maintain contact with health care facilities to ensure heat, food and medical supplies are available to patients. When power outages affect the State, we drop by restaurants to make certain the food supply is being stored at safe temperatures and provide technical support to the business owner who is dealing with less than optimal circumstances.

We hope this booklet will help you identify the Protective Health Services of the Oklahoma State Department of Health that are working to keep all Oklahomans healthy. If you need more information, give us a call at 405.271.5288 or check our Web site at http://www.ok.gov/health/Protective_Health/index.html.

Terry Cline, Ph.D.
Commissioner

PROTECTIVE HEALTH SERVICES LEADERSHIP TEAM

Henry F. Hartsell, Jr., Ph.D.
Deputy Commissioner
405.271.5288
Fax: 405.271.1402
hank@health.ok.gov

Crystal Rushing, Executive Assistant
405.271.5288
Fax: 405.271.1402
crystals@health.ok.gov

Sean Tomlinson
Administrative Director
405.271.5288
Fax: 405.271.1402
tsean@health.ok.gov

Vernon Bolz, Chief
Consumer Health Services
405.271.5243
Fax: 405.271.5286
vernonb@health.ok.gov

Dorya Huser, Chief
Long Term Care
405.271.6868
Fax: 405.271.2206
doryah@health.ok.gov

Timothy Cathey, M.D.
Medical Director
405.271.5288
Fax: 405.271.1402
timc@health.ok.gov

Tom Welin, Chief
Medical Facilities Service
405.271.6576
Fax: 405.271.1308
tomw@health.ok.gov

James Joslin, Chief
**Health Resources
Development Service**
405.271.6868
Fax: 405.271.7360
james@health.ok.gov

Nancy Atkinson, Chief
**Quality Improvement &
Evaluation Service**
405.271.5278
Fax: 405.271.1402
nancyh@health.ok.gov

PROTECTIVE HEALTH SERVICES FACT SHEETS

TABLE OF CONTENTS

CONSUMER HEALTH SERVICE	9
Alarm and Locksmith Industry Program.....	10
Fine Schedule for Alarm and Locksmith Industry	12
Alarm and Locksmith Industry Committee	13
Barber Program	14
State Barber Advisory Board	16
Bedding Industry	17
Consumer Product Safety Commission	18
Drug, Cosmetics, Medical Devices, Compressed Medical Gases, and Health Fraud	20
Fire Extinguisher Industry Program	22
Fire Extinguisher Industry Committee	24
Hearing Aid Program	25
Hearing Aid Advisory Council.....	26
Hotels-Motels.....	27
Licensed Behavioral Practitioners.....	29
Oklahoma Licensed Behavioral Practitioner Advisory Board	30
Licensed Genetic Counselors	31
Oklahoma Genetic Counseling Advisory Committee	32
Licensed Marital and Family Therapists	33
Oklahoma Licensed Marital and Family Therapist Advisory Board.....	35
Licensed Professional Counselors	36
Oklahoma Licensed Professional Counselors Advisory Board	38
Mammography Quality Standards Acts.....	39

Medical Micropigmentation Program.....	40
Medical Micropigmentation Advisory Committee	42
Public Bathing Places.....	43
Retail Foods	45
Oklahoma Food Service Advisory Council.....	47
Sanitarians and Environmental Specialist Program.....	49
Sanitarian and Environmental Specialist Registration Advisory Council.....	51
Tattooing and Body Piercing Program	53
Wholesale Foods, Manufacturers, Processors, Bottled Water, Water Vending, and Department of Corrections Facilities.....	56
X-Ray Tubes.....	58
Radiation Advisory Committee	59

HEALTH RESOURCES DEVELOPMENT SERVICE	61
Adult Day Care Center License Applications.....	62
Certified Workplace Medical Plans.....	63
Continuum of Care Facilities and Assisted Living Centers License Applications	65
Health Maintenance Organizations.....	68
Home Care Administrator Registry	70
Independent Review Organizations.....	71
Jail Inspection Division	73
Nurse Aide Registry	75
Nurse Aide Temporary Emergency Waiver.....	80
Nursing and Specialized Facilities Certificate of Need	81
Nursing and Specialized Facilities License Applications	83
Psychiatric & Chemical Dependency Treatment Facilities Certificate of Need	85
Residential Care Homes—License Applications.....	87

LONG TERM CARE	91
Adult Day Care Centers—Inspections & Investigations.....	92
Assisted Living Centers—Inspections & Investigations.....	94
Continuum of Care Facilities—Inspections & Investigations.....	96
Intakes and Incidents.....	98
Intermediate Care Facilities for the Mentally Retarded—Inspections & Investigations	100
Nursing Facilities—Inspections & Investigations	102
Residential Care Homes— Inspections & Investigations	104
Long Term Care Facility Advisory Board	106
 MEDICAL FACILITIES SERVICE.....	 111
Ambulatory Surgical Centers	112
Birthing Centers.....	113
Clinical Laboratory Improvement Amendments (CLIA)	114
Emergency Systems Unit	116
Emergency Medical Services	116
Oklahoma Emergency Response Systems Development Advisory Council.....	119
Trauma Service	121
Oklahoma State Trauma Systems Improvement and Development Advisory Council (OTSIDAC).....	122
Medical Audit Committee	124
Health Facilities Plan Review.....	125
Home Health Providers	128
Home Health Advisory Board	130
Hospice Providers.....	131
Hospice Advisory Board	132

Hospitals	133
Hospital Advisory Council	136
Medicare Certification For:	
End-Stage Renal Disease Centers, Community Mental Health Centers, Comprehensive Outpatient Rehabilitation Facilities, Outpatient Rehabilitation Agencies, PPS Excluded Psychiatric Units/PPS Excluded Rehabilitation Units, Portable X-Ray Units, Rural Health Clinics, Swing Bed Hospital Units	
State Permits For:	
Tissue Banks and Eye Banks	138
Quality Initiatives	141
Workplace Drug and Alcohol Testing Facilities.....	142
QUALITY IMPROVEMENT & EVALUATION SERVICE.....	145
Minimum Data Set	146
Outcome and Assessment Information Set.....	149
Quality Assurance & Data Systems	152
SUMMARY OF LICENSES, CERTIFICATIONS AND PERMITS ISSUED BY PROTECTIVE HEALTH SERVICES.....	156
QUICK REFERENCE TELEPHONE DIRECTORY	159

Consumer Health Services

Vernon Bolz, Chief
405.271.3458
Fax: 405.271.5286
vernonb@health.ok.gov

**Consumer
Protection Division**

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

**Occupational
Licensing Division**

(Vacant), Director
405.271.5779
Fax: 405.271.5286

**Professional
Counselor Licensing**

Nena West, Director
405.271.6030
Fax: 405.271.1918
nenaw@health.ok.gov

ALARM AND LOCKSMITH INDUSTRY PROGRAM

<http://old.health.ok.gov>

Clients Served:

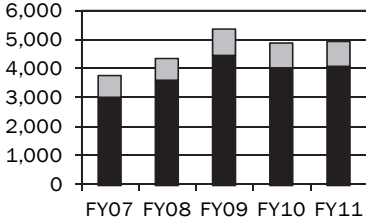
Licensed alarm companies, locksmith companies, employees, and consumers who purchase alarm or locksmith industry equipment or secure alarm monitoring.

Contact Person:

(Vacant), Director
405.271.5779
Fax: 405.271.5286

Alarm and Locksmith Industry Program

■ Individuals licensed □ Companies licensed



Authority:

59 O.S. Sections
1800.1 et seq.
OAC 310:205
State license
required.
Annual renewal.

Funding Source:

Fees Collected

Fees:

Company License (full year).....	\$250.00
Company License (partial year, issued after February 1st, but before July 1)	\$125.00
Manager Initial Application and Test Fee	\$200.00
Technician/Sales/Inspector Initial Application & Test Fee.....	\$75.00
Trainee Application Fee	\$75.00
Sprinkler Trainee Application Fee	\$20.00

Manager Renewal Fee (through June 30)	\$100.00
Manager Late Renewal Fee (beginning July 1).....	\$200.00
Trainee Renewal Fee (through June 30).....	\$25.00
Trainee Late Renewal Fee (beginning July 1).....	\$50.00
Technician/Sales/Inspector Renewal Fee (through June 30).....	\$35.00
Technician/Sales/Inspector Late Renewal Fee (beginning July 1)	\$70.00
Sprinkler Trainee Renewal Fee (through June 30).....	\$15.00
Sprinkler Trainee Late Renewal Fee (beginning July 1).....	\$30.00
Company Renewal Fee (through June 30).....	\$250.00
Company Late Renewal Fee (beginning July 1).....	\$500.00
Retest Fee.....	\$50.00
Exam Non-Appearance Fee	\$50.00
Duplicate License Fee.....	\$25.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Individuals licensed</i>	2,958	3,578	4,427	4,009	4,024
<i>Companies licensed</i>	765	731	904	857	867
<i>Fees collected</i>	\$696,632	\$462,846	\$507,185	\$658,890	\$593,780
<i>Fine citations collected</i>	\$5,600	\$3,900	\$9,700	\$5,900	\$16,800

i This program was created when the industry and consumers identified unqualified and unethical individuals engaged in selling, installing, and monitoring alarm systems. In 2007, the Legislature saw the need to include the activities of locksmithing, electronic access controls, closed circuit television, and nurse call activities,

under the combined Alarm and Locksmith Industry. Occupational Licensing (OL) staff endeavor to assure that all companies and individuals engaged in the activities mentioned above are licensed as required and are in compliance with the Alarm Industry Act and Rules. OL staff offer weekly licensing examinations to individu-

FINE SCHEDULE FOR ALARM AND LOCKSMITH INDUSTRY		
Nature of Violation	First Violation	Second or Subsequent Violation
Engaging in an industry business without a license in the appropriate category or classification.	\$200.00	\$200.00
industry work (per person).	\$100.00	\$200.00
Altering a license.	\$200.00	\$200.00
Failure to display company license in a conspicuous place.	\$50.00	\$200.00
Individual not carrying personal license.	\$50.00	\$200.00
Failure to display company license number as required by statute or rule.	\$200.00	\$200.00
Company employing person to perform industry work without supervision of properly licensed manager.	\$200.00	\$200.00
Failure to have properly licensed manager or technician on site.	\$200.00	\$200.00
Failure to correct code violations per day after a Notice of Violation compliance date.	\$200.00	\$200.00
Failure to comply with a specific provision of the industry regulations.	\$50.00	\$200.00

(Individuals sometimes make arrangements to pay out fines. In those instances, the fines could be for varying amounts.)

als wishing to engage in the industry, investigate complaints made against the industry, and perform job site inspections to verify licensed individuals are installing equipment approved for the location according to the adopted standard. In conjunction with the Alarm and Locksmith Industry Committee, OL staff utilize suggestions from the in-

dustry to propose rule changes, which are discussed at public meetings with licensed alarm and locksmith industry personnel and other interested persons. The proposed changes are approved by the Alarm and Locksmith Industry Committee prior to being presented to the Board of Health for consideration.

ALARM AND LOCKSMITH INDUSTRY COMMITTEE

This Committee is mandated by statute (59 O.S., Section 1800.4) to assist and advise the Commissioner of Health on all matters relating to the formulation of rules, regulations, and standards in accordance with the Alarm and Locksmith Industry Act. The Committee consists of nine members, one of whom is the Commissioner of Health or his designated representative. The State Board of Health appoints the remaining eight members. Seven of these members must have at least five years of experience in the alarm or locksmith industry or in a closely related field, with broad knowledge of the alarm or locksmith industry, and one

member must be a layperson. No more than two of the members shall be from each working field or closely related industries of burglar alarm, fire alarm, electronic access control, locksmith, closed circuit television, and nurse call station. No member can be employed by the same person as any other member of the Committee. Members are appointed for a four year term or until successors are appointed. The Committee meets at such times as it deems necessary to implement the Alarm and Locksmith Industry Act. A majority of Committee members constitutes a quorum.

Committee Members

Paul Juneau, Chair

Charles "Zeke" Lay, Vice-Chair

Bob Carroll, Secretary

Ed Humes

(Vacant)

Charles Hudecek

James Perry

Ronald Edwards

Lisa Fields

BARBER PROGRAM

<http://old.health.ok.gov>

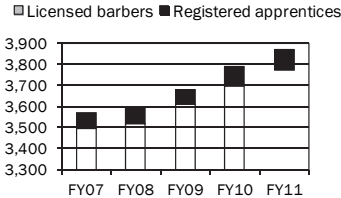
Clients Served:

Licensed barbers, barber apprentices, graduate apprentices, barber instructors, barber colleges, and consumers who utilize the services of barbers.

Contact Person:

(Vacant), Director
405.271.5779
Fax: 405.271.5286

Barbers



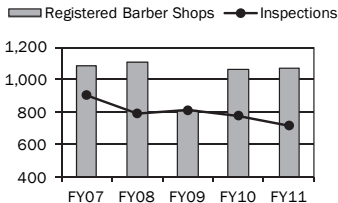
Authority:

59 O.S. Sections
61.1 et seq.
OAC 310:210
State license required.
Annual renewal.

Funding Source:

Fees Collected

Barber Shops



Fees:

Initial Barber Test (\$35.00 exam fee; \$25.00 license fee)..... \$60.00

Barber Retest Fee	\$35.00
Initial Barber Instructor Test (\$50.00 exam fee; \$50.00 license fee)	\$100.00
Barber Instructor Retest Fee	\$50.00
Barber Apprentice Fee	\$50.00
Graduate Apprentice Fee	\$10.00
Initial Barber College License Fee	\$200.00
Initial Reciprocal License Fee	\$200.00
Barber Renewal Fee (through June 30)	\$25.00
Barber Late Renewal Fee (beginning July 1)	\$50.00
Barber Instructor Renewal Fee (through June 30)	\$50.00
Barber Instructor Late Renewal Fee (beginning July 1)	\$75.00
Barber College Renewal Fee (through June 30)	\$200.00
Barber College Late Renewal Fee (beginning July 1)	\$400.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Licensed barbers</i>	3,491	3,517	3,609	3,694	3,768
<i>Registered apprentices</i>	77	78	68	92	102
<i>Barber instructors licensed</i>	103	110	116	126	138
<i>Barber colleges licensed</i>	8	8	8	11	11
<i>Registered barber shops</i>	1,086	1,105	811	1,061	1,069
<i>Barber shop inspections</i>	906	793	812	780	719
<i>Fees collected</i>	\$119,630	\$131,640	\$121,340	\$141,496	\$135,755
<i>Fine citations collected</i>	\$3,425	\$2,650	\$2,050	\$2,850	\$3,000

i The Sunset Review Board abolished the Barber Board in 1985. Since that time, this Department and the Barber Advisory Board have accomplished the program functions. This program began with primary goals of: (1) prevent-

ing the spread of disease during the practices of barbering; (2) establishing minimum barber college licensing requirements and curriculum to achieve consistent statewide barber student training; and (3) establishing minimum

requirements. County Health Department sanitarians perform annual license and shop inspections to verify compliance with the adopted rules and to assure that individuals barbering hold a current license or registration. Occupational Licensing (OL) staff perform annual school inspections to verify compliance with current rules, investigate complaints, renew licenses annually, and in conjunction with the State Barber Advisory board, administers the

barber examination six times each year. The Department utilizes suggestions from the State Barber Advisory Board, barber industry, and other interested persons to develop rule changes, as the need for rule change is recognized. The proposed changes are discussed at public meetings, and approved by the State Barber Advisory Board, prior to being presented to the Board of Health for consideration.

STATE BARBER ADVISORY BOARD

This Board is mandated by statute (59 O.S., Section 61.4) to advise the State Board of Health concerning regulations and to advise and assist the Department in administering the Act and to develop and administer the barber licensure examinations. The Board consists of five members who are appointed by the Governor. Four

members must be licensed barbers and one member must be a layperson. Each member of the Board serves at the pleasure of the Governor for a term coterminous with that of the Governor. Each member may continue to serve after the expiration of the member's term until such time as a successor is appointed.

Advisory Board Members

*David Reed, Chair
Paula Matthews
George King
Noble D. Stanfield
Anthony Baldini*

BEDDING INDUSTRY

<http://cpd.health.ok.gov>

Clients Served:

All segments of the bedding industry, including manufacturing, wholesale, retail and germicidal facilities.

Contact Person:

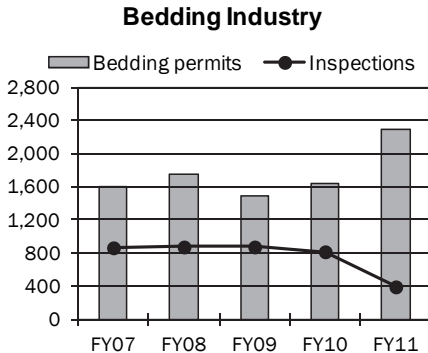
K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

Authority:

63 O. S. Sections
1-1001 et seq.
OAC 310:215

Funding Source:

Fees Collected



Fees:

Initial Bedding Permit.....	\$5.00
Renewal Bedding Permit.....	\$5.00
Initial Germicidal Treatment Permit	\$25.00
Renewal Germicidal Treatment Permit	\$5.00

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Bedding permits</i>	1,608	1,752	1,483	1,631	2,289
<i>Bedding inspections</i>	864	874	874	816	393
<i>Fees collected</i>	\$112,500	\$109,891	\$99,753	\$98,048	\$109,277

i The bedding industry inspection program was created in the 1950's. It is a traditional public health program for the protection of the consumer. Consumer Protection Division (CPD) staff endeavor to assure the safe manufacture and processing of wholesale and retail bedding products, and for the germicidal treatment of used bedding products. CPD staff develop, write, implement and

interpret rules, issue mandated licenses, track statistical data, provide for enforcement of establishments not in compliance, train industry and consumers in bedding manufacturing practices, meet with consumer advisory committees, and provide technical assistance as necessary. On-site inspections of the establishments are also performed by CPD staff.

CONSUMER PRODUCT SAFETY COMMISSION

<http://cpd.health.ok.gov>

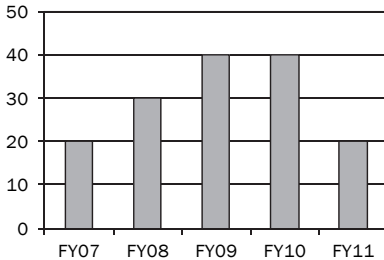
Clients Served:

The consuming public and facilities that market the products being consumed or used.

Contact Person:

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

Consumer Product Safety Commission Inspections



Authority:

63 O. S. Section 1-106

Funding Source:

Contractual basis with the U. S. Consumer Product Safety Commission

Statistics:

	FY07	FY08	FY09	FY10	FY11
Consumer Product Safety Commission Inspections	20	30	40	40	20
Workshops Conducted	1	-----	-----	-----	-----

i This program serves to monitor effectiveness of either manufacturer-initiated or federally-initiated recalls, federal or manufacturer mandated product educational programs, and compliance with federal regulations. The program also serves as an initial contact for

consumers who may have questions or complaints about a product. Those complaints would then be forwarded to the Consumer Product Safety Commission Regional Office in Tulsa, Oklahoma.

DRUGS, COSMETICS, MEDICAL DEVICES, COMPRESSED MEDICAL GASES, AND HEALTH FRAUD

<http://cpd.health.ok.gov>

Clients Served:

All segments of drugs, cosmetics, medical devices, compressed medical gases, wholesale manufacturing and processing facilities, and consumers of such products or devices.

Contact Person:

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

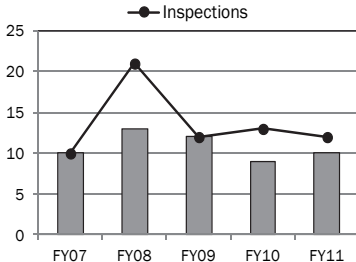
Authority:

63 O.S. Sections
1-1401 et seq.
OAC 310:240

Funding Source:

Fees Collected

**Licensed Drugs, Cosmetics,
Medical Devices, and Compressed
Medical Gases Facilities**



Fees:

Initial license..... \$100.00
Renewal license..... \$50.00

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Drugs, cosmetics, medical devices and compressed medical gases facilities licensed*</i>	10	13	12	9	10
<i>Drugs, cosmetics, medical devices and compressed medical gases facility inspections</i>	10	21	12	13	12
<i>Complaints</i>	1	-----	-----	-----	-----

i This program was created by statutory authority and regulations. Consumer Protection Division (CPD) staff endeavor to provide for the safe manufacture, processing and wholesale distribution of drugs (primarily over-the-counter drugs), cosmetics, and medical devices, and to protect the public from health fraud, including fraudulently labeled and advertised products. CPD staff develop, write, implement and interpret rules, issue licenses to establishments for

which there is statutory authority, track statistical data, provide for enforcement of establishments not in compliance, train industry and consumers in manufacturing practices, meet with consumer advisory committees, and provide technical assistance as necessary. On-site inspections of the establishments are also performed by CPD staff.

FIRE EXTINGUISHER INDUSTRY PROGRAM

<http://old.health.ok.gov>

Clients Served:

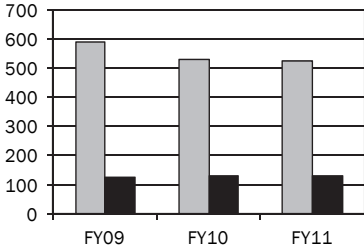
Licensed companies and employees, licensed individuals, and consumers who utilize the services of the fire extinguisher industry.

Contact Person:

(Vacant), Director
405.271.5779
Fax: 405.271.5286

Fire Extinguisher Industry Program

▣ Individuals licensed ■ Companies licensed



Authority:

59 O.S. Sections
1820.1 et seq.
OAC 310:451
State license
required; annual
renewal.

Funding Source:

Fees Collected

Fees:

Company License	\$250.00
Company Qualified Agent.....	\$200.00
Designer Application	\$200.00
Technician.....	\$75.00

Trainee	\$75.00
Salesperson	\$75.00
Re-examination Fee (per attempt)	\$50.00
Duplicate License	\$25.00
Company Renewal (through September 30)	\$250.00
Company Late Renewal (beginning October 1)	\$500.00
Company Qualified Agent Renewal (through September 30)	\$250.00
Company Qualified agent Late Renewal (through October 1)	\$500.00
Designer Renewal (through September 30)	\$100.00
Designer Late Renewal (beginning October 1)	\$200.00
Technician Renewal (through September 30)	\$35.00
Technician Late Renewal (beginning October 1)	\$70.00
Trainee Renewal (through September 30)	\$35.00
Trainee Late Renewal (beginning October 1)	\$70.00
Salesperson Renewal (through September 30)	\$35.00
Salesperson Late Renewal (beginning October 1)	\$70.00

Statistics:

	FY08	FY09	FY10	FY11
<i>Individuals licensed</i>	-----	590	533	527
<i>Companies licensed</i>	-----	127	130	130
<i>Fee collections</i>	\$3,450	\$99,500	\$72,870	\$77,744

i This program implements the Fire Extinguisher Industry Act passed by the Legislature to regulate companies and individuals in the fire extinguisher industry. Occupational Licensing (OL) staff endeavor to ensure that all companies and individuals engaged in the fire extinguisher industry are licensed as required and are in

compliance with the Fire Extinguisher Industry Act and rules. OL staff offer licensing examinations to individuals wishing to engage in the industry, investigate complaints made against the industry, and perform job site inspections to verify companies and individuals involved in the industry are licensed.

FIRE EXTINGUISHER INDUSTRY COMMITTEE

This Committee is mandated by statute (59 O.S., Section 1820.1 et seq.) to assist and advise the Commissioner on all matters relating to the formulation of rules and standards in accordance with the Fire Extinguisher Licensing Act. The Committee consists of seven members. One member is the Commissioner of Health or a designated representative. One member is the State Fire Marshal, or a designated representative. One member is the Assistant State Fire Marshal, or a designated represen-

tative. Four members are appointed by the State Board of Health. Three of the appointed members must have at least five years of experience in the fire extinguisher industry. One of the appointed members must be a lay member. No member of the Committee can have any kind of employment relationship with any other member. A majority of Committee members constitutes a quorum to transact official business.

Committee Members

*Chad Miller, Chairman
Ed Hewett, Vice-Chair
Eric Peoples, Secretary
Jon Roberts
Allen Heilaman
Vernon Bolz*

HEARING AID PROGRAM

<http://old.health.ok.gov>

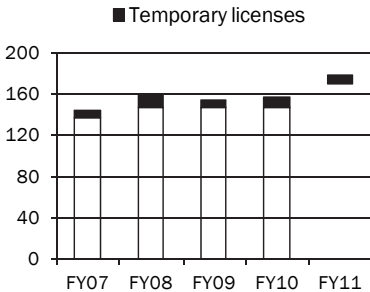
Clients Served:

Licensed hearing aid dealers and fitters, and consumers who utilize the services of the hearing aid industry.

Contact Person:

(Vacant), Director
405.271.5779
Fax: 405.271.5286

Licensed Hearing Aid Dealers and Fitters



Authority:

63 O.S. Sections
1-1750, et seq.
OAC 310:265

Funding Source:

Fees Collected

Fees:

Initial Hearing Aid Dealers Test (\$95.00 exam fee; \$50.00 license fee).....	\$145.00
Hearing Aid Dealer Retest Fee	\$95.00
Temporary Hearing Aid Dealer License.....	\$15.00
Hearing Aid Dealer Renewal Fee (through January 30).....	\$50.00
Hearing Aid Dealer Late Renewal Fee (through February 28).....	\$75.00
Hearing Aid Dealer Late Renewal Fee (after February 28).....	\$100.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed hearing aid dealers and fitters	136	146	147	146	169
Temporary licenses	8	14	6	11	9
Fees collected	\$10,055	\$12,575	\$10,280	\$12,785	\$11,290

i This program was created to protect the public from unqualified and unscrupulous individuals involved in the hearing aid industry. Occupational Licensing (OL) staff endeavor to assure that all companies and individuals engaged in the hearing aid industry are licensed as required and are in compliance with the applicable rules. OL staff offer examinations a minimum of twice a year for applicants wishing to

become licensed, and investigate complaints made against the industry. The Department utilizes suggestions from the Hearing Aid Advisory Council, hearing aid industry, and other interested persons to develop rule changes, as the need for rule change is recognized. Proposed changes are discussed at public meetings prior to being presented to the Board of Health for consideration.

HEARING AID ADVISORY COUNCIL

This Council is mandated by statute (63 O.S., Section 1-1753) to serve in an advisory capacity to the State Board of Health, and to make recommendations to the Board concerning policy matters affecting hearing aid dealers and fitters in the state. The Council consists of seven members who

are appointed by the State Board of Health. Four members must be hearing aid dealers and fitters, one member must be an Otolaryngologist who is certified by the American Board of Otolaryngology or is eligible for such certification, one member must be an audiologist, and one member must be a layper-

son. Members are appointed for a three year term. Each member may continue to serve after the

expiration of his or her term until such time as a successor is appointed.

Advisory Council Members

Larry Campbell, Chair
Shohn Armstrong
Dr. Larry Engelmann
Craig Myers
Barbara Rollins
Janie Sylvester
(Vacant)

HOTELS-MOTELS

<http://cpd.health.ok.gov>

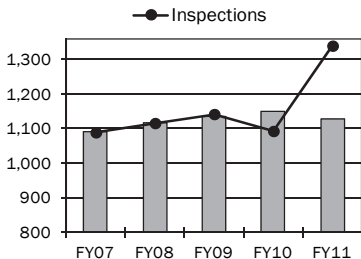
Clients Served:

Hotel-motel owners, managers and operators, and the general public who utilize services of the hotel-motel industry.

Contact Person:

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

Licensed Hotels-Motels



Authority:

63 O.S. Section
1-1201
OAC 310:285

Funding Source:

Fees Collected

Fees:

\$50.00 to \$100.00 dollars depending on the class of the permit.

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Licensed hotels-motels</i>	1,089	1,116	1,134	1,149	1,126
<i>Hotel-motel inspections</i>	1,089	1,116	1,142	1,093	1,340
<i>Fees collected</i>	*	*	*	*	*

*Fee collections for hotels-motels are included in the fee collections for the Retail Foods program area.



This program serves to monitor the sanitary conditions existing in hotels-motels for compliance with regulatory standards established by the Department. Consumer Protection Division staff endeavor to provide consumers reasonable assurance of sanitary conditions. Regulations address buildings and appurtenances thereto, including plumbing, ventilation and lighting,

construction, cleanliness and bactericidal treatment of equipment and utensils, linens, cleanliness and hygiene of personnel, toilet facilities, disposal of wastes, water supply, and any other items deemed necessary to safeguard the health, comfort and safety of guests being accommodated.

LICENSED BEHAVIORAL PRACTITIONERS

<http://pcl.health.ok.gov>

Clients Served:

Licensed behavioral practitioners, applicants, and consumers who utilize the services of behavioral practitioners.

Contact Person:

Nena West, Director
 405.271.6030
 Fax: 405.271.1918
 nenaw@health.ok.gov

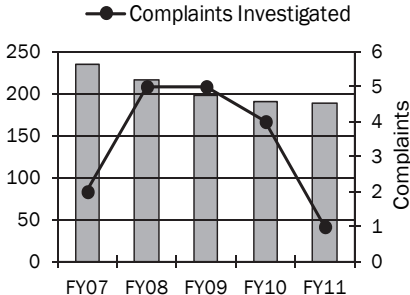
Authority:

59 O.S. Sections
 1930 et seq.
 OAC 310:403

Funding Source:

Fees Collected

Licensed Behavioral Practitioners



Fees:

Application	\$275.00
Exam	\$75.00
Renewal	\$100.00

Consumer Health Services

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed Behavioral Practitioners	234	216	198	191	189
Applicants for licensure who took the exam	0	0	0	3	2
Complaints investigated	2	5	5	4	1
Disciplinary actions	0	0	1	1	1
Fees collected	\$21,440	\$20,140	\$18,275	\$16,850	\$19,430

i This program implements the Oklahoma Licensed Behavioral Practitioner Act passed by the legislature. Licensed Behavioral Practitioner (LBP) staff license and regulate qualified persons rendering professional behavioral health services to individuals and groups. LBP staff process

applications for licensure, establish minimum standards, review documentation of the completion of required pre-licensing supervision, issue licenses, review continuing education, process complaints and conduct hearings.

OKLAHOMA LICENSED BEHAVIORAL PRACTITIONER ADVISORY BOARD

This Advisory Board is mandated by statute (59 O.S., Section 1930) to assist in administering the provisions of the Licensed Behavioral Practitioner Act. The Advisory Board consists of seven members appointed by the Commissioner of Health with the advice and consent of the State Board of Health. Four members must be Licensed Behavioral Practitioners, one member must be a licensed mental

health professional other than a Behavioral Practitioner and two members must be laypersons not associated with the practice of behavioral health services. Appointees are selected from a list of qualified candidates submitted by the Executive Board of the North American Association of Masters in Psychology in conjunction with the executive committees of all state professional behavioral health

associations who represent a specialty recognized pursuant to the Act. Board members are ineligible for reappointment for a period of three years following com-

pletion of their term. The Advisory Board must hold at least four regular meetings each year. Four members constitute a quorum.

Advisory Board Members

*Kimberly Cox, M.S., Chair
Lesia Foerster, M.Ed., Vice-Chair
Mark Englander, Ph.D., Secretary
Jim Gasso, Member*

*Curtis Gilley, M.Ed., Member
David Owen, Member
Lorry Youll, Ph.D., Member*

LICENSED GENETIC COUNSELORS

<http://pcl.health.ok.gov>

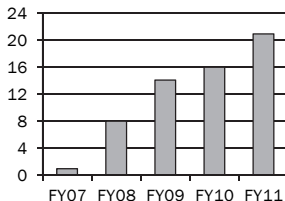
Clients Served:

Licensed genetic counselors, applicants, and consumers who utilize the services of licensed genetic counselors.

Contact Person:

Nena West, Director
405.271.6030
Fax: 405.271.1918
nenaw@health.ok.gov

Licensed Genetic Counselors



Authority:

63 O.S. Sections
1-561 et seq.
OAC 310:406

Funding Source:

Fees Collected

Fees:

Application: \$300.00
 Renewal: \$200.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed Genetic Counselors	1	8	14	16	21
Complaints investigated	0	0	0	0	0
Disciplinary actions	0	0	0	0	0
Fees collected	\$300	\$1,077	\$2,000	\$1,652	\$2,700

i This program implements the Oklahoma Genetic Counseling Licensure Act passed by the legislature. Licensed Genetic Counselors (LGC) staff license and regulate qualified persons rendering genetic counseling services to individuals and families in regard to estimating the likelihood of occurrence or recurrence of a birth

defect or any potentially inherited or genetically influenced condition, among other genetic counseling activities. LGC staff process applications for licensure, establish minimum qualifications, issue licenses, review continuing education requirements, process complaints, and conduct hearings.

OKLAHOMA GENETIC COUNSELING ADVISORY COMMITTEE

This Advisory Committee is established by rule (OAC 310:406-3-1) to assist in administering the provisions of the Genetic Counseling Licensure Act. The Advisory Committee consists of five members who are appointed by the Commissioner of Health. Two members must be licensed genetic counsel-

ors, one member must be an ethicist or a geneticist currently licensed by the State Board of Examiners for Medical Licensure and Supervision of the Board of Osteopathic Examiners. One member must be a representative of the Oklahoma Genetics Advisory Council and one member must be a

layperson who is not affiliated with any practice of genetic counseling. The first Advisory Committee will serve staggered terms and thereafter, at the expiration of the term of each member, the Commissioner will appoint a successor for

a four year term. Advisory Committee members may be reappointed at the completion of their term. The Advisory Committee may hold four regular meetings each year. Three members of the Advisory Committee constitute a quorum.

Advisory Committee Members

*Mary Rindler, M.S., Chair
Patrick Wilson, M.S., Vice-Chair
Michael Kayser, D.O., Secretary
Susan Hassed, M.S., Member
Joni Bruce, Member*

LICENSED MARITAL AND FAMILY THERAPISTS

<http://pcl.health.ok.gov>

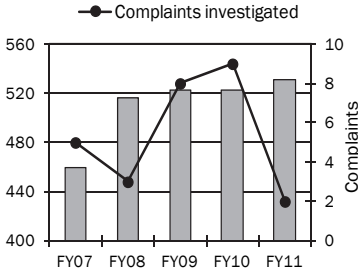
Clients Served:

Licensed marital and family therapists, applicants, and consumers who utilize the services of marital and family therapists.

Contact Person:

Nena West, Director
405.271.6030
Fax: 405.271.1918
nenaw@health.ok.gov

Licensed Marital and Family Therapists



Authority:
59 O.S. Sections
1925.1 et seq.
OAC 310:400

Funding Source:
Fees Collected

Fees:

Application	\$200.00
Exam.....	\$295.00
License.....	\$100.00
Renewal	\$100.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed Marital and Family Therapists	459	516	523	523	531
Applicants for licensure who took the exam	117	78	84	82	58
Complaints investigated	5	3	8	9	2
Disciplinary actions	0	0	1	0	1
Fees collected	\$62,645	\$58,091	\$58,449	\$42,891	\$56,499

i This program implements the legislature. Licensed Marital and Oklahoma Licensed Marital and Family Therapists (LMFT) staff Family Therapist Act passed by the license and regulate qualified

persons rendering professional marital and family therapy services to individuals, family groups and marital pairs, singly or in groups. LMFT staff process applications for licensure, administer examinations, establish minimum qualifica-

tions, review documentation of the completion of required pre-licensing supervision, issue licenses, review continuing education requirements, process complaints, and conduct hearings.

OKLAHOMA LICENSED MARITAL AND FAMILY THERAPIST ADVISORY BOARD

This Advisory Board is mandated by statute (59 O.S., Section 1925.4) to assist in administering the provisions of the Marital and Family Therapist Licensure Act. The Advisory Board consists of seven members who are appointed by the Commissioner of Health with the advice and consent of the State Board of Health. Five members must be licensed marital and family therapists for a minimum of five years immediately preceding appointment and actively engaged as marital and family therapists in rendering professional services in marital and family therapy, or in rendering services in marital and family therapy as members of the clergy, who are in good standing in their denominations, or in the education and training of master's, doctoral

or post-doctoral students of marital and family therapy, or in marital and family therapy research, and have spent the majority of the time devoted to such activity during the two years preceding appointment to the Advisory Board. Members must be laypersons that are not affiliated with any practice of marital and family therapy. All appointees are selected from a list of qualified candidates submitted by the executive committees of all marital and family therapists in this State who represent a specialty recognized pursuant to the provisions of the Marital and Family Therapist Licensure Act. Appointees must be a resident of the State of Oklahoma. Members are appointed for a four-year term. Advisory Board members are ineligible for reappointment for a pe-

Consumer Health Services

riod of three years following completion of their term. The Board must hold at least four regular meetings each year. Four members of the Board constitute a quorum.

Advisory Board Members

*Joanni Sailor, Ph.D., Chair
Canaan Crane, Ph.D., Vice-Chair
Brenda Gill, M.S., Secretary
Paul Austin, J.D., Member
Jill Butler, M.S., Member
Paul Emrich, M.S., Member
Cathy Miller, B.S., R.N., Member*

LICENSED PROFESSIONAL COUNSELORS

<http://pcl.health.ok.gov>

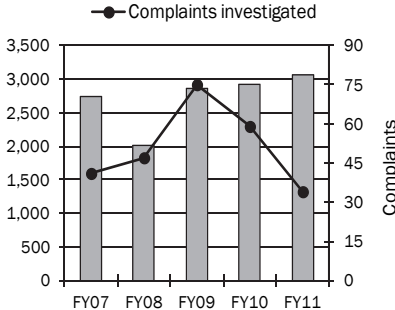
Clients Served:

Licensed professional counselors, applicants, and consumers who utilize the services of professional counselors.

Contact Person:

Nena West, Director
405.271.6030
Fax: 405.271.1918
nenaw@health.ok.gov

Licensed Professional Counselors



Authority:
59 O.S. Sections
1901 et seq.
OAC 310:405

Funding Source:
Fees Collected

Fees:

Application	\$145.00
Exam.....	\$185.00
License.....	\$ 90.00
Renewal	\$ 80.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed Professional Counselors	2,735	2,008	2,857	2,916	3,059
Applicants for licensure who took the exam	70	187	284	255	341
Complaints investigated	41	47	75	59	34
Disciplinary actions	1	2	9	6	2
Fees collected	\$270,428	\$256,129	\$277,323	\$175,450	\$308,833

i This program implements the Oklahoma Licensed Professional Counselor Act passed by the legislature. Licensed Professional

Counselors (LPC) staff license and regulate qualified persons rendering professional counseling services to individuals and groups in

regard to personal-social concerns, educational progress and occupations, among other professional counseling activities. LPC staff process applications for licensure,

administer examinations, establish minimum qualifications, issue licenses, review continuing education requirements, process complaints, and conduct hearings.

OKLAHOMA LICENSED PROFESSIONAL COUNSELORS ADVISORY BOARD

This Advisory Board is mandated by statute (59 O.S., Section 1904) to assist in administering the provisions of the Licensed Professional Counselors Act. The Advisory Board consists of seven members who are appointed by the Commissioner of Health with the advice and consent of the State Board of Health. Five members must be licensed professional counselors and two members must be laypersons who are not affiliated with any practice of counseling or delivering of health or mental health services. Appointees are selected from a list of qualified candidates

submitted by the Executive Committee of the Oklahoma Counseling Association in conjunction with the executive committees of all state professional counseling associations. Appointees must be a resident of the State of Oklahoma. Members are appointed for a four-year term. Board members are ineligible for reappointment for a period of three years following completion of their term. The Advisory Board must hold at least four regular meetings each year. Four members of the Committee constitute a quorum.

Advisory Board Members

Royce Caldron, M.S., Chair
Bill Schiller, Ed.D., Vice-Chair
Laressa Beliele, M.Ed., Secretary
Sharon Davis, M.Ed., Member

Paige Williams, Ph.D., Member
(Vacant), Member
(Vacant), Member

MAMMOGRAPHY QUALITY STANDARDS ACT

<http://cpd.health.ok.gov>

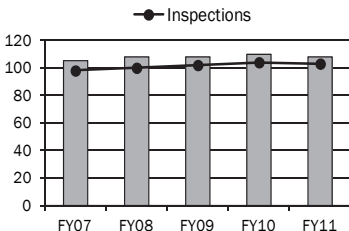
Clients Served:

Facilities providing mammography services and consumers who utilize those services.

Contact Person:

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

Accredited & Provisionally Accredited Mammography Facilities



Authority:

21 Code of Federal Regulations, Part 900

Funding

Source:
Federal Funds

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Accredited and provisionally accredited mammography facilities</i>	105	108	108	110	108
<i>Inspections performed</i>	98	100	102	104	103



This program was developed to improve early diagnostic capabilities in detecting breast cancer.

Consumer Protection Division (CPD) staff evaluate equipment function, ensure continuing ac-

Consumer Health Services

creditation of facilities, and evaluate qualifications of personnel involved with mammography. CPD staff also perform on-site testing of

mammography equipment and review the credentials of staff to determine if they are qualified to perform mammography activities.

MEDICAL MICROPIGMENTATION PROGRAM

<http://cpd.health.ok.gov>

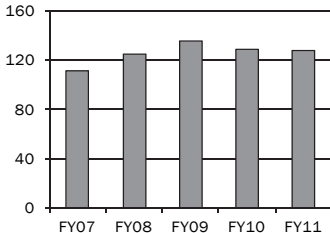
Clients Served:

Persons who perform micropigmentation services, and the citizens of Oklahoma who obtain the services.

Contact Person:

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

**Certified
Micropigmentologists**



Authority:

63 O.S. Sections
1-1450 et seq.
OAC 310:234

Funding Source:

Fees Collected

Fees:

New application for certification (includes subsequent cost of exams and re-exams)	\$500.00
Renewal of certification	\$100.00
Reinstatement of certification (if the renewal of the certification is 30 days or more after the expiration date)	\$375.00
Replacement of a certificate	\$125.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Certified micropigmentologists</i>	111	125	136	129	128
<i>Fees collected</i>	\$43,755	\$24,895	\$21,655	\$19,435	\$18,315

i This program was created to provide sufficient regulation to assure the protection of the public's health due to the growing demand of medical micropigmentation in the State of Oklahoma. Medical micropigmentation is a form of permanent cosmetics and requires a medical procedure in which any color or pigment is applied with a needle or electronic machine. The law authorizing medical micropigmentation does not include tattooing, thus, medical micropigmentation does not involve placing on the body any pictures, images, numbers, signs, letters of the alphabet, or designs. Individuals must apply to the De-

partment for certification if they wish to provide this procedure under the supervision of their employing dentist, medical physician, and/or osteopathic physician. Without proper certification as a micropigmentologist, as defined by the Department, only a physician may legally provide this procedure at this time. Consumer Protection Division staff process certification applications, promulgate rules of practice for medical micropigmentation training requirements and establish criteria for the certification of persons authorized to perform medical micropigmentation.

MEDICAL MICROPIGMENTATION ADVISORY COMMITTEE

This Committee is mandated by statute (63 O.S., Section 1-1456) to assist in: (1) the establishment of criteria for certification, training and testing; (2) the promulgation of rules for the practice of medical micropigmentation; and (3) the periodic evaluation of the application and enforcement of the laws and rules regulating medical micropigmentation. The Medical Micropigmentation Advisory Committee is appointed by the State Commissioner of Health and consists of seven members. One member must be a physician licensed by the State Board of Medical Licensure and Supervision. One member must be a physician licensed by the State Board of Osteopathic Examiners. One mem-

ber must be a dentist licensed by the Board of Dentistry. Three members must each hold a current certificate issued by the State Board of Health pursuant to the provisions of the Oklahoma Medical Micropigmentation Regulation Act. One member must be from the public and must not be licensed to practice by the Oklahoma Board of Nursing, the State Board of Medical Licensure and Supervision, the State Board of Osteopathic Examiners, or the Board of Dentistry. Each member serves at the pleasure of the State Commissioner of Health.

Advisory Committee Members

Linda Lea, R.N., Micropigmentationologist, Chair
Jana S. Barker, Layperson
Harry Galoob, M.D.
James C. Griffith, II, D.D.S.
Colleen Hill, L.P.N., Micropigmentationologist
Laura Kilkenny, D.O.
Janice K. Miller, Micropigmentationologist

PUBLIC BATHING PLACES

<http://cpd.health.ok.gov>

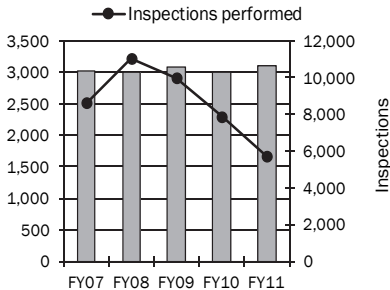
Clients Served:

Individuals interested in building or modifying a public bathing place, including pools, spas, water slides and attractions, and therapy water units.

Contact Person:

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

Licensed Public Bathing Places



Authority:

63 O.S. Sections
1-1013 et seq.
OAC 310:250
OAC 310:315
OAC 310:320

Funding Source:

Fees Collected

Fees:

Type 82 Class I “Indoor Facility”

Public Bathing Places License Fee	\$50.00
Public Bathing Places Re-inspection Fee	\$250.00

Type 82 Class O “Outdoor Facility”

Public Bathing Places License Fee	\$50.00
Public Bathing Places Re-inspection Fee	\$250.00

Consumer Health Services

Construction Permit Fees:

New Pools	\$100.00 per 5000 gallons (\$500.00 minimum)
Modification to Existing Pool	\$50.00 per 5000 gallons (\$250.00 minimum)
New Spas	\$50.00 per 100 gallons (\$250.00 minimum)
Modification to Existing Spa	\$25.00 per 100 gallons (\$125.00 minimum)

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Licensed public bathing places</i>	3,028	3,005	3,096	2,996	3,114
<i>New construction permits issued</i>	82	121	108	77	58
<i>Inspections performed</i>	8,652	11,061	10,008	7,882	5,734
<i>Certified Pool Operator classes taught</i>	16	25	24	23	45
<i>Certified Pool Operator class attendees</i>	539	650	728	665	2,966
<i>Fees collected for licenses</i>	\$141,575	\$143,575	\$147,725	\$148,275	\$141,555
<i>Fees collected for construction permits</i>	-----	-----	-----	-----	\$43,425

i This program was created to reduce the incidence of illness and injury in public bathing places. All public bathing places must be maintained in a sanitary and safe condition, and all owners, managers, operators, and other attendants in charge of any public bathing place are responsible for the sanitation and safety of such places during the season or seasons when the public bathing

place is in use. Consumer Protection Division staff develop, write and implement rules, provide for review of plans by the Department through contract, prepare and issue permits, provide for enforcement of facilities not in compliance, train industry and consumers, track statistical data, and provide technical assistance. Inspection of the facilities is performed by county sanitarians.

RETAIL FOODS

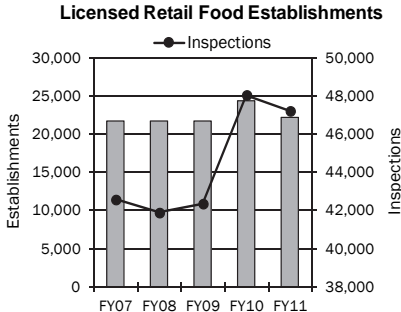
<http://cpd.health.ok.gov>

Clients Served:

All segments of the retail food service industry, including restaurants, bars, retail food stores, mobile operators, temporary events, and the clients of those facilities/events.

Contact Person:

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov



Authority:

63 O. S. Sections
1-1101 et seq.
OAC 310:257

Funding Source:

Fees Collected

Fees:

Initial license fees are \$350.00 with a yearly renewal fee of \$250.00. Late renewal fees apply to any application received 30 days beyond expiration date. If a license is more than 90 days past expiration, it cannot be renewed, but instead shall be reapplied for. Licensing fees for schools, hospitals, and non-profit institutions are \$100.00 for the initial license with a yearly renewal fee of \$100.00. The contract amount for inspection of DHS child care facilities is \$100.00 per inspection.

Consumer Health Services

Statistics:	FY07	FY08	FY09	FY10	FY11
Licensed retail					
food establishments	21,706	21,598	21,695	24,369	22,127
Inspections performed					
in retail food					
establishments	42,557	41,872	42,342	48,036	47,201
Inspections performed					
in child care facilities	-----	-----	-----	794	653
Total food establishments	21,706	21,598	21,695	25,163	22,780
Total inspections	42,557	41,872	42,342	48,830	47,854
Fees collected for retail					
food establishments*	\$2,087,730	\$1,955,440	\$2,052,041	\$5,494,102	5,414,265
Fees collected for child					
care facility inspections	-----	-----	-----	\$79,400	65,300

*This also includes fees from the Hotels-Motels and Wholesale Foods programs.

i The food service inspection program was created in 1923. It is a traditional public health program for the protection of the consumer and of all food goods sold in the State. Consumer Protection Division (CPD) staff endeavor to reduce the incidence of food-borne illness and provide for a sanitary environment in food service establishments. CPD staff develop, write, implement and interpret rules, issue mandated licenses, track statistical data, provide for enforcement of establishments not in compliance, train industry food service workers and sanitarians in safe food service practices, meet with consumer advisory committees, and provide

technical assistance as necessary.

Inspections are also conducted for the food service operations in daycare centers for children and residential child care facilities. These inspections are performed through contract at the request of the Oklahoma Department of Human Services which is the Agency with jurisdiction and responsibility for regulation of child care facilities.

On-site inspection of food service operations in both retail establishments and child care facilities are performed by County Health Department Sanitarians.

OKLAHOMA FOOD SERVICE ADVISORY COUNCIL

Title 63, Section 1-106.3 of the Oklahoma Statutes creates the Oklahoma Food Service Advisory Council within the State Department of Health. The purpose of the Council is to advise the State Board of Health, the Commissioner of Health, and the Department regarding food service establishments and recommend actions to improve sanitation and consumer protection. Meetings of the Council are held on a quarterly basis.

The Advisory Council has the duty and authority to: (1) Review and approve in an advisory capacity only rules and standards for food service establishments operating in this state; (2) Evaluate, review and make recommendations regarding Department inspection activities; and (3) Recommend and approve quality indicators and data submission requirements for food service establishments which shall be used by the Department to monitor compliance with licensure requirements and to publish an annual report of food service

establishment performance.

The Advisory Board consists of thirteen (13) members. Eight (8) members are appointed by the Commissioner of Health with the advice and consent of the State Board of Health, from a list of three names for each position provided by an association representing the majority of the restaurant owners in the State. These eight appointments to the Council include the following:

- One (1) member represents the Oklahoma Restaurant Association;

- One (1) member represents the Oklahoma Hotel and Motel Association;

- One (1) member represents the Oklahoma Grocers Association;

- One (1) member represents Food Service Education;

- One (1) member represents Food Processing Education;

- One (1) member shall be an Independent Food Service Operator;

- One (1) member shall be a

Consumer Health Services

Food Processor; and

-One member shall be a Citizen representing the public and shall not be a food service establishment operator or employee and shall not be a member of a food service governing board.

The remaining five appointments consist of:

-The Director of the Oklahoma City-County Health Department, or a designee;

-The Director of the Tulsa City-County Health Department, or a designee;

-Two (2) Directors from other county health departments in this State or a designee, appointed by the Commissioner; and

-The Director of the State Department of Agriculture, or a designee.

Members of the Advisory Council serve three year terms.

Advisory Council Members

*Yves Badaroux
Mike Bailey
Michael Echelle
J. Roy Escoubas, Ph.D.
Jim Hopper
Tina R. Johnson, MPH, RN
Harold Kelly
Elizabeth Nutt
Park Ribble
Bill Ricks
Bill Ryan, Ed.D., RD, LD
Stan Stromberg
John Williams*

SANITARIAN AND ENVIRONMENTAL SPECIALIST PROGRAM

<http://old.health.ok.gov>

Clients Served:

Registered professional sanitarians, sanitarians in training, environmental specialists, environmental specialists in training, and consumers who utilize services provided by registered professional sanitarians and environmental specialists.

Contact Person:

(Vacant), Director
405.271.5779
Fax: 405.271.5286

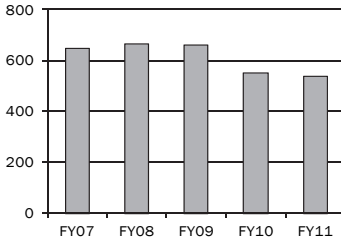
Authority:

59 O.S. Sections
1150 et seq.
OAC 310:345
State registration
required.

Funding Source:

Fees Collected

**Licensed Sanitarians and
Environmental Specialists**



Fees:

Initial License for Registered Professional Sanitarian or
Registered Professional Environmental Specialist \$25.00
Initial License for both Registered Professional Sanitarian and
Registered Professional Environmental Specialist \$50.00
Initial License for Sanitarian-in-training \$10.00

Consumer Health Services

Initial License for Environmental Specialist-in-training.....	\$10.00
Initial License for both Sanitarian-in-training and Environmental Specialist-in-training	\$20.00
Registered Professional Sanitarian or Registered Professional Environmental Specialist Renewal Fee (through February 28).....	\$35.00
Registered Professional Sanitarian or Registered Professional Environmental Specialist Late Renewal Fee (after February 28).....	\$45.00
Registered Professional Sanitarian and Registered Professional Environmental Specialist Renewal Fee (through February 28).....	\$70.00
Registered Professional Sanitarian and Registered Professional Environmental Specialist Late Renewal Fee (after February 28)	\$90.00
Life Registered Sanitarian or Environmental Specialist One-time Fee	\$60.00
Examination Fee	\$30.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Licensed sanitarians and environmental specialists*</i>	647	668	661	554	538
<i>Fee collections</i>	\$6,567	\$6,818	\$20,635	\$16,216	\$14,723

**This includes registered professional sanitarians, sanitarians in training, environmental specialists and environmental specialists in training.*

i This program was created to establish minimum qualifications for employment in state, federal, and private environmental programs for performing inspections

of regulated facilities (which includes barber shops, restaurants, food manufacturers, percolation testing and inspections for septic systems, bedding manufacturers

and refurbishers, etc.) and investigating complaints. Occupational Licensing (OL) staff endeavor to provide a means to standardize inspection or regulated facilities and to resolve complaints in a timely manner. OL staff offer examinations six times per year to individuals wishing to be registered. The Department utilizes suggestions from the Sanitarian

and Environmental Specialist Registration Advisory Council, the industry, and other interested persons to develop rule changes, as the need for rule change is recognized. The proposed changes are discussed at public meetings, prior to being presented to the Board of Health for consideration.

SANITARIAN AND ENVIRONMENTAL SPECIALIST REGISTRATION ADVISORY COUNCIL

This Council is mandated by statute (59 O.S., Section 1150.5) to assist and advise the State Board of Health in licensing and otherwise regulating sanitarians and environmental specialists. The Council consists of nine members. One member must be the Commissioner of Health or his designee, one member must be the Executive Director of the Department of Environmental Quality or his designee, one member must be the Administrator of the Office of Personnel Management or his designee, one member must be appointed by the Director of the Okla-

homa City-County Health Department, one member must be appointed by the Director of the Tulsa City-County Health Department, two members must be employed by state government and appointed by the Commissioner of Health, and two members must be appointed by the Executive Director of the Department of Environmental Quality (one who is employed by private industry and one who is employed by the Indian Health Service of the Public Health Service or by a tribal government with an office in the State of Oklahoma). With the exception of the

Consumer Health Services

Administrator of the Office of Personnel Management or his designee, the appointed members must have at least five years of experience as registered sanitarians or environmental specialists. Members are appointed for a three year term or until a successor is appointed. Sixty days prior to the expiration of the term to be filled or whenever a vacancy occurs, any statewide organization whose membership represents more than

20% of the registered sanitarians and environmental specialists in the state may recommend three persons for such position or vacancy to the appointing authority. The Council must meet at such times, as it deems necessary to implement the Oklahoma Sanitarian Registration Act. A majority of Council members constitutes a quorum.

Advisory Council Members

Alisa Mankins, Chair

Mike Bailey

Bob Rabatine

Jim Echelle, Vice-Chair

Chad Newton

Vernon Bolz

Gary Collins, R.P.S.

Patricia Nelson

Harold Culy

TATTOOING AND BODY PIERCING PROGRAM

<http://cpd.health.ok.gov>

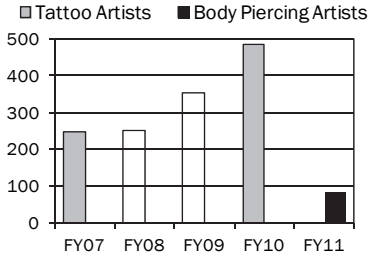
Clients Served:

Owners of tattooing and/or body piercing establishments, persons performing tattoos and/or body piercings, and clients who seek tattooing and/or body piercing services.

Contact Person:

K. C. Ely, Director
 405.271.5243
 Fax: 405.271.3458
 kcely@health.ok.gov

Tattooing and Body Piercing Program



Authority:

21 O.S. Section 842.1
 OAC 310:233
 State license or permit required.
 Annual renewal.

Funding Source:

Fees Collected

Fees:

Tattoo Artist Licensing Fees

Initial license	\$250.00
Renewal license	\$250.00

Consumer Health Services

Late renewal license (not renewed within 30 days after expiration	\$350.00
Temporary license (not to exceed 30 days)	\$250.00
Body Piercing Artist Licensing Fees	
Initial license	\$250.00
Renewal license	\$250.00
Late renewal license (not renewed within 30 days after expiration	\$350.00
Temporary license (not to exceed 30 days)	\$250.00
Tattoo Establishment Permit Fees	
Initial license	\$1,000.00
Renewal license	\$500.00
Late renewal license (not renewed within 30 days after expiration	\$750.00
Temporary event license (not to exceed 7 days)	\$250.00
Body Piercing Establishment Permit Fees	
Initial license	\$500.00
Renewal license	\$250.00
Late renewal license (not renewed within 30 days after expiration	\$350.00
Temporary event license (not to exceed 7 days)	\$250.00

i This program was created to require persons who own tattooing and/or body piercing establishments to maintain a level of sanitation in the facility and a level of sterilization in the equipment used to reduce the possibility of transmitting disease through the body piercing procedure. The program

also requires persons performing tattooing or body piercing to be licensed and to have attended an approved blood borne pathogens training session.

Consumer Protection Division (CPD) staff endeavor to establish procedures and standards to prevent infection and transmission of

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Licensed tattoo artists</i>	245	236	322	450	237
<i>Temporary tattoo artists</i>	2	15	32	35	126
<i>Licensed tattoo establishments</i>	85	99	100	108	97
<i>Fines and fees collected for tattoo artist licenses</i>	\$44,000	\$59,300	\$80,500	\$90,850	\$83,450
<i>Licensed body piercing artists</i>	48	53	54	55	68
<i>Temporary body piercing artists</i>	0	1	3	0	16
<i>Licensed body piercing establishments</i>	54	49	47	50	48
<i>Fees collected for body piercing artist licenses</i>	\$9,250	\$14,050	\$13,800	\$18,350	\$18,550
<i>Fees collected for temporary artist licenses</i>	\$2,500	\$4,000	\$8,750	\$8,500	\$10,900
<i>Fees collected for establishment licenses</i>	\$100,000	\$89,000	\$56,000	\$58,000	\$78,175

disease. CPD staff issue temporary and permanent licenses, regulate facility requirements, regulate equipment setup and requirements, recommend procedures for maintaining sanitary conditions,

and evaluate and approve training sessions on blood borne pathogens. The legislature did not establish an advisory council for this program.

WHOLESALE FOODS, MANUFACTURERS, PROCESSORS, BOTTLED WATER, WATER VENDING, AND DEPARTMENT OF CORRECTIONS FACILITIES

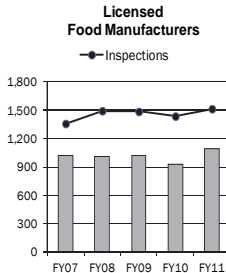
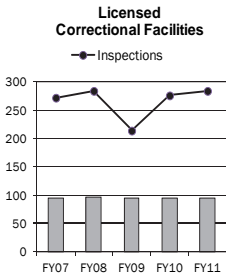
<http://cpd.health.ok.gov>

Clients Served:

All segments of wholesale foods, including manufacturers, processors, bottled water, water vending industry and Department of Correction facilities.

Contact Person:

K. C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov



Authority:

63 O.S.
Sections 1-
1101 et seq.
OAC 310:225
OAC 310:260

Funding

Source:
Fees Collected


Fees:

Initial license..... \$350.00
Renewal license..... \$250.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Food manufacturers licensed</i>	1,023	1,009	1,020	924	1,093
<i>Food manufacturer inspections</i>	1,359	1,494	1,486	1,437	1,515
<i>Correctional facilities licensed</i>	95	96	95	95	95
<i>Correctional facility inspections</i>	272	284	214	276	284
<i>Fees collected</i>	*	*	*	*	*

*Fee collections for this program area are included in the fee collections for the Retail Foods program area.

 The food service inspection program was created in 1923, which was later expanded to include the manufacture of foods and the distribution process. Bottled water and water vending regulations were added in the 1980s. The inspection of Department of Correction facilities was mandated by a federal court and has continued. This is a traditional public health program for the protection of the consumer and of all food goods manufactured in the state. This program is part of a shared responsibility between the state and the Food and Drug Administration under the Federal Food, Drug, and Cosmetic Act. Consumer Protection Division (CPD) staff

endeavor to reduce the incidence of food-borne illness and to provide for a sanitary environment in food manufacturing, processing and wholesale establishments. CPD staff develop, write, implement and interpret rules, issue mandated licenses, track statistical data, provide for enforcement of establishments not in compliance, train industry and consumers in food manufacturing practices, meet with consumer advisory committees, and provide technical assistance as necessary. Inspection of the facilities is performed by CPD staff sanitarians, except for Oklahoma City and Tulsa, where it is performed through contract.

X-RAY TUBES

<http://cpd.health.ok.gov>

Clients Served:

Hospitals, physician offices, dental practices, veterinary practices, chiropractic offices, podiatry practices, employees who work in these entities and consumers who utilize services provided by these entities.

Contact Person:

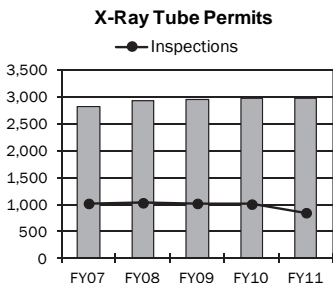
K.C. Ely, Director
405.271.5243
Fax: 405.271.3458
kcely@health.ok.gov

Authority:

63 O.S. Sections
1-1502 et seq.
OAC 310:281

Funding Source:

Fees Collected



Fees:

The fee for this permit varies, depending upon the number of tubes in the facility, and the class of permit requested. Fees range from \$30.00 to \$100.00 for the initial tube, and \$20.00 to \$90.00 for each additional tube. \$500.00 is the maximum fee charged for annual renewal.

Statistics:

	FY07	FY08	FY09	FY10	FY11
Permits issued	2,831	2,933	2,953	2,980	2,980
Inspections performed	1,028	1,040	1,028	1,015	856
Fees collected	\$331,525	\$361,555	\$361,860	\$234,265	\$359,255

i This program was created to protect the general public, health care employees, and patients from excessive radiation emitted by diagnostic x-ray equipment. Consumer Protection Division (CPD) staff endeavor to minimize exposure to radiation encountered by

these individuals. CPD staff test diagnostic x-ray equipment for proper functioning, make practitioners and health care workers aware of proper techniques to minimize exposure, and monitor procedures utilized during diagnostic x-ray examinations.

RADIATION ADVISORY COMMITTEE

This Committee is mandated by statute (63 O.S., Section 1-1504.1) to serve in an advisory capacity to the State Board of Health in the formulation and amendment of rules and regulations relating to the use of diagnostic x-ray systems. The Committee consists of seven members appointed by the Board on the

basis of training and experience in the field of diagnostic x-ray technology and procedure. They serve in an advisory capacity to the Board in the formulation and alteration of rules and regulations relating to radiation hazards and radiation protection. Members of the committee serve at the pleasure of the Board.

Advisory Committee Members

*B. Wally Ahluwalia, Ph.D.
Carl R. Bogardus, Jr., M.D.
Farah Massod, D.D.S.
Dean R. Gullingim, D.O., F.A.O.C.R.
Mike Morris, M.S.
Thomas J. Ranallo, B.S.R.T.
Robert Bahr, D.V.M.*

Health Resources Development Service

James Joslin, Chief

405.271.6868

Fax: 405.271.7360

james@health.ok.gov

<http://hrds.health.ok.gov>

Health Facility Systems

Darlene Simmons, Director

405.271.6868

Fax: 405.271.7360

healthresources@health.ok.gov

Jail Inspection Division

John W. Judge, Jr., Director

405.271.3912

Fax: 405-271-5304

jails@health.ok.gov

Managed Care Systems

John W. Judge, Jr., Director

405.271.6868

Fax: 405.271.7360

healthresources@health.ok.gov

Nurse Aide Registry

Vicki Kirtley, Director

405.271.4085

Fax: 405.271.1130

nar@health.ok.gov

ADULT DAY CARE CENTER LICENSE APPLICATIONS

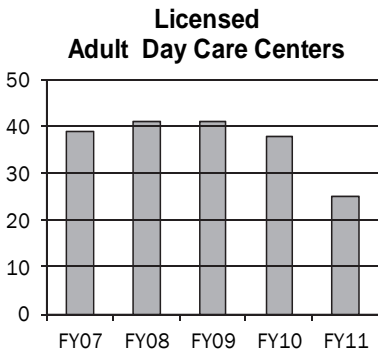
<http://hfs.health.ok.gov>

Clients Served:

Adult Day Care Centers and participants of the centers.

Contact Person:

Darlene Simmons, Director
405.271.6868
Fax: 405.271.7360
healthresources@health.ok.gov



Authority:

63 O.S. Sections
1-870 et seq.
OAC310:605

State license required;
annual renewal.

Medicare Certification
is not applicable.
Medicaid Certification
can be obtained
through the
Department of
Human Services.

There is no Certificate
of Need for this
program.

Funding Source:

Fees Collected

Fees:

Initial license and annual renewal 75.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Adult day care centers licensed	39	41	41	38	25
Total licenses issued, including renewals, bed changes, name changes, and changes of ownership	39	43	46	52	39
Fees collected	\$2,925	\$3,300	\$3,490	\$2,891	\$2,625

i This program was created to protect residents and to assure accountability of adult day care centers. The owner of each center must file a license application and submit a licensing fee annually. Health Facility Systems staff review the application for completeness, accuracy, and consistency

and issue a license. The applicant must provide a statement of ownership, a financial statement, and evidence of compliance with the requirements of all applicable federal, state and local laws and regulations. On-site activities are conducted by staff in Long Term Care.

CERTIFIED WORKPLACE MEDICAL PLANS

<http://hrds.health.ok.gov>

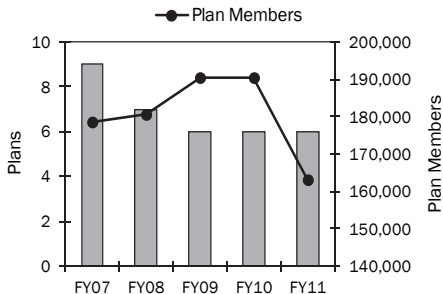
Clients Served:

Workplace medical plans, insurance companies, employers and employees who are covered by workplace medical plans.

Contact Person:

John W. Judge, Jr., Director
405.271.9444,
Ext. 57273
Fax: 405.271.7360
johnwj@health.ok.gov

Certified Workplace Medical Plans



Authority:

85 O.S. Sections
1 et seq.
OAC 310:657

Funding Source:

Fees Collected
and State Funds

Fees:

Initial certification and five year renewal	\$1,500.00
Annual on-site inspection.....	\$1,500.00
Follow-up visits	\$1,000.00
Change of ownership	\$1,500.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Number of certified workplace medical plans	9	7	6	6	6
Initial certifications processed	2	1	0	0	0
Five-year certification renewals	6	1	0	0	2
Changes of ownership	-----	0	0	0	1
Annual inspections	6	7	6	4	4
Follow-up inspections	-----	0	0	7	0
Complaints investigated	-----	1	0	1	0
Requests for information	1	0	0	0	1
Workplace medical plan members	178,625	180,643	190,496	190,496	163,195
Fees collected	\$12,000	\$15,000	\$9,375	\$6,693	\$4,500

i This program was created as part of the November 1994 State workers' compensation reform package to: (1) protect employees; (2) protect employers and workers' compensation insurance carriers; (3) ensure access to medical and health services provided in a managed care setting for workers' compensation compensable injuries; and (4) ensure the quality of services offered by certified workplace medical plans. Workplace medical plans operate statewide within approved geographic areas. Applications for five-year certification are reviewed. Amended con-

tracts and marketing materials are subject to desk reviews. Early calendar year 2006, Managed Care Systems (MCS) staff began site visits to ensure that medical services to a claimant and the medical management of the claimant's needs are adequately met in a timely manner and that the certified workplace medical plan is complying with all other applicable provisions of the Act and rules, and is operating in accordance with their current application. MCS staff also accept and investigate inquiries from any party seeking assistance.

CONTINUUM OF CARE FACILITIES AND ASSISTED LIVING CENTERS LICENSE APPLICATION

<http://hfs.health.ok.gov>

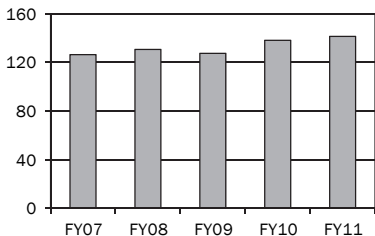
Clients Served:

Continuum of Care Facilities and Assisted Living Centers and their residents/participants. A continuum of care facility includes a nursing facility and either an assisted living center or an adult day care center.

Contact Person:

Darlene Simmons, Director
405.271.6868
Fax: 405.271.7360
healthresources@health.ok.gov

Licensed Continuum of Care Facilities and Assisted Living Centers



Fees:

\$10.00 per licensed bed for establishment, with a \$1,000.00 maximum.

\$10.00 per licensed bed per year, plus \$75.00 for any Adult Day Care Center for initial or renewal license.



This program was created to protect residents and to assure accountability of facilities/centers. An assisted living center is a home or establishment that may provide assistance with personal care,

medications, and ambulation. The center may also provide nursing supervision and intermittent or unscheduled nursing care. A continuum of care facility combines the services of a nursing facility

Authority:

63 O.S. Sections
1-890.1 et seq.
OAC 310:663

State license required;
annual renewal.

Medicare and Medicaid
certification are
applicable to nursing
facilities.

Certificate of Need is
applicable to nursing
facilities.

Funding Source:

Fees Collected

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Continuum of care facilities and assisted living centers licensed</i>	127	131	128	138	141
<i>Assisted living centers</i>	-----	119	117	126	124
<i>Nursing facilities with assisted living centers</i>	-----	12	11	12	17
<i>Nursing facilities with adult day care centers</i>	-----	0	0	0	0
<i>Total licenses issued, including renewals, bed changes, name changes, and changes of ownership</i>	146	141	159	119	170
<i>Fees collected</i>	\$87,376	\$91,869	\$93,530	\$113,662	\$71,172

with an assisted living center or an adult day care center. A continuum of care facility must also meet requirements applicable to nursing facilities, assisted living centers, and adult day care centers, as applicable. The owner of each facility or center must file a license

application and submit a licensing fee annually. After receipt of the fee, the application is reviewed for completeness, accuracy, and consistency. On-site activities are conducted by staff in Long Term Care.

HEALTH MAINTENANCE ORGANIZATIONS

<http://hrds.health.ok.gov>

Clients Served:

Health maintenance organizations, prepaid health plans, provider service networks, and consumers who purchase services from or are members of health maintenance organizations, prepaid health plans, or provider service networks.

Contact Person:

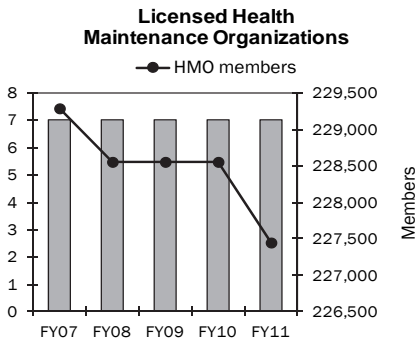
John W. Judge, Jr., Director
 405.271.9444,
 Ext. 57273
 Fax: 405.271.7360
 johnwj@health.ok.gov

Authority:

63 O.S. Sections
 1-105e
 36 O.S., Sections
 6901 et seq.
 OAC 310:659

Funding Source:


Fees Collected
 and State Funds



Fees:

Certificate of Authority\$1,500.00

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Number of licensed health maintenance organizations</i>	7	7	7	7	7
<i>HMO members</i>	229,286	228,554	228,554	228,554	227,450
<i>Fees collected</i>	\$0	\$1,500	\$0	\$0	\$0

 The Department's role as a regulator of health maintenance organizations is to certify to the Oklahoma Insurance Commissioner that each entity is in compliance with Section 6907 of the Health Maintenance Organization Act of 2003. The certification review conducted by staff from Managed Care Systems (MCS) includes quality of health care, internal quality assurance, patient record keeping and clinical records, provider credentialing and emergency services. The quality review may be administered with on-site inspections to ensure compliance.

nance organization's quality assurance processes are performed at least once every three years through contract with independent accrediting bodies. Health management organizations are responsible for payment of those reviews. The sharing of responsibilities between the two agencies has enhanced the consumer and provider protections. While the Office of the Insurance Commissioner focuses on financial and consumer protection issues, MCS staff focus on health and quality assurance.

Major on-site reviews to assess the effectiveness of the health mainte-

HOME CARE ADMINISTRATOR REGISTRY

<http://hcar.health.ok.gov>

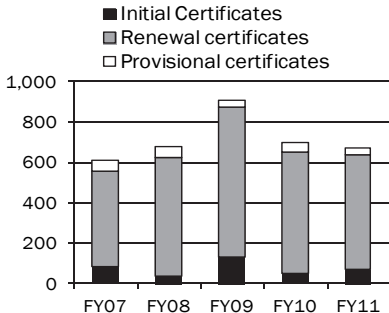
Clients Served:

Individuals who function as a home care administrator and their clients.

Contact Person:

John W. Judge, Jr., Director
405.271.9444,
Ext. 57273
Fax: 405.271.7360
hcar@health.ok.gov

**Certified Home
Care Administrators**



Authority:

63 O.S. Section
1-1962
OAC 310:664

Funding Source:

Fees Collected and
State Funds

Fees:

Initial application	\$140.00
Provisional application	\$80.00
Deeming application	\$80.00
Annual Renewal	\$55.00

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Certified home care administrators</i>	613	716	753	788	791
<i>Initial certificates issued</i>	82	40	130	53	70
<i>Renewal certificates issued</i>	476	587	748	602	570
<i>Provisional certificates issued</i>	53	52	28	44	30
<i>Complaints investigated</i>	0	1	0	0	0
<i>Tested for OHCAPA*</i>	59	94	111	101	103
<i>Approved Testing Sites</i>	9	9	8	9	9
<i>Approved preparedness programs</i>	2	3	3	3	3
<i>Preparedness program attendees</i>	17	21	12	30	46
<i>Fees collected</i>	\$45,715	\$57,118	\$41,141	\$41,419	\$64,429

*OK Home Care Administrator Preparedness Assessment

i This program became effective on June 11, 1998. The purpose is to establish and enforce minimum criteria for the issuance, maintenance,

renewal, educational preparation, test development and a registry for Home Care Administrators.

INDEPENDENT REVIEW ORGANIZATIONS

<http://hrds.health.ok.gov>

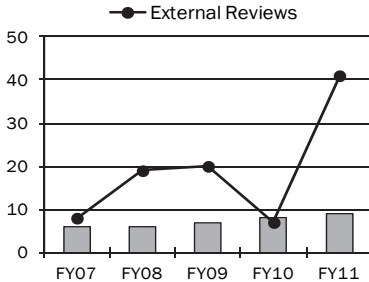
Clients Served:

Independent review organizations that apply for certification, and health service providers, insurers and consumers who appeal health plan denials.

Contact Person:

John W. Judge, Jr., Director
405.271.9444,
Ext. 57273
Fax: 405.271.7360
johnwj@health.ok.gov

Certified Independent Review Organizations



Authority:

63 O.S. Sections
2528.1 et seq.
OAC 310:658

Funding Source:

State Funds

Fees: None

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Independent Review</i>					
<i>Organizations Certified</i>	6	6	7	8	9
<i>External reviews processed</i>	8	19	20	7	41
<i>Requests for Information</i>	0	0	1	1	0

i This program was created to require certification of independent review organizations that will conduct external reviews of health plan decisions to deny coverage or reimbursement for a medical treatment or service. External review is an option available to the health

plan member who meets certain statutory requirements after the internal review process with the plan has been completed. External review involves a case review by an independent review organization certified by the Department.

JAIL INSPECTION DIVISION

<http://jails.health.ok.gov>

Clients Served:

City and county jails, ten-day lockup facilities, twelve-hour holding facilities, twelve-hour holding facilities, and the individuals who inhabit such facilities.

Contact Person:

John W. Judge, Jr., Director
405.271.3912
Fax: 405.271.5304
jails@health.ok.gov

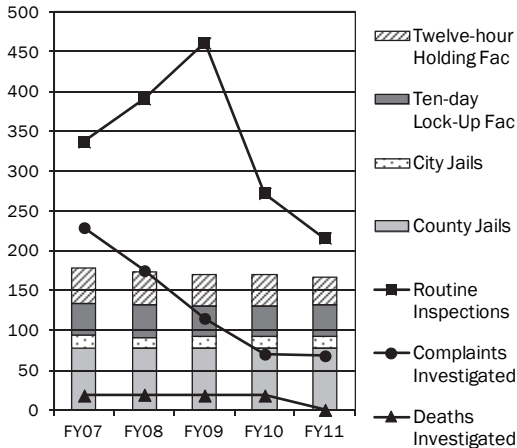
Authority:

10 O.S.
Section
1108(a)(3)
OAC 310:670

Funding


Source:
State Funds

Jail Inspection Division



Health Resources Development Service

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>County jails</i>	77	77	77	77	77
<i>City jails</i>	17	14	15	15	16
<i>Ten-day lock-up facilities</i>	40	41	39	39	40
<i>Twelve-hour holding facilities</i>	44	41	40	40	34
<i>Routine inspections</i>	337	391	461	272	216
<i>Complaints investigated</i>	229	175	115	70	68
<i>Deaths investigated</i>	18	19	18	18	0
<i>Attempted suicides recorded</i>	41	52	68	72	60
<i>Escapes recorded</i>	24	18	19	12	16
<i>Jailers trained</i>	1,340	2,169	2,378	2,224	2,126
<i>Facilities tested</i>	129	96	146	64	102
<i>New jails under construction</i>	8	13	3	2	5
<i>New jails in the planning stage</i>	8	8	6	6	2

 This program is designed to monitor compliance with minimum jail standards and to improve the facilities. Staff from Consumer Protection Division implement and interpret rules, provide jailer-

training classes to jail employees, issue jailer training cards, conduct routine jail inspections, investigate complaints and jail deaths, and provide technical assistance as necessary.

NURSE AIDE REGISTRY

<http://nar.health.ok.gov>

Clients Served:

Unlicensed persons and employers of these persons, who provide nursing or nursing-related services to individuals receiving services in long term care facilities, home health agencies, intermediate care facilities for the mentally retarded, residential care homes, and adult day care centers.

Contact Person:

Vicki Kirtley, Director
405.271.4085
1.800.695.2157
Fax: 405.271.1130
nar@health.ok.gov

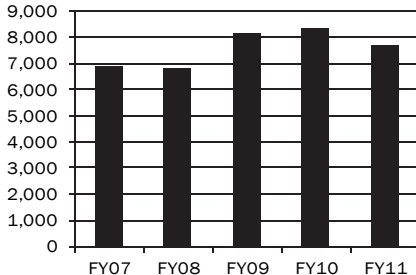
Authority:

63 O.S. Sections
1-1950.3 et
seq.
OAC 310:677
42 CFR 483.75
through
485.158
42 CFR 484.36

Funding Source:

State and Federal
Funds

Nurse Aides Added



Fees:

Fees are not charged for processing any applications specific to Long Term Care. Fees are charged for processing applications for all other certifications.

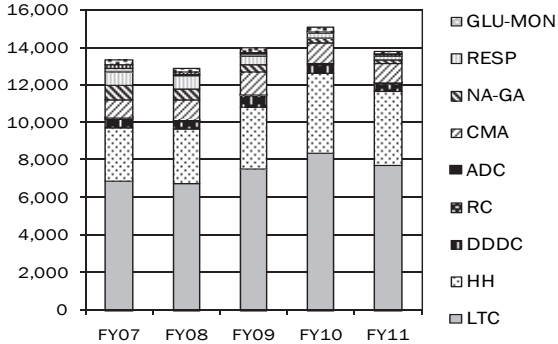
Recertification processing fee	\$10.00
Deeming application processing fee	\$15.00
Reciprocity application processing fee	\$15.00
Training exception application processing fee	\$15.00
Foreign graduate training exception application processing fee	\$15.00
Training and testing waiver application processing fee	\$15.00
Retesting application processing fee	\$15.00
Duplicate certification card processing fee	\$10.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Nurse aides added this year</i>	6,874	6,838	8,170	8,365	7,685
<i>Certifications*, Advanced Amendments and Registrations added this year</i>	13,335	12,870	13,947	15,073	13,786
<i>Department approved nurse aide training programs</i>	403	415	420	386	424
<i>Facilities ineligible to train due to Substandard Quality of Care</i>	30	56	81	57	80
<i>Confirmed cases of nurse aide abuse, neglect, or misappropriation</i>	16	39	34	39	18
<i>Fees collected</i>	\$76,812	\$83,863	\$83,804	\$105,196	\$118,866

*A nurse aide may be certified in more than one category (LTC, HH, DDDC, RC, ADC).

Certifications, Advanced Amendments and Registrations Added



CERTIFICATIONS, ADVANCED AMENDMENTS AND REGISTRATIONS ADDED THIS YEAR

	FY07	FY08	FY09	FY10	FY11
Long Term Care Certification (LTC)	6,834	6,752	7,498	8,365	7,685
Home Health Certification(HH)	2,865	2,860	3,300	4,252	3,967
Developmentally Disabled Direct Care Certification (DDDC)	470	418	631	475	407
Residential Care Certification (RC)	51	49	37	21	7
Adult Day Care Certification (ADC)	12	8	1	0	1
Certified Medication Aide* (CMA)	979	1,072	1,182	1,114	1,027
CMA Advanced					
Nasogastric/Gastrostomy (NA-GA)	742	637	416	270	201
CMA Advanced Respiratory (RESP)	742	653	425	243	221
CMA Advanced Glucose Monitoring (GLU-MON)	181	114	135	51	61
CMA Advanced Insulin Administration (IN-ADM)	165	91	95	43	51
Registered Feeding Assistants (FA)	294	216	227	239	158


*A CMA must also have a LTC, HH, or DDDC Certification.

Health Resources Development Service

PROGRAM ACTIVITIES	FY07	FY08	FY09	FY10	FY11
Renewal forms mailed	31,150	19,998	30,460	32,404	26,987
Certification cards mailed	35,689	37,195	41,488	41,308	42,183
CNA Re-tester	230	265	358	396	378
CMA Re-tester	137	189	208	177	114
RN/LPN Student CNA/CMA training exceptions	115	124	122	126	111
RN/LPN Graduate CNA waivers	22	21	18	27	20
Foreign CNA training exceptions	3	7	6	7	4
Reciprocity CNA coming to Oklahoma	1,147	923	927	953	1,081
Reciprocity CNA leaving Oklahoma	257	416	447	517	583
LTC deemed to DDDC	67	33	98	122	91
HH deemed to LTC	5	12	12	5	0
DDDC deemed to RC	1	3	15	1	0
LTC deemed to RC	-----	-----	-----	-----	3

ACTIVE NURSE AIDE

TRAINING PROGRAMS	FY07	FY08	FY09	FY10	FY11
Long Term Care	123	126	123	107	165
Home Health	8	10	10	5	8
Combination Long Term Care and Home Health	62	63	64	62	64
Developmentally Disabled	22	23	23	21	22
Residential Care	26	26	26	25	3
Adult Day Care	9	9	7	3	2
Combination Residential Care and Adult Day Care	3	3	3	0	0
Certified Medication Aide	56	56	56	56	54
CMA Continuing Education	46	46	48	49	47
CMA Diabetes Care and Insulin Administration	23	25	27	28	26
CMA Glucose Monitoring	-----	1	1	1	2
CMA Respiratory	-----	1	1	1	1
CMA Respiratory and Gastrostomy	22	23	28	28	27
Competency Evaluation Program	3	3	3	3	3

 This program was created through a federal mandate and regulations effective September 1991. The duties of the nurse aide registry include: (1) review and approve/disapprove nurse aide training program curriculum; (2) review and approve/disapprove nurse aide training programs; (3) review and approve/disapprove

nurse aide testing; (4) develop and maintain the nurse aide registry; (5) maintain the abuse registry; (6) certify nurse aides; (7) provide public education; and (8) develop rules, policies, procedures, applications and forms necessary to implement the program.

NURSE AIDE TEMPORARY EMERGENCY WAIVER

<http://hrds.health.ok.gov>

Clients Served:

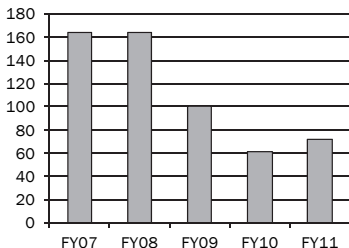
Nursing facilities, specialized facilities, continuum of care facilities, assisted living centers, adult day care centers, and residential care homes that require a temporary emergency waiver.

Contact Person:

John W. Judge, Jr., Director
405.271.9444,
Ext. 57273
Fax: 405.271.7360
johnwj@health.ok.gov

Nurse Aide Temporary Emergency Waiver

■ Total approval letters



Authority:

63 O.S. Section
1-1950
OAC 310:677-1-6

Funding Source:

State Funds
and Fees

Fees:

Initial nurse aide temporary emergency waiver \$100.00
Renewal nurse aide temporary emergency waiver \$75.00

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Initial approval letters</i>	-----	-----	1	4	3
<i>Renewal approval letters</i>	-----	-----	11	57	69
<i>Total approval letters</i>	164	164	101	61	72
<i>Withdrawn approval letters</i>	10	6	0	0	1
<i>Denial letters issued</i>	24	0	0	0	0
<i>Initial fees collected</i>	-----	-----	\$100	\$400	\$300
<i>Renewal fees collected</i>	-----	-----	\$825	\$4,275	\$5,125
<i>Total fees collected</i>	-----	-----	\$925	\$4,675	\$5,425

i The Department may grant a temporary emergency waiver to a facility that can demonstrate it has been unable to successfully meet staffing requirements related to the provisions in the Act. The facility must meet the requirements and demonstrate diligent efforts are being made to recruit

and retain certified nurse aides. A waiver shall not exceed six months. A facility may apply for a subsequent waiver as provided in rule. A non-refundable fee was enacted on June 25, 2009 for each waiver application submitted.

NURSING AND SPECIALIZED FACILITIES CERTIFICATE OF NEED

<http://hfs.health.ok.gov>

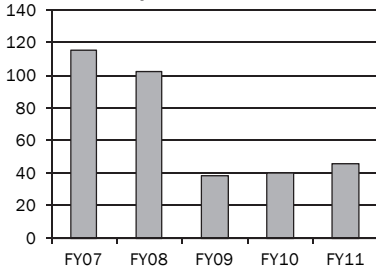
Clients Served:

Nursing and specialized facilities, and prospective residents of each.

Contact Person:

Darlene Simmons, Director
405.271.6868
Fax: 405.271.7360
healthresources@health.ok.gov

**Certificate of Need Applications
Reviewed for Nursing and
Specialized Facilities**



Authority:

63 O.S. Sections
1-850 et seq.
OAC 310:4
OAC 310:620
OAC 310:625
OAC 310:630

Funding Source:

Fees Collected

Fees:

\$3000 for New Facility (standard review), minimum \$1000; \$3000 for acquisition; \$100 for exemption from Certificate of Need.

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Certificate of Need applications reviewed (includes exemptions from CON)</i>	115	102	38	40	45
<i>Exemptions approved</i>	-----	87	23	17	23
<i>Exemptions denied</i>	-----	6	0	1	1
<i>Acquisitions approved</i>	-----	19	10	7	9
<i>New construction approved</i>	-----	1	0	2	0
<i>CNs withdrawn</i>	-----	5	3	5	4
<i>Fees collected</i>	\$122,770	\$94,307	\$64,428	\$64,274	\$93,715



This program was created to ensure that development of long term care services in Oklahoma was performed in a planned, or-

derly, and economical manner consistent with and appropriate to services needed by people in various regions, districts or localities in

the State of Oklahoma. The Certificate of Need Act furthered this public policy by providing for the submittal of plans and applications, and by prohibiting the offering, development or change of existing services prior to the issu-

ance of a Certificate of Need by the Department. Health Facility Systems staff review applications submitted by facilities primarily through paper review with limited on-site inspection to ensure compliance.

NURSING AND SPECIALIZED FACILITIES LICENSE APPLICATIONS

<http://hfs.health.ok.gov>

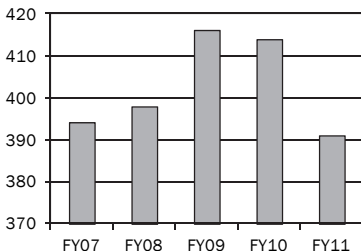
Clients Served:

Nursing facilities, specialized facilities (including nursing facilities for Alzheimer's patients and intermediate care facilities for persons with mental retardation), and residents of the facilities.

Contact Person:

Darlene Simmons, Director
405.271.6868
Fax: 405.271.7360
healthresources@health.ok.gov

Licensed Nursing and Specialized Facilities



Fees:

\$10.00 per licensed bed per year for initial license and renewal.

Authority:

63 O.S. Sections
1-1901 et seq.
OAC 310:675

State license required;
annual renewal.

Medicare Certification
is optional. Medicaid
Certification is
optional.

Certificate of Need is
required.

Funding Source:

Fees Collected

i The Department, under authority of the Oklahoma Public Health Code, licenses several different types of long-term care services. This program was created to protect residents and to assure accountability of facilities. Generally, no person may operate a long-term care service without first getting a license from the Department. The

owner of each facility must file a license application and submit a licensing fee annually. Health Facility Systems staff receive the fee and review the application for completeness, accuracy, and consistency. On-site activities are conducted by staff in Long Term Care.

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed nursing and specialized facilities*	394	398	416	414	391
Nursing facilities	-----	310	327	325	296
Specialized facilities for the developmentally disabled (ICF/MR facilities)	-----	85	86	86	86
Specialized alzheimer's nursing facilities	-----	3	3	3	2
Total licenses issued, including renewals, bed changes, name changes, and changes of ownership	422	427	444	446	405
Nursing Facilities with suspended licenses	-----	-----	-----	-----	7
Closed Nursing Facilities	-----	-----	-----	-----	4
Fees collected	\$321,569	\$338,098	\$339,974	\$315,966	\$542,428

*Does not include continuum of care nursing facilities.

PSYCHIATRIC & CHEMICAL DEPENDENCY TREATMENT FACILITIES CERTIFICATE OF NEED

<http://hfs.health.ok.gov>

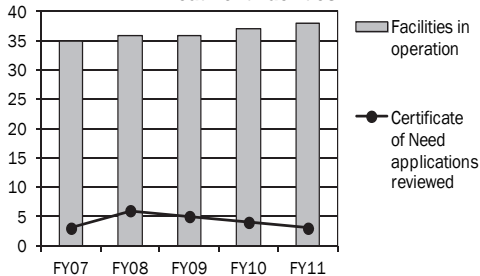
Clients Served:

Psychiatric and chemical dependency treatment facilities and prospective clients of either.

Contact Person:

Darlene Simmons, Director
405.271.6868
Fax: 405.271.7360
healthresources@health.ok.gov

**Certificate of Need for
Psychiatric & Chemical Dependency
Treatment Facilities**



Authority:

63 O.S. Sections
1-880.1 et seq.
OAC 310:635
OAC 310:4-1-1
et seq.
OAC 310:620-1-1
et seq.

Funding Source:

Fees Collected

Fees:

.75% of capital cost of project, with a \$1,500 minimum and \$10,000 maximum.

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Facilities in operation</i>	35	36	36	37	38
<i>Certificate of Need applications reviewed</i>	3	6	5	4	3
<i>Acquisitions approved</i>	-----	4	1	1	1
<i>Bed additions approved</i>	-----	2	4	1	1
<i>Beds added to inventory</i>	43	32	66	34	11
<i>Conversion from adult beds to child beds</i>	-----	-----	-----	9	0
<i>Fees collected</i>	\$21,500	\$33,106	\$36,826	\$10,074	\$22,225

i This program was created to ensure the development of psychiatric and chemical dependency services in a planned, orderly, and economical manner consistent with and appropriate to services needed by people in various regions, districts or localities in the State of Oklahoma. Health Facility

Systems (HFS) staff endeavor to control capital expenditures, bed expansions, and changes of ownership of such facilities. HFS staff review applications submitted by facilities primarily through paper review with limited on-site inspection to ensure compliance.

RESIDENTIAL CARE HOMES LICENSE APPLICATIONS

<http://hfs.health.ok.gov>

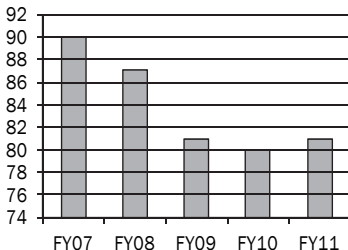
Clients Served:

Residential Care Homes and residents of the homes.

Contact Person:

Darlene Simmons, Director
405.271.6868
Fax: 405.271.7360
healthresources@health.ok.gov

Licensed Residential Care Homes



Authority:

63 O.S. Sections
1-820 et seq.
OAC 310:680

State license
required.

No Medicare or
Medicaid
Certification.

Certificate of Need
does not apply to
this program.

Funding Source:

Fees Collected

Fees:

Probationary license with two-year renewal \$50.00
Modification to the license documentation \$20.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed residential care	90	87	81	80	81
Total licenses issued, including renewals, bed changes, name changes, and changes of ownership	47	48	56	30	54
Fees collected	\$2,205	\$2,450	\$2,540	\$2,910	\$4,360

i This program was created to protect residents and to assure accountability of residential care homes. The residential care home offers or provides residential accommodations, food service, and supportive assistance. A residential care home may provide assistance with meals, dressing, bathing, and other personal needs, and it may assist in the administration of medications. However, it can-

not provide medical care. The owner of each home must file a license application and submit a licensing fee annually. Health Facility Systems staff receives the fee and review the application for completeness, accuracy, and consistency. On-site activities are conducted by staff in Long Term Care.

Long Term Care

Dorya Huser, Chief
405.271.6868
Fax: 405.271.2206
doryah@health.ok.gov

(Vacant), Assistant Chief
405.271.6868
Fax: 405.271.2206

Director of Survey
Mary Fleming
405.271.6868
Fax: 405.271.2206
maryf@health.ok.gov

**Director of Intakes
and Incidents**
Patty Scott
405.271.6868
Fax: 405.271.2206
pattys@health.ok.gov

ADULT DAY CARE CENTERS INSPECTIONS & INVESTIGATIONS

<http://ltc.health.ok.gov>

Clients Served:

Participants, their families, friends and advocates, facility staff and operators. Adult Day Care Centers provide supervised health, social, and recreational services in a structured daytime program to serve functionally impaired adults who need assistance in caring for themselves yet continue to live in their own homes, usually with the aid of family caregivers.

Contact Person:

Dorya Huser, Chief
405.271.6868
Fax: 405.271.2206
doryah@health.ok.gov

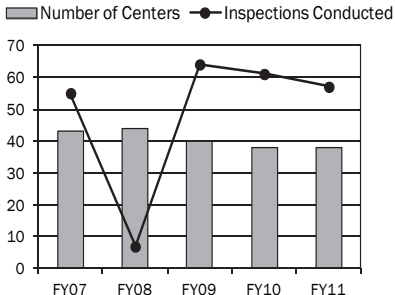
Authority:

63 O.S. Sections
1-870 et seq.
OAC 310:605

Funding Source:

State Funds

**Adult Day Care Centers
Inspections and Investigations**



Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Number of adult day care centers</i>	43	44	40	38	38
<i>Capacity for participants</i>	1,801	2,044	1,954	1,918	1,858
<i>Average license capacity for participants</i>	42	46	49	50	48
<i>Participants served by largest center</i>	150	150	150	150	150
<i>Participants served by smallest center</i>	15	10	12	12	12
<i>Licensure surveys, follow-up visits and other inspections conducted</i>	55	7	64	61	57
<i>Centers closed</i>	4	-----	3	3	3
<i>State enforcement actions</i>	0	-----	0	0	0

i This program was established in 1992 to support and regulate a community-based system of quality adult day care. Participants do not stay in the center overnight and continue to live in their own homes, usually with the aid of family caregivers. Adult Day Care Centers prevent premature or inappropriate institutionalization of functionally impaired elderly or disabled adults, provide periods of relief for caregivers, and enable family caregivers to continue gain-

ful employment. Long Term Care (LTC) staff develop minimum licensure requirements and monitor the center's compliance with the rules. Each center is required to submit an application for licensure. LTC teams of health professionals investigate complaints and perform on-site surveys prior to licensure approval. Periodic inspections are performed during the licensure period.

ASSISTED LIVING CENTERS INSPECTIONS & INVESTIGATIONS

<http://ltc.health.ok.gov>

Clients Served:

Residents, their families, friends and advocates, facility staff and operators. Assisted Living Centers provide services to those who, by choice or functional impairments, need assistance with personal care or nursing supervision, may need intermittent or unscheduled nursing care, may need medication assistance, and may need assistance with transfer and/or ambulation.

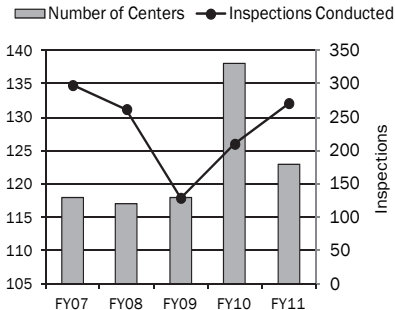
Contact Person:

Dorya Huser, Chief
405.271.6868
Fax: 405.271.2206
doryah@health.ok.gov

Authority:

63 O.S. Sections
1-890.1 et seq.
OAC 310:663

Assisted Living Centers Inspections and Investigations



Funding Source:

State Funds

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Number of assisted living centers</i>	118	117	118	138	123
<i>Number of licensed beds</i>	6,821	6,753	6,948	8,280	7,773
<i>Average licensed bed capacity</i>	55	58	59	60	63
<i>Largest assisted living center</i>	166	166	162	166	166
<i>Smallest assisted living center</i>	4	4	5	5	5
<i>Licensure surveys, complaint investigations, follow-up visits and other inspections conducted</i>	298	262	129	210	271
<i>Centers closed</i>	3	0	5	0	1
<i>State enforcement actions</i>	4	12	19	50	28

i This program was created in 1997 to establish a system of licensure of assisted living centers. Long Term Care (LTC) staff evaluate compliance of centers with the licensure regulation and endeavor to ensure individuals receive services to meet their needs.

conduct revisits when necessary, monitor compliance with licensure rules, implement and interpret rules, provide technical assistance as necessary, participate in provider training programs, and take enforcement actions against centers when appropriate.

LTC staff investigate complaints, perform annual licensure surveys,

CONTINUUM OF CARE FACILITIES INSPECTIONS & INVESTIGATIONS

<http://ltc.health.ok.gov>

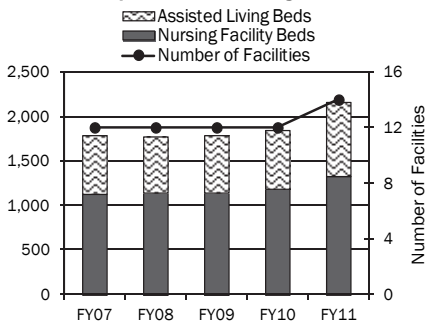
Clients Served:

Residents of continuum of care facilities,
their families, friends and advocates,
facility staff and operators.

Contact Person:

Dorya Huser, Chief
405.271.6868
Fax: 405.271.2206
doryah@health.ok.gov

Continuum of Care Facilities Inspections & Investigations



Authority:

63 O.S. Sections
1-890.1 et seq.
OAC 310:663

Funding Source:

State and
Federal Funds



This program was created in 1997 to establish a system of licensure of continuum of care facilities. Continuum of care facilities provides

a range of long term care services. A continuum of care facility may provide nursing facility services, assisted living services, and adult day care

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Number of continuum of care facilities</i>	12	12	12	12	14
<i>Number providing nursing facility services</i>	12	12	12	12	14
<i>Number of nursing facility beds</i>	1,114	1,124	1,134	1,174	1,321
<i>Number providing assisted living services</i>	12	12	12	12	14
<i>Number of assisted living beds</i>	658	644	644	654	831
<i>Facilities closed</i>	0	0	1	0	0
<i>State enforcement actions</i>	1	1	7	8	5

services under one license. Each facility type has separate licensure surveys, complaint investigations, follow-up visits, and other inspections consistent with the applicable administrative code. Long Term Care (LTC) staff evaluate services provided in these facilities to ensure the needs of residents are met.

LTC staff investigate complaints, perform annual licensure, certification surveys, conduct revisits when

necessary, monitor compliance with State and Federal regulations, provide technical assistance as necessary, participate in provider training programs, and take enforcement action against facilities when appropriate.

INTAKES AND INCIDENTS

<http://ltc.health.ok.gov>

Clients Served:

Individuals who reside in long term care facilities, family members, friends, and advocates. Long term care facilities consist of nursing facilities and specialized nursing facilities including intermediate care facilities for the mentally retarded, assisted living centers, residential care homes, and adult day care centers.

Contact Person:

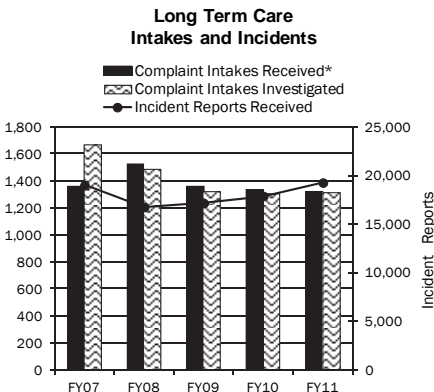
Patty Scott, Director
405.271.6868
Fax: 405.271.2206
pattysr@health.ok.gov

Authority:

63 O.S. Sections
1-821, 1-830,
1-875, 1-1909,
1-1939, 1-1940,
and 1-1941
OAC 310:663-25-2
OAC 310:675-7-6.1
OAC 310:680-3-9

Funding Source:

State and
Federal Funds



*Includes facility incident reports converted to intakes

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Complaint intakes received*</i>	1,356	1,527	1,362	1,332	1,318
<i>Total complaint intakes investigated</i>	1,670	1,489	1,327	1,308	1,319
<i>Complaint intakes investigated that involve nursing and specialized facilities</i>	1,519	1,313	1,191	1,105	1,111
<i>Complaint intakes investigated that involve assisted living centers</i>	108	133	89	147	172
<i>Complaint intakes investigated that involve residential care homes</i>	43	43	45	51	33
<i>Complaint intakes investigated that involve adult day care centers</i>	0	0	2	5	3
<i>Facility reported incidents received</i>	18,992	16,744	17,149	17,884	19,264

*Includes facility incident reports converted to complaints.

i The purpose of this program is to receive complaints alleging violations of Federal and/or State rules and laws. In addition, qualified staff review facility reported incidents that are mandated by Federal and State rules and laws. Long term care staff strive to ensure practices that protect residents and clients and promote quality of care and quality of life for long term care residents/clients. To this end, expressed concerns by interested parties are investigated by qualified survey staff.

tion who believes that State or Federal laws or regulations have been violated may request an investigation. Intakes and incidents are prioritized based on the Centers for Medicare and Medicaid Services' triage guidelines that take into consideration the seriousness of the allegation. Investigation findings may provide a basis for imposing remedies against providers. In some cases, the results of investigations have led to closing poorly operated facilities.

Any individual with personal knowledge or substantial specific informa-

INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED (ICFs/MR) INSPECTIONS & INVESTIGATIONS

<http://ltc.health.ok.gov>

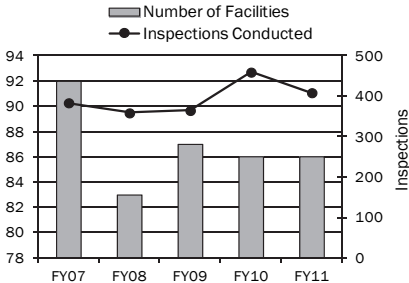
Clients Served:

Residents with mental retardation and/or developmental disabilities, their families, friends and advocates, facility staff and operators.

Contact Person:

Dorya Huser, Chief
405.271.6868
Fax: 405.271.2206
doryah@health.ok.gov

**ICF/MR Facilities
Inspections and Investigations**



Authority:

63 O.S. Sections 1-1901 et seq.
Title 42, US Code, §1396-1396v, Subchapter XIX, Chapter 7
42 CFR 440.150;
42 CFR 483.400 through 483.480
OAC 310:675

Funding Source:

State and Federal Funds

i This program was created to establish a system of licensure for the purpose of protecting the health, welfare, and safety of residents in

ICFs/MR. The additional responsibility of the program is to implement a federally mandated survey and certification system for facilities to partici-

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Number of ICF/MR facilities</i>	92	83	87	86	86
<i>Number of licensed beds</i>	2,437	1,977	2,018	1,959	1,910
<i>Average licensed bed capacity</i>	26	26	23	23	22
<i>Largest ICF/MR facility</i>	340	175	175	160	160
<i>Smallest ICF/MR facility</i>	3	3	3	3	3
<i>Licensure/recertification surveys, life safety code surveys, complaint investigations, follow-up visits and other inspections conducted</i>	384	359	365	460	409
<i>Facilities closed</i>	1	9	1	0	0
<i>State enforcement actions</i>	9	11	7	6	1

pate in the Medicaid reimbursement program.

The ICFs/MR Program was established in 1971 when legislation was enacted which provided for Federal Financial Participation (FFP) for ICFs/MR as an optional Medicaid service. Congressional authorization for ICFs/MR services as a State plan option under Medicaid allowed states to receive Federal matching funds for institutional services that had been funded with state or local government money.

Long Term Care (LTC) staff endeavor to promote and evaluate compliance of ICFs/MR with the regulations by

assuring individual needs are aggressively met to insure a higher quality of life for all. LTC staff investigate complaints, perform annual licensure and certification surveys, and conduct revisits when necessary. Facilities are licensed and certified based on the survey outcomes. LTC staff also develop and interpret licensure rules, monitor compliance with Medicaid certification requirements, provide technical assistance as necessary, participate in provider training programs and take enforcement actions against facilities when appropriate.

NURSING FACILITIES INSPECTIONS & INVESTIGATIONS

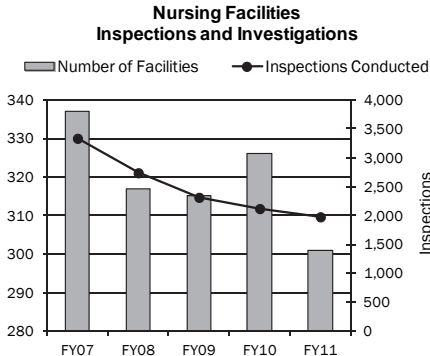
<http://ltc.health.ok.gov>

Clients Served:

Residents, in nursing facilities, their families, friends and advocates, facility staff and operators.

Contact Person:

Dorya Huser, Chief
405.271.6868
Fax: 405.271.2206
doryah@health.ok.gov



Authority:

63 O.S. Sections 1-1901 et seq.
Title 42, US Code, §1395 et seq., Subchapter XVIII, Chapter 7
Title 42, US Code, §1396-1396v, Subchapter XIX, Chapter 7
42 CFR Part 483;
42 CFR Part 488
OAC 310:675

Funding Source:
State and Federal Funds



This program was created in the mid 1950's to establish a system of licensure for the pur-

pose of protecting the health, welfare, and safety of residents in nursing facilities. The additional

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Total number of nursing facilities</i>	337	317	315	326	301
<i>Number of hospital-based skilled nursing units</i>	8	8	8	9	6
<i>Number of private-pay only facilities</i>	6	6	6	9	2
<i>Number of residents</i>	18,543	17,681	17,813	19,623	18,512
<i>Number of licensed beds</i>	30,167	28,309	29,151	29,494	27,856
<i>Average number of licensed beds</i>	89	89	93	90	93
<i>Largest nursing facility</i>	375	375	375	375	375
<i>Smallest nursing facility</i>	9	8	8	29	8
<i>Licensure/recertification surveys, life safety code surveys, complaint investigations, follow-up visits and other inspections conducted</i>	3,335	2,739	2,314	2,120	1,977
<i>Facilities closed</i>	11	10	4	4	7
<i>State enforcement actions</i>	95	132	119	115	104

responsibility of the program is to implement a federally mandated survey and certification system for facilities to participate in the Medicare and Medicaid reimbursement programs. Long Term Care (LTC) staff evaluate compliance with the regulations to assure that individual needs of the residents are met, and to promote a care delivery system to enhance the quality of life for each resident.

LTC staff investigate complaints, perform annual licensure and certification surveys, and conduct

revisits when necessary. Facilities are licensed and certified based on the survey findings. Remedies are imposed when facilities fail to comply with the Federal and State requirements. LTC staff also develop and interpret licensure rules, monitor compliance with Medicaid and Medicare certification requirements, provide technical assistance as necessary, participate in provider training programs, and take enforcement actions against facilities when appropriate.

RESIDENTIAL CARE HOMES INSPECTIONS & INVESTIGATIONS

<http://ltc.health.ok.gov>

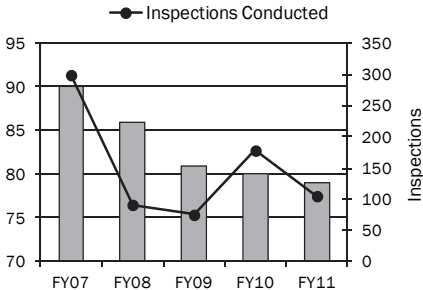
Clients Served:

Residents living in residential care homes, their families, friends and advocates, facility staff and operators.

Contact Person:

Dorya Huser, Chief
405.271.6868
Fax: 405.271.2206
doryah@health.ok.gov

Residential Care Homes Inspections and Investigations



Authority:

63 O.S. Sections
1-819 et seq.
OAC 310:680

Funding Source:

State Funds



This program was created in 1991 to establish standards for licensure of Residential Care Homes. Long Term Care (LTC) staff evaluate

compliance with the regulations to assure that individual needs of the residents are met to optimize the quality of life in the homes. LTC

Statistics:	FY07	FY08	FY09	FY10	FY11
<i>Number of residential care homes</i>	90	86	81	80	79
<i>Number of licensed beds</i>	3,198	2,772	2,652	2,640	2,473
<i>Average number of licensed beds</i>	32	32	33	33	31
<i>Largest residential care home</i>	155	100	100	100	98
<i>Smallest residential care home</i>	3	4	4	4	4
<i>Licensure inspections, complaint investigations, monitoring visits and follow-up visits conducted</i>	299	91	75	178	105
<i>Facilities closed</i>	4	3	4	3	4
<i>State enforcement actions</i>	4	5	16	17	13

staff investigate complaints, perform annual licensure surveys, conduct revisits when necessary, monitor compliance with licensure standards, implement and interpret rules, provide technical assistance

as necessary, participate in provider training programs, and take enforcement actions against homes when appropriate.

LONG TERM CARE FACILITY ADVISORY BOARD

OSDH Contact:

Dorya Huser, Chief

405.271.6868

Fax: 405.271.2206

doryah@health.ok.gov

The Long-Term Care Facility Advisory Board is mandated by statute (63 O.S., Section 1-1923) to serve as an advisory body to the Commissioner of Health. The Board consists of twenty-seven members who are appointed by the Governor. Members of the Board are comprised of the following persons:

- one representative from the Office of the State Fire Marshal, designated by the State Fire Marshal;
- one representative from the Oklahoma Health Care Authority, designated by the Administrator;
- one representative from the Department of Mental Health and Substance Abuse Services, designated by the Commissioner of Mental Health and Substance Abuse Services;
- one representative from the Department of Human Services,

designated by the Director of Human Services;

- one member who is a licensed general practitioner of the medical profession;
- one member who is a general practitioner of the osteopathic profession;
- one member who is a registered pharmacist;
- one member who is a licensed registered nurse;
- one member who is a licensed practical nurse;
- three members who are of reputable and responsible character and sound physical and mental health and are operator-administrators of nursing homes which have current licenses issued pursuant to the Nursing Home Care Act and who have had five years experience in the nursing home profession as operator-

administrators;

- three members who are residential care home operator-administrators licensed pursuant to the Residential Care Act;

- three members who are adult day care facility owner-operators licensed pursuant to the Adult Day Care Act;

- three members who are continuum care of facility or assisted living center owner-operators licensed pursuant to the Continuum of Care and Assisted Living Act; and

- six members who are over the age of sixty-five who represent the general public.

After the initial designations or appointments (that began in 1980), the designated representatives from the Office of the State Fire Marshal, Oklahoma Health Care Authority, the Department of Human Services, and the Department of Mental Health and Substance Abuse Services serve at the pleasure of their designators. All other terms are for a three-year period. In case of a vacancy, the Governor appoints individuals to fill the remainder of the term.

The Department provides clerical support to perform designated duties of the Advisory Board. The Depart-

ment also provides space for meetings of the Advisory Board. The Board must meet at least quarterly, and may hold such special meetings as may be necessary.

Long Term Care

LONG-TERM CARE FACILITY ADVISORY BOARD MEMBERS

*Wendell Short, Chair
Kay Parsons, Vice-Chair
Margaret Wallace, Sec-Treas.*

<u>Position</u>	<u>Member</u>	<u>Term Expires</u>
State Fire Marshal	JoAnne Sellars	Designee
Health Care Authority (OHCA)	Cassell Lawson	Designee
Department of Mental Health & Substance Abuse Services (DMHSAS)	Mich Magness	Designee
Department of Human Services	Esther Houser	Designee
Licensed General Practitioner	Dr. Peter Winn	11/01/2011
Osteopathic General Practitioner	Vacant	*
Registered Pharmacist	Alan Mason	11/01/2012
Licensed Registered Nurse	Diana Lynn Sturdevant	11/01/2011
Licensed Practical Nurse	Kay Parsons	11/01/2013
Nursing Home Operator-Administrator	Linda Brannon	11/01/2012
Nursing Home Operator-Administrator	Marla Heckman	11/01/2012
Nursing Home Operator-Administrator	Margaret Wallace	11/01/2011
Residential Care Home Operator-Administrator	Wendell Short	11/01/2011
Residential Care Home Operator-Administrator	Sharon Housh	11/01/2012
Residential Care Home Operator-Administrator	Vacant	*

Long Term Care

<u>Position</u>	<u>Member</u>	<u>Term Expires</u>
Adult Day Care Facility Owner-Operator	Donna Bowers	11/01/2011
Adult Day Care Facility Owner-Operator	Jane Carlson	01/14/2012
Adult Day Care Facility Owner-Operator	Tammy Vaughn	01/14/2012
Continuum of Care or ALC Owner-Operator	Angela York	11/01/2012
Continuum of Care or ALC Owner-Operator	Dustin Cox	11/01/2013
Continuum of Care or ALC Owner-Operator	Renee Hoback	11/01/2011
General Public Over Age 65	Bonita Cordray	11/01/2012
General Public Over Age 65	Theo Crawley	11/01/2012
General Public Over Age 65	H.F. Timmons	11/01/2011
General Public Over Age 65	L. Dewey Sherbon	11/01/2013
General Public Over Age 65	Willie Cantwell	11/01/2012
General Public Over Age 65	Vacant	*

*(*New appointments and/or re-appointments for vacant positions or expired terms have not been announced.)*

Medical Facilities Service

Tom Welin, Chief
405.271.6576
Fax: 405.271.1141
tomw@health.ok.gov

Lee Martin, Jr., Assistant Chief
405.271.2657
Fax: 405.271.4240
leem@health.ok.gov

Emergency Systems Unit
Emergency Medical Services
Dale Adkerson, Director
405.271.4027
Fax: 405.271.4240
dalea@health.ok.gov

Trauma Service
(Vacant), Director
405.271.2657
Fax: 405.271.4240

Facility Services Division
Dean Bay, Director
450.271.6576
Fax: 405.271.1141
deanb@health.ok.gov

Home Services Division
Tina Hughes, Director
405.271.6576
Fax: 405.271.1141
tinah@health.ok.gov

Health Facilities
Plan Review
Bill Culver, Architect
405.271.6785
Fax: 405.271.1738
williamc@health.ok.gov

AMBULATORY SURGICAL CENTERS

<http://mfs.health.ok.gov>

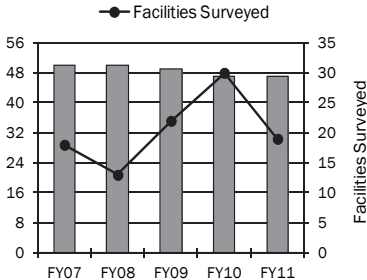
Clients Served:

Ambulatory surgery patients and facilities.

Contact Person:

Dean Bay, Director
405.271.6576
Fax: 405.271.1141
deanb@health.ok.gov

Ambulatory Surgical Centers



Authority:

63 O.S. Sections
2657 et seq.
OAC 310:615
The Social Security Act
42 CFR Part 416

Funding Source:

Federal contract
allocation and State
licensure fees

Fees:

Initial license \$2,000.00
Annual renewal \$500.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed ambulatory surgical centers	50	50	49	47	47
Total facilities surveyed	18	13	22	30	19
Licensure surveys and follow-ups	8	3	7	21	14
Recertification surveys and follow-ups	-----	2	5	28	27
Life safety code surveys and follow-ups	8	2	20	20	18
Complaint investigations	2	5	0	2	1
Fees collected*	*	*	\$5,000	\$5,500	\$22,500

*Fee collections for ambulatory surgical centers are included in the fee collections for the Hospitals program area.

i This program was created to require standards of care for surgery performed in freestanding Ambulatory Surgical Centers. The quality of medical care in ambulatory surgical centers is to be the same as that required in hospitals licensed in the State of Oklahoma. Facility Services Division (FSD) staff strive to ensure

compliance with minimum standards and the provision of quality care. FSD staff review initial and final construction, perform on-site surveys to assure compliance with standards, issue licenses, monitor compliance, investigate complaints, and sanction facilities that fail to comply.

BIRTHING CENTERS

<http://mfs.health.ok.gov>

Clients Served:

Birthing centers and consumers who utilize the services of such centers.

Authority:

63 O.S., Section 1-701
 OAC 310:616
 No comparable Federal program exists.

Contact Person:

Dean Bay, Director
 405.271.6576
 Fax: 405.271.1141
 deanb@health.ok.gov

Funding Source:

State Licensure Fees

Fees:

Per bed per year \$10.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed birthing centers	0	0	0	0	0
Licensure surveys and follow-ups	-----	-----	-----	-----	-----
Complaint investigations	-----	-----	-----	-----	-----
Fees collected*	*	*	*	*	*

*Fee collections for birthing centers are included in the fee collections for the Hospitals program area.

i This program was established to allow certified nurse midwives to operate birthing facilities and to receive a license if certain criteria are met. A license is not compulsory for this program, however, if a facility is

licensed, compliance with minimum standards is determined by the Facility Services Division (FSD). FSD staff perform on-site inspections, issue licenses, and investigate complaints.

CLINICAL LABORATORY IMPROVEMENT AMENDMENTS (CLIA)

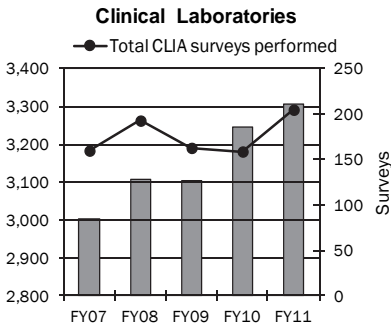
<http://mfs.health.ok.gov>

Clients Served:

Clinical laboratories and consumers who utilize the services provided by clinical laboratories.

Contact Person:

Dean Bay, Director
405.271.6576
Fax: 405-271.1141
deanb@health.ok.gov



Authority:

Public Law 100-578
(CLIA-88)
42 CFR Part 493
No comparable
State program
exists.

Funding Source:

Federal Contract
Allocation

Statistics:	FY07	FY08	FY09	FY10	FY11
Certificate of Compliance Labs	-----	-----	277	294	306
Certificate of Waiver Labs	-----	-----	2,034	2183	2236
Certificate of Provider Performed Microscopy Procedures Labs	-----	-----	534	533	533
Certificate of Accreditation Labs	-----	-----	260	237	230
Total Clinical Laboratories in operation	3,004	3,108	3,105	3,247	3,305
Total CLIA surveys performed	160	193	163	159	205
Initial surveys for new laboratories	11	18	11	23	13
Recertification surveys for Certificate of Compliance laboratories	122	116	105	114	123
Validation surveys of Certificate of Accreditation laboratories	7	8	5	7	6
Recertification surveys of Certificate of Waiver laboratories	26	39	16	41	43
Complaint investigations	3	4	5	1	2
Follow-up surveys	17	8	21	14	18

i Federal law (CLIA-67) was amended in 1998 to regulate all clinical laboratory testing regardless of location. The Department agreed to contract with the Centers for Medicare & Medicaid Services (CMS) to implement the program. Facility Services Division (FSD) staff strive to

ensure quality laboratory testing. FSD staff conduct on-site surveys and certify laboratories every two years, conduct complaint investigations, monitor proficiency testing, train providers, and sanction non-compliant laboratories as necessary.

EMERGENCY SYSTEMS EMERGENCY MEDICAL SERVICES

www.ok.gov/health/Protective_Health/Emergency_Medical_Services/

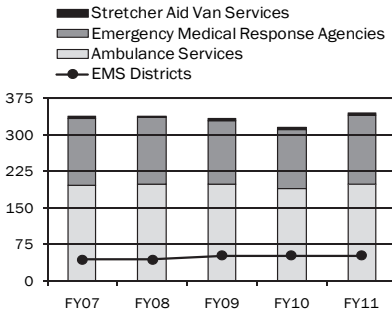
Clients Served:

Ambulance services, emergency medical technicians, training programs, emergency medical responders, emergency medical response agencies, and consumers who utilize these several services.

Contact Person:

Dale Adkerson, Director
405.271.4027
Fax: 405.271.4240
dalea@health.ok.gov

Emergency Medical Services



Authority:

63 O.S. Sections
1-2501 et seq.
OAC 310:641
No comparable
Federal program
exists.

Funding Source:

State Licensure Fees
and State Appropriated Funds

Fees for Agencies:

(issued for a two year period)

Ambulance Services Licenses:

Initial \$600.00, plus
\$20.00 for each vehicle in excess of two, and
\$150.00 for each substation

Renewal \$100.00, plus
 \$20.00 for each vehicle in excess of two, and
 \$50.00 for each substation

Emergency Medical Response Agency (issued for a two year period):
 Initial \$50.00
 Renewal \$20.00

Fees for Individual Emergency Medical Technicians (EMTs):
 (issued for a two year period)

Initial EMT Licensure, including practical skills testing:

Basic \$75.00 + \$10.00 DBA*
 Intermediate \$150.00 + \$10.00 DBA*
 Paramedic \$200.00 + \$10.00 DBA*

EMT Re-licensure:

Basic \$20.00 + \$10.00 DBA*
 Intermediate \$25.00 + \$10.00 DBA*
 Paramedic \$30.00 + \$10.00 DBA*

(*Death Benefit Assessment)

Skills re-testing fees (Intermediate and Paramedic only):

Partial (up to 2 skills for Intermediate; up to 5 skills for
 Paramedic) \$50.00
 Full test, all skills \$100.00

Statistics:

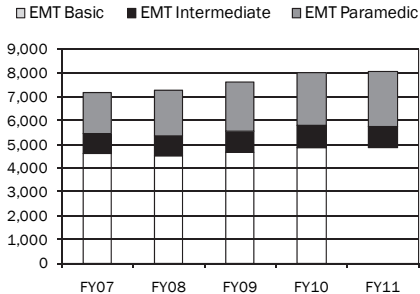
AGENCIES	FY07	FY08	FY09	FY10	FY11
<i>EMS Districts</i>	44	44	52	52	52
<i>Ambulance Services</i>	195	197	198	189	198
<i>Emergency Medical Response Agencies</i>	138	137	130	121	142
<i>Stretcher Aid Van Services</i>	4	4	4	4	5

Medical Facilities Service

TRAINING	FY07	FY08	FY09	FY10	FY11
EMS Training Institutions	44	41	40	41	40
EMT training courses approved	940	982	1,003	1,026	795
ALS exams administered	19	12	12	12	12
Candidates tested	529	288	301	340	283

*The figures reported for these years include all levels.

Emergency Medical Technicians



EMTs	FY07	FY08	FY09	FY10	FY11
EMT Basic	4,633	4,539	4,686	4,878	4,884
EMT Intermediate	798	791	840	894	856
EMT Paramedic	1,737	1,919	2,080	2,229	2,305
Total EMTs	7,168	7,249	7,606	8,001	8,045

i The Emergency Medical Services (EMS) program was created to: (1) implement a national standard of care for the provision of emergency medical services; (2) implement statewide coordination of EMS; (3) monitor compliance with minimum standards; and (4) collect data on

emergency medical services responses statewide. EMS staff draft, implement and interpret rules; issue licenses to appropriate entities consistent with statute and rule; collect statistical data; inspect and approve training programs; coordinate testing of EMT candidates, inspect and

PROGRAM ACTIVITIES	FY07	FY08	FY09	FY10	FY11
<i>Surveys of licensed ambulance services conducted</i>	195	195	195	193	116
<i>Complaints investigated</i>	42	62	52	43	56
<i>Training program site visits conducted</i>	44	65	51	27	14
<i>EMT new licenses issued</i>	-----	-----	450	514	803
<i>EMS new licenses issued</i>	-----	-----	6	4	8
<i>EMT renewal licenses issued</i>	-----	-----	3,385	3,466	3,130
<i>EMS renewal licenses issued</i>	-----	-----	97	83	138
<i>Total new and renewal licenses issued</i>	-----	1,300	3,938	4,067	4,079
<i>Fees collected</i>	\$232,375	\$194,704	\$241,775	\$271,028	\$222,869

approve ambulance services, vehicles, equipment, and documentation; investigate complaints against regulated entities; provide technical assistance as necessary, and take enforcement actions against regulated entities for noncompliance.

ministrators assigned to support ambulance services and emergency medical response agencies in the state, a Training and Licensure section to regulate and develop EMS education, and a Data section to coordinate the collection and collation of pre-hospital run report data.

The EMS Division has two EMS Ad-

OKLAHOMA EMERGENCY RESPONSE SYSTEMS DEVELOPMENT ADVISORY COUNCIL (OERSDAC)

This Council (OERSDAC) is authorized by statute (Title 63, Oklahoma Statutes, Section 1-2516) and is composed of physicians, health service providers, consumers of health care, other health care professionals and persons involved in the education

and training of emergency medical personnel.

The Council consists of 19 members, eight of whom must be persons representing rural areas of the state and counties with populations under

Medical Facilities Service

50,000. Six members are appointed by the Governor, five members are appointed by the Commissioner of Health, four members are appointed by the Speaker of the House of Representatives, and four members are appointed by the President Pro Tempore of the Senate. Members are appointed for a two-year term. Appointees are eligible for reappointment, but in no case can any appointee serve for more than six consecutive years on the Council.

The Council advises the Commissioner, or the Commissioner's designee, on the following: (1) training program specifications for emergency medical personnel, the types of medical care procedures which may be performed by emergency medical personnel, and qualifications for license and

certification of emergency medical personnel; (2) patient care equipment for ambulances, ambulance specifications, criteria and standards for the classification of emergency medical services rendered by providers, including communications and reporting requirements, and operational procedures for providers of ambulance services; (3) design of the statewide communications system, including procedures for summoning and dispatching emergency medical service, including 911; (4) projects, programs, and legislation needed to improve emergency medical services in the state; and (5) such other matters and activities as directed by the Commissioner, or the Commissioner's designee.

OERSDAC Membership

<i>Jim Johnson, Chair</i>	<i>Jay Gregston</i>	<i>C. Michael Ogle</i>
<i>Steve Williamson</i>	<i>Gerald Doeksen</i>	<i>(Vacant)</i>
<i>Wade Patterson</i>	<i>Kellie Swim</i>	<i>(Vacant)</i>
<i>Gina Riggs</i>	<i>Jeffrey Goodloe</i>	<i>(Vacant)</i>
<i>Ellen Rockenbach</i>	<i>Bob Hawley</i>	<i>(Vacant)</i>
<i>Vanessa Brewington</i>	<i>Angela Selman</i>	
<i>Sean Lauderdale</i>	<i>Ron Feller</i>	

EMERGENCY SYSTEMS

TRAUMA SERVICE

<http://td.health.ok.gov>

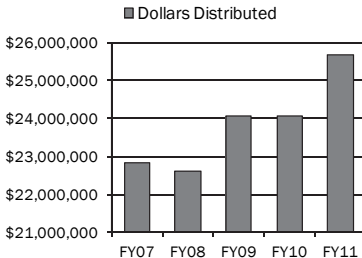
Clients Served:

All Oklahomans and the public requiring trauma care.

Contact Person:

(Vacant), Director
405.271.2657
Fax: 405.271.4027

Trauma Division



Authority:

63 O.S. Sections
1-2530 et seq.
OAC 310:669
No comparable
Federal program
exists.

Funding Source:

State Tobacco
Taxes, Fines,
and Special
Assessments

Statistics:

	FY07	FY08	FY09	FY10	FY11
Amount distributed to physicians, hospitals and EMS agencies for reimbursement of eligible uncompensated trauma care claims	\$22,842,652	\$22,604,360	\$24,059,301	\$24,076,837	\$25,680,066

i The charge of the Trauma Service is to create a statewide system of optimal care for all trauma patients to ensure the right patient goes to the right facility in the right amount of time. Trauma Service initiatives in FY 2011 included development, planning and implementation of Regional Trauma Plans in each of the eight geographic Trauma Regions, disbursement of the Trauma Care Assistance Revolving Fund to qualified

entities for reimbursement if uncompensated trauma care, quality improvement activities, oversight of the Trauma Referral Centers (TReC), administration and management of EMResource, and facilitation of the Oklahoma Trauma System Improvement and Development Advisory Council, Medical Audit Committee, Regional Trauma Advisory Boards (RTABs), and RTAB subcommittees.

OKLAHOMA STATE TRAUMA SYSTEMS IMPROVEMENT AND DEVELOPMENT ADVISORY COUNCIL (OTSIDAC)

The Oklahoma Trauma Systems Improvement and Development Advisory Council is established in statute (63 O.S., Section 1-2530.4). The purpose of the Council is to make recommendations to the Commissioner regarding matters related to the responsibilities of the Department under the Oklahoma Trauma Systems Improvement and Development Act.

The Council is composed of 19 members who are appointed by

the Governor, Speaker of the House, and President Pro Tempore of the Senate representing the following categories of individuals.

The President Pro Tempore of the Senate appoints: (1) a faculty member from a state university college of public health; (2) a trauma registrar of a licensed hospital that is classified as providing trauma and emergency operative services; (3) a representative of a licensed hospital that is classi-

fied as providing trauma and emergency operative services in a rural community; (4) an emergency medical technician who is employed by a provider of emergency medical services (5) an orthopedic surgeon with privileges at a licensed hospital classified as providing trauma and emergency services, and (6) a person representing a hospital primarily engaged in the practice of orthopedic medicine and/or neurosurgery.

The Speaker of the House of Representatives appoints: (1) a board-certified emergency physician; (2) a licensed physician who is an emergency medical services medical director; (3) a representative from a rehabilitation facility; (4) a hospital administrator from a licensed hospital classified as a level I or II trauma and emergency operative services facility; (5) a trauma surgeon with privileges at a licensed hospital classified as providing trauma and emergency operative services, and (6) a person representing a hospital primarily engaged in the practice of orthopedic medicine and/or neurosurgery.

The Governor appoints: (1) a rep-

resentative from the Department of Public Safety; (2) a licensed physician who is a pediatrician with privileges at a licensed hospital classified as providing trauma and emergency operative services; (3) a representative of the general public who is not qualified to serve under another subdivision of this subsection; (4) an administrative director of a licensed ambulance service; (5) a representative of a licensed hospital that is classified as providing trauma and emergency operative services in an urban community, (6) a person representing a hospital primarily engaged in the practice of orthopedic medicine and/or neurosurgery, and (7) an oral or maxillofacial surgeon.

The duties and responsibilities of the Council are to: (1) periodically review rules promulgated by the State Board of Health related to the Oklahoma Trauma Systems Improvement and Development Act and may recommend changes in those rules to the Board; (2) reassess as necessary the need to modify trauma care systems in all regions of the state and receive recommendations forwarded by regional trauma advisory boards;

Medical Facilities Service

and (3) develop and recommend a statewide trauma systems plan to be incorporated into the comprehensive plan for emergency medical services specified in 63 O.S., Section 1-2511.

emergency medical services and licensed hospitals located in each region. The plan also establishes continuous quality improvement activities to be conducted in each region.

The plan recognizes geographic regions of the state and identifies

OTSIDAC Appointments

<i>Michael Lapolla, MHA, Chairperson</i>	<i>Chad Aduddell</i>
<i>Cole C. Eslyn, FACHE</i>	<i>Tonya Washburn, M. D.</i>
<i>Rick Ferguson</i>	<i>V. Pam Broyles, R. N.</i>
<i>Tony Hutchison</i>	<i>Jimmy Johnson</i>
<i>Steve Katsis, M. D.</i>	<i>John Sacra, M. D.</i>
<i>Eddie Sims, EMT-P</i>	<i>Bob Swietek, R. N.</i>
<i>David Teague, M. D.</i>	<i>Cpt. H. Todd Blish</i>
<i>Roxie Albrecht, M. D.</i>	<i>Bob Letton, M. D.</i>
<i>Steven Sullivan, D. D. S.</i>	<i>Robert Steves, M.D.</i>
<i>J. Michael Fitzgerald, D.O.</i>	

**MEDICAL AUDIT
COMMITTEE**

The Medical Audit Committee is mandated by statute (63 O.S. Section 1-2540.6). The purpose of the Medical Audit Committee is to

review trauma patient care and continuous quality improvement activities of the regional trauma

advisory boards. The Medical Audit Committee meets bi-monthly.

Medical Audit Committee Members

Roxie Albrecht, M.D.
Jeffrey Goodloe, M.D.
Terrence Boring, M.D.
M. Edmund Braly, D.D.S.
Charles Fullenwider, M.D.
Johnny Griggs, M.D.
Peter Hedberg, M.D.
John Sacra, M.D.
Bruce Storms, M.D.

HEALTH FACILITIES PLAN REVIEW

<http://mfs.health.ok.gov>

Clients Served:

Licensed and certified Hospitals and other Medical Facilities, Long Term Care Facilities, and consumers who utilize the services of those facilities.

Contact Person:

William H. (Bill) Culver, Architect
405.271.6785
Fax: 405.271.1738
williamc@health.ok.gov

Medical Facilities Service

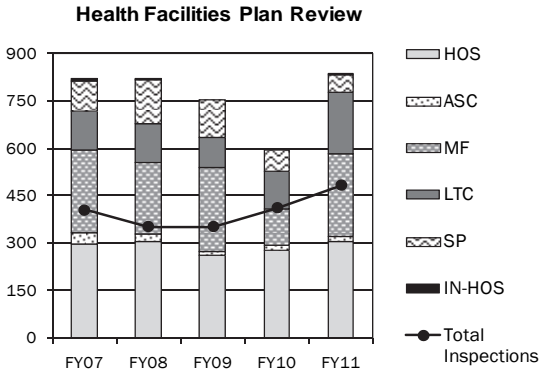
Fees: \$250.00 up to and including \$2,000.00 (dependent upon construction cost) for plan reviews for ASC, hospital and inpatient hospice construction. Fees are assessed for plan reviews of Long Term Care Nursing and ICF/MR Facilities construction plans showing an increase in beds in an amount not more than two one-hundredths percent (0.02%) or one thousand dollars (\$1,000.00), whichever is least, per project of total construction.

Authority:

63 O.S. Sections 1-701 et seq.
 63 O.S. Sections 1-860.1 et seq.
 The Social Security Act, Sections 1861(f) and (e)
 OAC 310:667 (Hospitals)
 OAC 310:615 (Ambulatory Surgical Centers)
 OAC 310:663 (Assisted Living Facilities)
 OAC 310:680 (Residential Care Homes)
 OAC 310:675 (Nursing Facilities)
 OAC 310-675 (ICF/MR Facilities)
 OAC 310-616 (Birthing Centers)
 OAC 310:605 (Adult Day Care Facilities)
 OAC 310:315 (Public Bathing-Pools)

Funding Source:

State and Federal Funds and fees



Statistics:	FY07	FY08	FY09	FY10	FY11
Total plan reviews	562	593	487	482	509
Total inspections	404	351	350	410	482
Hospital reviews (HOS)	297	305	263	278	306
Ambulatory surgical center reviews (ASC)	38	24	10	15	16
Medical facility related inspections (MF)	262	228	267	115	261
Long term care reviews (LTC)	124	123	97	121	196
Long term care inspections	106	98	65	97	102
Life safety code surveys	27	20	18	16	18
Swimming pool plan reviews (SP)	95	139	117	68	56
Swimming pool inspections	3	2	0	0	0
Inpatient hospice reviews (IN-HOS)	8	2	0	0	1
Inpatient hospice inspections	6	3	0	0	2
Fees collected	\$146,155	\$146,644	\$103,958	\$109,830	\$179,000

i This program was created to ensure compliance with minimum construction standards and life safety standards. A plan review fee for hospitals was instituted on July 13, 2000, for long term care facilities on June 4, 2004, for inpatient hospice facilities on May 27, 2004, and for ASC's on July 25, 2010. Health Facilities Plan Review (HFPR) staff perform on-

site, phased construction inspections to assure compliance with minimum standards, and to monitor construction compliance. HFPR staff also provide consultation to providers, owners, architects, and others associated with medical related facilities, long term care facilities, and public bathing places.

HOME HEALTH PROVIDERS

<http://mfs.health.ok.gov>

Clients Served:

Home Health Agencies and individuals that utilize the services of Home Health Agencies.

Contact Person:

Tina Hughes, Director
405.271.6576
Fax: 405.271.1141
tinah@health.ok.gov

Authority:

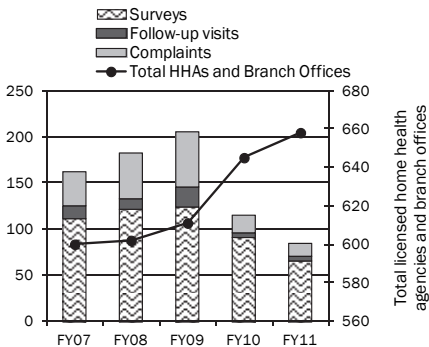
63 O.S. Sections 1-1960 et seq.
OAC 310:662
The Social Security Act, Sections 1861(o) and 1891(a)
42 CFR Part 484

Complaint Hotline: 1.800.234.7258

Funding Source:

Federal Contract Allocation and State Licensure Fees

Home Health Providers



Fees:

Initial license fee \$1,000.00
Annual renewal fee \$500.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
Licensed only home health agencies	-----	97	98	122	135
Licensed and medicare certified home health agencies	-----	222	235	240	243
Total number of licensed home health agencies	313	319	333	362	378
Additional branch office home health agency locations	287	283	278	283	280
Medicare surveys conducted	94	96	90	57	48
Medicare follow-up visits conducted	12	12	19	4	5
Medicare complaints investigated	23	33	45	13	11
Licensure surveys conducted	17	25	34	34	17
Licensure follow-up visits conducted	2	0	2	0	0
Licensure complaints investigated	14	16	15	7	3
Fees collected	\$162,502	\$230,112	\$216,950	\$192,950	\$165,788

i Home Services Division (HSD) staff strive to ensure compliance with minimum standards and the provision of quality care. HSD staff perform on-site surveys to ensure compliance with standards, issue licenses, monitor compliance, conduct home visits to clients receiving services, investigate complaints, and sanction facilities that fail to comply. Every person, corporation, partner-

ship, association or other legal entity desiring to obtain a license to establish, or to obtain a renewal license to operate a home care agency in this state must make application to the Department in such form and accompanied by such information as the State Commissioner of Health prescribes.

HOME HEALTH ADVISORY BOARD

This Board is established in statute (63 O.S., Section 1-1970) to serve as an advisory body to the Department. The Board consists of seven members who are appointed by the Commissioner of Health from a list of names (equal to twice the number of positions to be appointed) submitted by any statewide organization comprised exclusively of home care agencies. One member must be a licensed family practice physician or licensed general practitioner of the medical profession with a practice which includes home health services; one member must be a li-

censed registered nurse with a practice which includes home health services; two members must be administrators of licensed home health agencies; and three members who represent the general public and who must, within twenty-four months of their appointment, be consumers of home health services for themselves or for family members within the third degree of consanguinity. Members are appointed for a three year term. The Board must meet at least quarterly and at such other times as necessary.

Advisory Board Members

Flo Stuckert, R.N., Chair

Betty Brannan

Karen Brown, R.N.

Ken Smith, M.D.

Gary Moody

Lisa James

Tecla Webber, R.N., M.S.

HOSPICE PROVIDERS

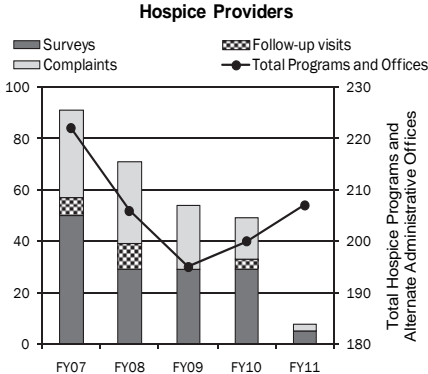
<http://mfs.health.ok.gov>

Clients Served:

Terminally ill patients and hospice programs.

Contact Person:

Tina Hughes, Director
405.271.6576
Fax: 405.271.1141
tinah@health.ok.gov



Authority:

63 O.S. Sections
1-860.1 et seq.
OAC 310:661
The Social Security Act, Sections 1861(o) and 1891(a)
42 CFR Part 418

Funding Source:

Federal Contract Allocation and State Licensure Fees

Fees:

Initial application fee	\$500.00
Initial license fee	\$1500.00
Permanent license fee	\$2000.00
Renewal fee (annual renewal).....	\$2000.00
Alternate Administrative Office.....	\$500.00

Medical Facilities Service

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Licensed hospice programs</i>	157	150	141	144	152
<i>Alternate administrative offices currently in operation</i>	65	56	54	56	55
<i>Medicare surveys conducted</i>	29	6	4	5	0
<i>Medicare follow-ups conducted</i>	6	6	0	4	0
<i>Medicare complaints investigated</i>	25	28	23	14	0
<i>Licensure surveys conducted</i>	21	23	25	24	5
<i>Licensure follow-ups conducted</i>	1	4	0	0	0
<i>Licensure complaints investigated</i>	9	4	2	2	3
<i>Fees collected</i>	\$109,842	\$293,910	\$312,000	\$293,000	\$273,000

i The hospice program provides supportive and palliative care to terminally ill patients. It is medically directed and nurse-coordinated. The physical setting may be a home, an institution, or a health facility. Home Services Division (HSD) staff strive to ensure compliance with minimum standards and the provision of quality care for terminally ill patients.

HSD staff perform on-site surveys to ensure compliance with standards, issue licenses, monitor compliance, investigate complaints, and sanction facilities that fail to comply. A license issued for the operation of a hospice program, unless sooner suspended or revoked, must be renewed annually.

HOSPICE ADVISORY BOARD

The Hospice Advisory Board is established in statute (63 O.S., Section 1-860.13) to serve as an advisory body to the Department. The Board consists of seven members who are

appointed by the Governor. One member must be a licensed general practitioner of the medical profession; one member must be a licensed registered nurse; one mem-

ber must be a licensed professional counselor, licensed psychologist, or licensed social worker; one member must be a member of a statewide association of home care operators whose membership consists of a majority of the licensed home health operators in the state; two members must be administrators of licensed hospices; and one member must represent the general public.

Members are appointed for a three year term. The Board must meet at least quarterly, and may hold such special meetings as may be necessary. Four members of the Board constitute a quorum.

Advisory Board Members

Waddah N. Nassar, M.D., Chair

Linda Edmondson, L.C.S.W.

Michelle Fox, R.N., CHPN

Kelly Nunn, R.N., CHPN

Terry Jones, B.A.

Stacy Palmer, R.N., BSN

Gregory Wood, M.S., L.B.S.W.

HOSPITALS

<http://mfs.health.ok.gov>

Clients Served:

Licensed and certified hospitals and consumers who utilize the services of those hospitals.

Contact Person:

Dean Bay, Director
405.271.6576
Fax: 405.271.1141
deanb@health.ok.gov

Medical Facilities Service

Authority:

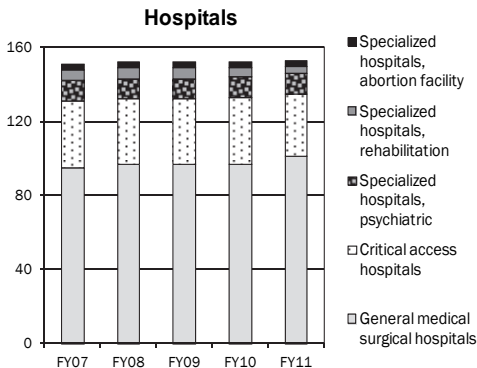
63 O.S., Sections 1-701 et seq.
 OAC 310:667
 The Social Security Act, Sections 1861(f) and (e)
 42 CFR Part 482 and 42 CFR Part 489

Funding Source:

Federal Contract
 Allocation and
 State Licensure
 Fees

Fees:

\$10.00 per bed
 per year



Statistics:

	FY07	FY08	FY09	FY10	FY11
General medical surgical hospitals	95	97	97	97	101
Critical access hospitals	36	35	35	36	34
Specialized hospitals, psychiatric	11	11	11	11	11
Specialized hospitals, rehabilitation	6	6	6	5	4
Specialized hospitals, abortion facility	3	3	3	3	3
Total licensed hospitals	151	152	152	152	153
Fees collected*	\$185,424	\$134,160	\$163,020	\$164,635	\$191,480

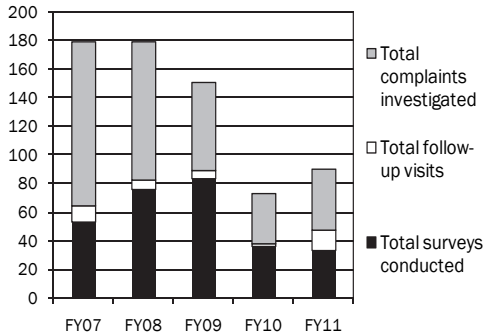
*Note: The total dollar amount of fees collected above includes fees for Ambulatory Surgical Centers, Birthing Centers, and Workplace Drug and Alcohol Testing Facilities.

Medical Facilities Service

MEDICARE	FY07	FY08	FY09	FY10	FY11
Initial surveys	4	2	0	0	0
Re-certification surveys	15	21	25	10	9
Validation surveys	1	2	1	2	2
Life safety code surveys	-----	22	26	12	13
Survey follow-ups	7	6	6	1	12
Complaint investigations	103	94	57	34	43
Total medicare surveys and follow-ups	130	147	115	64	79

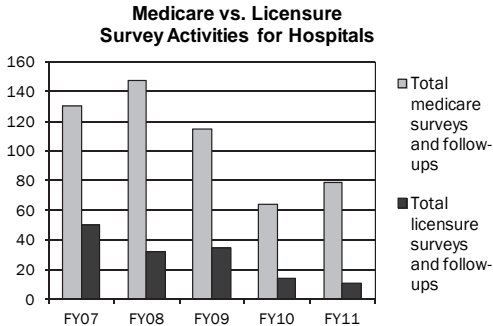
LICENSURE	FY07	FY08	FY09	FY10	FY11
Initial surveys	4	1	3	0	0
Re-licensure surveys	29	27	28	12	9
Survey follow-ups	4	1	0	0	2
Complaint investigations	12	3	4	2	0
Total licensure surveys and follow-ups	50	32	35	14	11

Survey Activities for Hospitals



i This program was created to protect the public and to ensure a minimum standard of care. Medi-

care certification was established in 1966 while the hospital licensure program was established in 1947.



Hospitals may also be accredited by a third party accreditation organization. Facility Services Division (FSD) staff strive to ensure compliance with minimum standards and the provision of quality care. FSD staff perform on-site surveys to ensure compliance with standards, monitor

compliance, investigate complaints, and sanction facilities that fail to comply. Limited funding for this program has reduced the number of on-site surveys performed annually from 100% to approximately 10 to 15%.

HOSPITAL ADVISORY COUNCIL

The Hospital Advisory Council is authorized by statute (63 O.S., Section 1-707) to serve as an advisory body to the Department. The Advisory Council is composed of nine members appointed by the Commissioner with the advice and consent of the Board of Health. The member-

ship of the Advisory Council is as follows: Two members are hospital administrators of licensed hospitals; two members are licensed physicians or practitioners who have current privileges to provide services in hospitals; two members are hospital employees; and three members

are citizens representing the public who: are not hospital employees, do not hold hospital staff appointments, and are not members of hospital governing boards.

Members are appointed for a three year term. The Board must meet at least quarterly, and may hold such special meetings as may be necessary.

The Advisory Council has the duty and authority to: (1) review and approve in its advisory capacity rules and standards for hospital licensure; (2) evaluate, review and make recommendations regarding Department licensure activities, provided however, the Advisory Council shall not make recommendations regard-

ing scope of practice for any health care providers or practitioners regulated pursuant to Title 59 of the Oklahoma Statutes, and (3) recommend and approve: quality indicators and data submission requirements for hospitals to include (a) Agency for Healthcare Research & Quality (AHRQ) Patient Safety Indicators available as part of the standard inpatient discharge data set, and (b) for acute care intensive care patients, ventilator-associated pneumonia and device related blood stream infections, and the indicators and data to be used by the Department to monitor compliance with licensure requirements, and to publish an annual report of hospital performance.

Advisory Council Members

Dale Bratzler, D.O., Chair
Gloria Caldwell
Nancy Cooper, A.R.N.P.
Starla Givins, R.N.
Gary W. Mitchell, F.A.C.H.E.

Ken Rose, Ed.D.
Betty Selby
Steven Dale Harris
(Vacant)

MEDICARE CERTIFICATION FOR:

End Stage Renal Disease Centers, Community Mental Health Centers, Comprehensive Outpatient Rehabilitation Facilities, Outpatient Rehabilitation Agencies, PPS Excluded Psychiatric Units/PPS Excluded Rehabilitation Units, Portable X-Ray Units, Rural Health Clinics, Swing Bed Hospital Units

STATE PERMITS FOR:

Tissue Banks and Eye Banks

<http://mfs.health.ok.gov>

Clients Served:

The above named entities, and consumers who utilize services provided by the entities.

Contact Person:

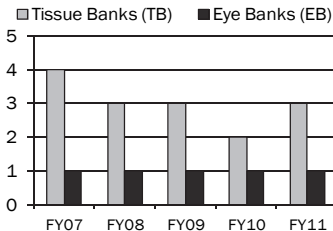
Dean Bay, Director

405.271.6576

Fax: 405.271.1141

deanb@health.ok.gov

State Permits



Authority:

State Permit Citations

63 O.S. Sections

1-2201 et seq.

OAC 310:505

The Social Security

Act and various

Related Code of

Federal Regulations

Funding Source:

Federal Contract

Allocation and

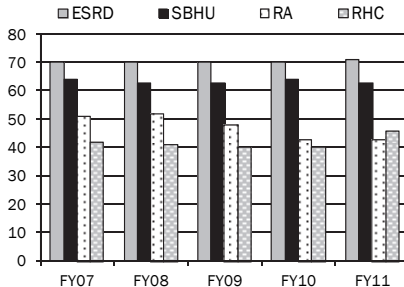
State Licensure

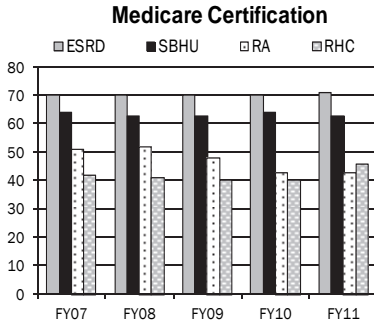
Fees

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>End Stage Renal Disease Centers (ESRD)</i>	70	70	70	70	71
<i>Swing Bed Hospital Units (SBHU)</i>	64	63	63	64	63
<i>Rehabilitation Agencies (RA)</i>	51	52	48	43	43
<i>Rural Health Clinics (RHC)</i>	42	41	40	40	46
<i>PPS Excluded Psychiatric Units (PPS-PU)</i>	23	23	23	23	21
<i>PPS Excluded Rehabilitation Units (PPS-RU)</i>	20	21	21	21	21
<i>Portable X-Ray Units (PX-R)</i>	13	13	13	13	16
<i>Community Mental Health Centers (CMHC)</i>	8	8	8	8	8
<i>Comprehensive Outpatient Rehabilitation Facilities (CORF)</i>	5	4	3	3	3
<i>CORF Recertifications</i>	-----	-----	2	1	0
<i>RA Recertifications</i>	-----	-----	6	2	2
<i>PX-R Recertifications</i>	-----	-----	2	0	0
<i>RHC Recertifications</i>	-----	-----	4	1	7
<i>Tissue Banks (TB)</i>	4	3	3	2	3
<i>Eye Banks (EB)</i>	1	1	1	1	1

Medicare Certification





i These Medicare-certified programs were implemented to assure quality care for beneficiaries. Medical Facilities Service staff strive to ensure that services provided by these facilities meet the minimum standards for certification. These programs do not have statutory

requirements for annual surveys and therefore, no funding to perform annual surveys. Staff perform on-site surveys for initial certification, periodic surveys for continued certification, and complaint investigations.

QUALITY INITIATIVES

[www.ok.gov/health/Protective_Health/Medical_Facilities_Service/
Facility_Services_Division/Hospital_Annual_Report/index.html](http://www.ok.gov/health/Protective_Health/Medical_Facilities_Service/Facility_Services_Division/Hospital_Annual_Report/index.html)

Clients Served:

Licensed and certified providers of acute care health services and consumers who utilize the services of those providers.

Contact Person:

Vonnie Meritt, RN, MPH
Director
405.271.6576
Fax: 405.271.1141
vonniem@health.ok.gov

Authority:

63 O.S. Section 1-701

Funding Source:

State Appropriation

i The Quality Initiatives Unit has a broad directive to identify opportunities to improve the quality and effectiveness of acute health care services provided by licensed and certified entities in Oklahoma and to implement strategies to address those opportunities. In addition to improving the care provided by licensed and certified entities, this unit is also charged with generating quality and performance data related to acute health care organizations and providing this information to consumers and the public to help guide them in choosing a health care provider. Ongoing activities of this Unit build on systems created and validated by both the Agency for

Healthcare Research and Quality (AHRQ) through the Patient Safety Indicator data analysis tools, and the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network designed to collect and analyze data related to a broad range of Healthcare Associated Infections (HAI). This quality and performance data is designed to promote the implementation of best practices known to improve outcomes and to drive the quality of care associated with certain clinical events. The Quality Initiatives group is also responsible for compiling and publishing the Hospital Annual Report.

WORKPLACE DRUG AND ALCOHOL TESTING FACILITIES

<http://mfs.health.ok.gov>

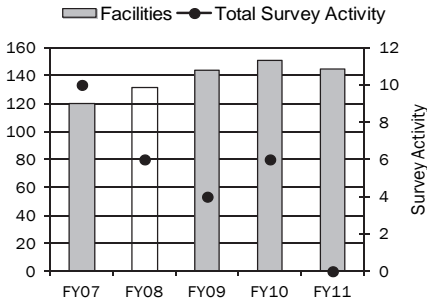
Clients Served:

Drug and alcohol testing facilities and consumers (employees and employers) who utilize the services of such facilities.

Contact Person:

Dean Bay, Director
405.271.6576
Fax: 405.271.1141
deanb@health.ok.gov

Workplace Drug and Alcohol Testing Facilities



Authority:

40 O.S. Sections
551 et seq.
OAC 310:638

Funding Source:

Fees Collected


Fees:

Initial \$150.00
Annual renewal..... \$150.00

Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Licensed workplace drug and alcohol testing facilities</i>	120	131	144	151	145
<i>Surveys conducted</i>	9	5	4	6	0
<i>Follow-ups conducted</i>	-----	-----	-----	-----	-----
<i>Complaint investigations</i>	1	1	0	0	0
<i>Fees collected*</i>	*	*	\$21,150	\$20,550	\$19,650

**Fees collected are included with the fees shown for the Hospitals program area*

 This program was created to ensure employers and testing facilities comply with minimum standards if they choose to test employees for drugs or alcohol. Facility Services Division (FSD) staff regulate employ-

ers and testing facilities through licensure. FSD staff also perform on-site surveys to ensure compliance with standards, investigate complaints, and sanction facilities that fail to comply.

Quality Improvement & Evaluation Service

Nancy Atkinson, Chief

405.271.5278

Fax: 405.271.1402

nancyh@health.ok.gov

MDS-OASIS

Carla Petty, RN, MPH, CPHQ, Director

405.271.5278

Fax: 405.271.1402

carlap@health.ok.gov

Quality Assurance & Data Systems

Walter Jacques, Director

405.271.5278

Fax: 405.271.1402

walterj@health.ok.gov

MINIMUM DATA SET (MDS)

<http://qies.health.ok.gov>

Clients Served:

Medicare and Medicaid certified nursing facilities and staff; Centers for Medicare and Medicaid Services (CMS); privately owned software vendors; State Medicare and Medicaid surveyors; miscellaneous other State and Federal Agencies; and clients of Medicare and Medicaid facilities.

Contact Person:

Carla Petty, RN, MPH, CPHQ
Director
405.271.5278
Fax: 405-271.1402
carlap@health.ok.gov

QIES Help Desk:

405.271.5278

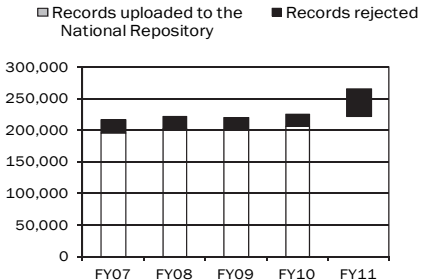
Authority:

63 O.S. Section
1-1925.2(l)(1)
63 O.S., Section
1-890.3(A)(1)
OAC 310:675-9-5.1
42 CFR 483.20
42 CFR 483.315

Funding Source:

State and
Federal Funds

MDS Records

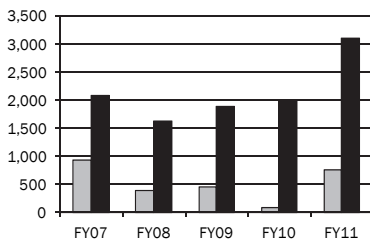


Nursing facilities and skilled nursing facility units are required to conduct comprehensive, accurate, standardized, and reproducible assessments of each resident's functional capacity using

the Minimum Data Set (MDS). The automated MDS system is a critical component of the State Agency and CMS operations, and provides the means for transmission of assessment data to CMS for vali-

MDS Training

□ Number of participants trained ■ Help desk contacts

**Statistics:**

	FY07	FY08	FY09	FY10	FY11
<i>Facilities transmitting MDS data</i>	345	332	325	322	343
<i>Active software vendors</i>	32	31	31	23	28
<i>Resident count</i>	19,225	19,154	18,841	19,044	Not Available
<i>Batches submitted</i>	22,964	22,541	22,524	21,727	36,569
<i>Records processed</i>	216,394	222,121	220,442	226,202	265,553
<i>Records rejected</i>	19,734	19,814	18,750	19,769	43,217
<i>Records uploaded to the National Repository</i>	196,660	202,307	201,692	206,433	222,336
<i>Training sessions</i>	13	9	5	1	2
<i>Number of facilities that sent staff to training</i>	424	118	102	34	309
<i>Number of participants trained</i>	944	393	452	91	760
<i>Help desk contacts</i>	2,094	1,623	1,900	1,991	3,113

dating payments under the Medicare Skilled Nursing Facility Prospective Payment System for nursing homes. CMS has provided each State with an MDS system

composed of standardized hardware and software platforms scaled to meet each State's anticipated processing volumes. The MDS software components are

Quality Improvement & Evaluation Service

developed, distributed, maintained, and upgraded centrally by CMS. The MDS database is a federal database owned by CMS and, as such, is subject to the requirements of the Federal Privacy Act and the MDS System of Records (MDS-SOR) notice. The MDS-SOR describes the legal requirements regarding privacy and disclosure of information by CMS.

MDS staff develop and implement the delivery of health care information, provide consultative assistance regarding the MDS process to health care facilities and maintain the MDS State Repository for upload to CMS. Responsibilities include educating providers in the clinical methodology and completion of MDS forms; receipting and validating MDS records; assisting nursing facilities in understanding and interpreting validation reports and the error correction process; providing routine and intermittent training to nursing facility staff and nursing facility surveyors; furnishing support to software vendors; and, supplying support services to nursing facility surveyors to assist them in the survey process.

QIES Help Desk

The QIES Help Desk is available to anyone who needs assistance with the MDS process. Individuals from QIES manage and staff the Help Desk and are ready to provide users with prompt, knowledgeable, professional and courteous support services. Staff are available to answer questions or concerns about the technical or clinical areas of the MDS instrument or reports generated by the MDS system and will work with users to identify other appropriate resources if needed.

OUTCOME ASSESSMENT AND INFORMATION SET (OASIS)

<http://qies.health.ok.gov>

Clients Served:

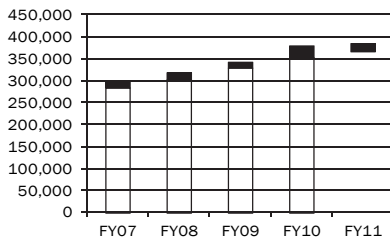
Medicare certified home health agencies and staff; Centers for Medicare and Medicaid Services (CMS); privately owned software vendors; State Medicare surveyors; miscellaneous other State and Federal agencies; and clients of Medicare agencies.

Contact Person:

Carla Petty, RN, MPH, CPHQ
Director
405.271.5278
Fax: 405-271.1402
carlap@health.ok.gov

OASIS Records

■ Records uploaded to the National Repository ■ Records rejected



QIES Help Desk:

405.271.5278

Authority:

42 CFR 484.20
42 CFR 484.55
42 CFR 488.68

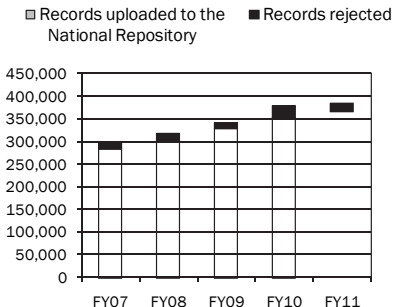
Funding Source:

State and
Federal Funds

i Home Health Agencies are required to conduct comprehensive, accurate, standardized, and reproducible assessments of each resident's functional capacity

using the Outcome and Assessment Information Set (OASIS). The automated OASIS system is a critical component of the State Agency and CMS operations, and

OASIS Records



Statistics:

	FY07	FY08	FY09	FY10	FY11
<i>Agencies transmitting OASIS data</i>	211	216	225	240	244
<i>Active software vendors</i>	30	31	31	32	33
<i>Batches submitted</i>	15,583	16,990	17,173	18,606	18,234
<i>Records processed</i>	300,372	318,152	342,916	378,344	383,837
<i>Records rejected</i>	17,540	16,571	13,860	24,889	17,895
<i>Records uploaded to the National Repository</i>	282,832	301,581	329,056	353,455	365,942
<i>Training sessions</i>	3	3	2	4	1
<i>Number of agencies that sent staff to training</i>	96	95	42	98	28
<i>Number of participants trained</i>	219	232	182	550	61
<i>Help desk contacts</i>	923	776	684	1,115	794

provides the means for transmission of assessment data to CMS for validating payments under the Medicare Skilled Nursing Facility Prospective Payment System for

home health agencies. CMS has provided each State with an OASIS system composed of standardized hardware and software platforms scaled to meet each State's anti-

pated processing volumes. The OASIS software components are developed, distributed, maintained, and upgraded centrally by CMS. The OASIS database is a federal database owned by CMS and, as such, is subject to the requirements of the Federal Privacy Act and the OASIS System of Records (OASIS-SOR) notice. The OASIS-SOR describes the legal requirements regarding privacy and disclosure of information by CMS.

OASIS staff develop and implement the delivery of health care information, provide consultative assistance regarding the OASIS process to home health agencies and maintain the OASIS State Repository for upload to CMS. Responsibilities include educating providers in the clinical methodology and completion of OASIS forms; receipting and validating OASIS records; assisting home health agencies in understanding and interpreting validation reports and the error correction process; providing routine and intermittent training to home health agency staff and home health agency surveyors; furnishing support to software vendors; and, supplying

support services to home health agency surveyors to assist them in the survey process.

QIES Help Desk

The QIES Help Desk is available to anyone who needs assistance with the OASIS process. Individuals from QIES manage and staff the Help Desk and are ready to provide users with prompt knowledgeable, professional and courteous support services. Staff are available to answer questions or concerns about the technical or clinical areas of the OASIS instrument or reports generated by the OASIS system and will work with users to identify other appropriate resources if needed.

QUALITY ASSURANCE & DATA SYSTEMS

<http://qies.health.ok.gov>

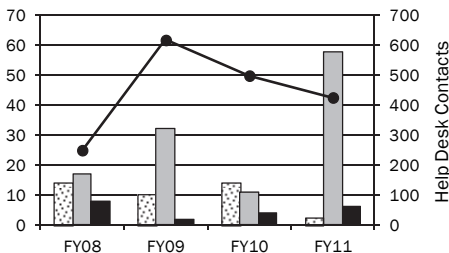
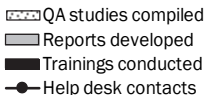
Clients Served:

Program Areas and employees within Protective Health Services.

Contact Person:

Walter Jacques, Director
405.271.5278
Fax: 405-271.1402
walterj@health.ok.gov

**Quality Assurance
& Data Systems**



QIES Help Desk

405.271.5278

Authority:

OAC 310:675-17-1

Funding Source:

State and
Federal Funds

Statistics:	FY08	FY09	FY10	FY11
<i>QA studies compiled</i>	14	10	14	2
<i>Reports developed</i>	17	32	11	58
<i>Trainings conducted</i>	8	2	4	6
<i>Help desk contacts</i>	250	618	499	426

PRESENTATIONS

Quality Assurance and Data Systems (QADS) personnel presented data on Hospice-related statistics for the Office of Inspector General (OIG) in October of 2010.

MAJOR PROJECTS

QADS staff participated in several long-term projects aimed at improving services provided by PHS as well as internal processes:

- Developed a system to provide an ongoing data feed to the Oklahoma Health Care Authority

SYSTEM UPGRADES

Quality Assurance and Data Systems personnel coordinated ASPEN 10.1.1 software upgrade released on 04/26/2011. This upgrade provided:

- New business rules for transplant hospital S&C
- Cert. processes upgrade for hospitals
- New hospital subtypes: Medicaid-only Psych., Medicaid-only non-Psych
- ESRD 3427 form upgrade
- CMS-2802 form upgrades
- CMS-562 upload changes
- Change in enforcement requirements for Nursing Homes
- New regulation sets for OPO

Quality Assurance and Data Systems personnel coordinated ASPEN 10.1 software upgrade released on 11/23/2010. This upgrade provided:

- Maintenance
- ACO/ACTS update

Quality Assurance and Data Systems personnel coordinated ASPEN 10.0 software upgrade released on 11/01/2010. This upgrade provided:

- Advent of ASE-Q and transfer ASE database from Access 97 to SQL Anywhere
 - Crystal Reports upgrade
 - Integration of QIS tools into ASE-Q application
 - Data transfer improvements
 - Content library conversion
 - MDS 3.0 viewer
 - New NH regulation set
-



The Quality Assurance area is responsible for coordinating quality assessment and improvement programs for all service areas within Protective Health Services.

Tasks include assisting Protective Health Services' Divisions to increase the quality and consistency of services provided to the Divisions' clients through the develop-

ment and implementation of individual quality improvement plans. Plans include the statement of goals or targets, the creation of an action plan, and the design of data to be captured. Data collected about quality improvement efforts may then be analyzed to assess the reliability of the data, and to provide feedback to staff and management to ultimately support management decisions. As a result of data analysis, training issues may be identified or determinations made about current training programs and their effectiveness. Program area protocols may be evaluated for appropriateness and effectiveness, while adherence to protocols is monitored to maximize program accountability and continuity, and to optimize the duplication of desired performance.

The purpose of the Quality Assurance area is to provide management with the means for objective, data-based decision making. Quality Assurance provides management with a vehicle to assess a selected area within a program to identify the area's strengths and weaknesses, to measure outcomes of actions taken, and to

gather, analyze, and evaluate alternatives. Additionally, the conduct of quality assurance activities may illustrate and reinforce to Division staff the significance and the value of day-to-day tasks routinely performed.

Quality Assurance staff may also participate in special projects at the request of a Service Chief or the Deputy Commissioner. During the conduct of special projects, interrelationships vary widely and may include the general public, ombudsmen, providers, or provider associations.

The Data Systems area is responsible for maintaining optimal performance of the Quality Improvement and Evaluation System (QIES) which includes the Minimum Data Set (MDS), the Outcome and Assessment Information Set, and the Automated Survey Processing Environment (ASPEN). Data Systems staff (1) provide support and training to the users of all QIES systems; (2) administer, coordinate, implement, support and maintain the QIES database; (3) develop and implement policies and procedures for ensuring the security and integrity of the

database, including user ID and password control; (4) monitor and validate system performance; (5) perform routine maintenance and assist in release and migration planning for the Division; (6) compile project plans to ensure smooth transition to new technology or methodologies; (7) troubleshoot system errors, malfunctions, and network problems; (8) perform research to obtain solutions and reports potential software/hardware issues to federal contractors; (9) represent the Agency as the prime technical contact on system configuration and administration of the QIES Database; and (10) provide ad hoc reporting to management and staff on an as needed basis.

State Licenses, Certifications, and Permits Issued by Protective Health Services

Consumer Health Services	FY07	FY08	FY09	FY10	FY11
Alarm and Locksmith Individuals	2,958	3,578	4,427	4,009	4,024
Alarm and Locksmith Companies	765	731	904	857	867
Barbers	3,491	3,517	3,609	3,694	3,768
Barber Apprentices	77	78	68	92	102
Barber Instructors	103	110	116	126	138
Barber Colleges	8	8	8	11	11
Barber Shops	1,086	1,105	811	1,061	1,069
Bedding Permits	1,608	1,752	1,483	1,631	2,289
Drugs, Cosmetics, Medical Devices, Compressed Medical Gases, Health Fraud	10	13	12	9	10
Fire Extinguisher Individuals	-----	-----	590	533	527
Fire Extinguisher Companies	-----	-----	127	130	130
Hearing Aid Dealers and Fitters (Licensed & Temporary)	144	160	153	157	178
Hotels-Motels	1,089	1,116	1,134	1,149	1,126
Licensed Behavioral Practitioners	234	216	198	191	189
Licensed Genetic Counselors	1	8	14	16	21
Licensed Marital and Family Therapists	459	516	523	523	531
Licensed Professional Counselors	2,735	2,008	2,857	2,916	3,059
Mammography Quality Standards Act	105	108	108	110	108
Medical Micropigmentologists	111	125	136	129	128
Public Bathing Places	3,028	3,005	3,096	2,996	3,114
Public Bathing New Construction Permits	82	121	108	77	58
Retail Food Establishments	21,706	21,598	21,695	24,369	22,127
Food Establishments in Child Care Facilities	-----	-----	-----	794	653
Sanitarians and Environmental Specialists	647	668	661	554	538
Tattoo Artists (Licensed & Temporary)	247	251	354	485	363
Tattoo Establishments	85	99	100	108	97
Body Piercing Artists (Licensed & Temporary)	48	54	57	55	84
Body Piercing Establishments	54	49	47	50	48
Food Manufacturers	1,023	1,009	1,020	924	1,093
Correctional Facilities	95	95	95	95	95
X-Ray Tubes	2,831	2,933	2,953	2,980	2,980
Subtotal:	44,830	45,031	47,464	50,831	49,525

Health Resources

Development Service	FY07	FY08	FY09	FY10	FY11
Adult Day Care Centers	39	43	46	52	39
Certified Workplace Medical Plans	8	2	0	0	3
Continuum of Care Facilities	146	141	159	119	170
Health Maintenance Organizations	7	7	7	7	7
Home Care Administrators	611	679	906	699	670
Independent Review Organizations	6	6	7	8	9
Nurse Aides	35,689	37,195	41,488	41,308	42,183
Nursing & Specialized Facilities	422	427	444	446	405
Residential Care Homes	47	48	56	30	54
Subtotal:	36,975	38,548	43,113	42,669	43,540

Medical Facilities Service	FY07	FY08	FY09	FY10	FY11
Ambulatory Surgical Centers	50	50	49	47	47
Birthing Centers	0	0	0	0	0
Emergency Medical Services and Emergency Medical Technicians	Not Available	1,300	3,938	4,067	4,079
Home Health Agencies	313	319	333	362	378
Hospice Providers	157	150	141	144	152
Hospitals	151	152	152	152	153
Tissue and Eye Banks	2	1	0	3	4
Workplace Drug and Alcohol Testing Facilities	120	131	144	151	145
Subtotal:	Not Available	2,103	4,757	4,926	4,958
STATE TOTAL:	Not Available	85,682	95,334	98,426	98,023

Federal Certifications Issued by Protective Health Services

Long Term Care	FY07	FY08	FY09	FY10	FY11
Intermediate Care Facilities for the Mentally Retarded	90	88	78	96	87
Nursing Facilities	354	308	293	329	305
Subtotal:	444	396	371	425	392

Medical Facilities Service	FY07	FY08	FY09	FY10	FY11
Ambulatory Surgical Centers	6	3	6	19	21
CLIA Laboratories	153	150	121	152	129
Comprehensive Out-patient Rehabilitation Facilities	0	0	2	1	0
End Stage Renal Disease (Dialysis Centers)	12	4	11	10	12
Home Health Agencies	67	96	98	71	60
Hospice Providers	10	9	10	11	5
Hospitals	12	24	30	19	15
Organ Procurement Organization	0	0	0	1	0
Outpatient Physical Therapy/Speech Pathology	0	0	0	3	2
Portable X-Ray Units	1	0	2	0	1
Psychiatric Residential Treatment Facility	0	0	0	13	0
Rehabilitation Agencies	6	0	7	0	0
Rural Health Clinics	4	0	4	4	10
Subtotal:	271	286	291	304	255
FEDERAL TOTAL:	715	682	662	729	647

GRAND TOTAL: Not Available **86,364** **95,996** **99,155** **98,670**

QUICK REFERENCE TELEPHONE DIRECTORY

Deputy Commissioner's Office

Cathey, Timothy, M.D.	405.271.5288
Hartsell, Henry F., Jr., Ph.D.	405.271.5288
Rushing, Crystal.....	405.271.5288
Tomlinson, Sean.....	405.271.5288

Consumer Health Services

Bolz, Vernon.....	405.271.5243
Ely, K. C.	405.271.5243
West, Nena.....	405.271.6030

Health Resources Development Service

Joslin, James.....	405.271.6868
Judge, John W., Jr.	405.271.6868
Kirtley, Vicki	405.271.4085
Simmons, Darlene.....	405.271.6868

Long Term Care

Fleming, Mary.....	405.271.6868
Huser, Dorya.....	405.271.6868
Scott, Patty.....	405.271.6868

Medical Facilities Service

Adkerson, Dale.....	405.271.4027
Bay, Dean.....	405.271.6576
Culver, Bill.....	405.271.6785
Hughes, Tina.....	405.271.6576
Martin, Lee.....	405.271.2657
Welin, Tom.....	405.271.6576

Quality Improvement & Evaluation Service

Atkinson, Nancy.....	405.271.5278
Jacques, Walter.....	405.271.5278
Petty, Carla.....	405.271.5278



Protective
Health Services

Oklahoma State
Department of Health