TO: ALL OFFICES

SUBJECT: MANUAL MATERIAL

OAC 340:70-8-1; 340:70-9, Table of Contents; 70-9-1 through 70-9-2; 70-9-5; 70-9-7; 70-9-9 through 70-9-10; 70-9-15; and 70-9-17.

EXPLANATION:

Policy revisions were approved by the Commission and the Governor as required by the Administrative Procedures Act.

OAC 340:70-8-1 revisions: (1) update obsolete language; and (2) clarify language usage for consistency.

OAC 340:70-9-1 is revoked as information is obsolete and relevant information moved to OAC 340:70-9-2.

OAC 340:70-9-2 revisions: (1) add relevant information revoked from OAC 340:70-9-1 and OAC 340:70-9-10; (2) move information regarding a description of Early and Periodic Screening Diagnosis and Treatment (EPSDT) from OAC 340:70-9-5; (3) add a reference to family planning services; (4) update obsolete language; and (5) clarify language usage for consistency.

OAC 340:70-9-5 revisions: (1) move information about EPSDT to OAC 340:70-9-2; (2) incorporate information revoked from OAC 340:70-9-7; (3) add procedures for handling abnormal findings during an EPSDT examination; (4) update obsolete language; (5) and clarify language usage for consistency.

OAC 340:70-9-7 is revoked as information is obsolete and relevant information moved to OAC 340:70-9-5.

OAC 340:70-9-9 revisions: (1) update obsolete language and form numbers; (2) and clarify language usage for consistency.

OAC 340:70-9-10 is revoked as information is obsolete and relevant information moved to OAC 340:70-9-2.

OAC 340:70-9-15 is revoked as information is obsolete and relevant information moved to other Sections of this Subchapter.
OAC 340:70-9-17 revisions: (1) add information about the Family Planning Waiver; (2) update obsolete language; and (3) clarify language usage for consistency.

Original signed on 5-4-07

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Office of Legislative Relations and Policy

WF # 06-26 (NAP)
INSTRUCTIONS FOR FILING MANUAL MATERIAL

OAC is the acronym for Oklahoma Administrative Code. If OAC appears before a number on an Appendix or before a Section in text, it means the Appendix or text contains rules or administrative law. Lengthy internal policies and procedures have the same Chapter number as the OAC Chapter to which they pertain following an "OKDHS" number, such as personnel policy at OKDHS:2-1 and personnel rules at OAC 340:2-1. The "340" is the Title number that designates OKDHS as the rulemaking agency; the "2" specifies the Chapter number; and the "1" specifies the Subchapter number.

The chronological order for filing manual material is: (1) OAC 340 by designated Chapter and Subchapter number; (2) if applicable, OKDHS numbered text for the designated Chapter and Subchapter; and (3) all OAC Appendices with the designated Chapter number. For example, the order for filing personnel policy is OAC 340:2-1, OKDHS:2-1, and OAC 340:2 Appendices behind all Chapter 2 manual material. Any questions or assistance with filing manual material will be addressed by contacting Policy Management Unit staff at 405-521-4326.

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340:70-8-1. Eligibility and available services

The Supplemental Security Income-Disabled Children's Program (SSI-DCP) is established under Section 1615 of the Social Security Act and administered by the Oklahoma Department of Human Services (OKDHS) Family Support Services Division (FSSD). The Social Security Administration (SSA) refers children under 18 who have been approved for Supplemental Security Income (SSI) to OKDHS, the designated state agency that provides social services.

(1) **Eligibility.** Any child from birth to 18 years of age is eligible for SSI-DCP services if the child receives a SSI payment. SSA establishes financial and medical eligibility for the SSI disability payment. Once the child turns 18, he or she is not eligible.  ■ 1

(2) **Service plan.** A service plan must be written by a worker for each child receiving SSI-DCP services to plan current and future social service needs.  ■ 2

   (A) This plan must be reviewed yearly in conjunction with the eligibility review.

   (B) If the child has other types of benefits that require a current social service plan, an additional social service plan is not necessary.

(3) **Services and equipment.** SSI-DCP provides funding for the services and equipment described in (A) through (F) of this paragraph. The parent, guardian, or caretaker must request services and equipment through the Family Support Services (FSS) worker in the local human services center (HSC). All equipment and services available through SSI-DCP must be pre-approved by FSSD Health Related and Medical Services (HR&MS) Section. HR&MS staff considers whether other resources are available or if the child is in a temporary living situation to determine whether to approve the service or equipment.

   (A) **Child care.** Child care services are provided to enhance social skills and assist transition into a group setting such as the classroom. Enrichment child care is available to a child with disabilities for a maximum of two days per week not to exceed ten full-time or part-time days per month.  ■ 3

      (i) The parent, guardian, or caretaker must provide a written recommendation from a professional who is working directly with the child in some capacity that states how child care would be beneficial to the child. The professional may be an occupational therapist, physical therapist, special education teacher, or physician.
(ii) Unless special circumstances exist, the child care is only for a child who has not yet started school or Head Start and when no other funding source exists to provide child care.

(iii) When enrichment child care is approved, care must be provided outside of the child's home in a licensed and contracted child care facility where at least one other child must be attending during the same hours.

(B) **Equipment.** Equipment approved through SSI-DCP must be used to aid the child in accessibility or mobility. The parent, guardian, or caretaker must provide a written recommendation from a professional, such as an occupational therapist, physical therapist, special education teacher, or physician, who has professional knowledge concerning the equipment needs of the child. **SSI-DCP** does not pay for repairs of purchased equipment, van lifts, or other items. 

(i) Computers or computer software are not in the scope of the program.

(ii) Educational or classroom devices, equipment, or supplies that are not adapted for the needs of the child are not in the scope of the program.

(iii) Van lifts are available to a child who is not in the custody of OKDHS, tribal custody, or in the Developmental Disabilities Home and Community-Based Waiver Program. Modifications to the van are not approved.

(I) The parent, guardian, or caretaker must own the van as verified by title registration and license verification, and the van must be in operating condition.

(II) The worker advises the family that estimates are required from two van lift dealers who employ certified van lift installation technicians.

(III) Only a certified van lift specialist is approved to install the lift and the lift must have factory and dealership warranty equal to private purchase warranty.

(IV) The life expectancy of a van lift is ten years through SSI-DCP. Under no circumstances will the lift be replaced prior to the ten-year period.

(V) All repairs are the responsibility of the family.

(C) **Diapers.** Certain diapers are available through the OKDHS Supply Warehouse. To be eligible to receive diapers, the child must be at least four
years of age. Once the child turns 18, he or she is not eligible. A physician must document in writing that the child cannot be toilet trained. This service request must be renewed yearly at the time of the review to continue receipt of the diapers. ■ 6

(D) Formula. Certain formula is available through the OKDHS Supply Warehouse. A physician or nutritionist must provide a prescription naming the brand of formula needed by the child. A prescription is required yearly at the time of the review to continue receipt of the formula. ■ 7

(E) Developmental aid. A developmental aid is any device or equipment that is adapted to meet the needs of a child with special needs. A professional, such as an occupational therapist, physical therapist, special education teacher, or physician, must provide a written explanation concerning the goals and objectives this developmental aid would meet before it can be approved. ■ 8

(F) Professional services. Professional services are non-medical services recommended by a physician, physical therapist, or occupational therapist that clearly define goals and objectives to achieve results. As the budget allows, certain services are available on a temporary basis. ■ 9

(4) Purchasing procedures. Equipment orders are processed through the OKDHS Support Services Division (SSD) Contracts and Purchasing Unit. ■ 10

(5) SSI-DCP notices. If a SSI-DCP request is denied, a computer-generated denial notice is sent to the child advising the item is not approved for purchase through the SSI-DCP funding. The family may request a fair hearing within 30 days from the date of the notice by completing Form 13MP001E, Request for a Fair Hearing. ■ 11

INSTRUCTIONS TO STAFF 340:70-8-1

1. (a) Even if the child is considered disabled by another agency such as the Social Security Administration (SSA) or Veterans Administration (VA), the child must receive at least one dollar of Supplemental Security Income (SSI) to be eligible for the Supplemental Security Income-Disabled Children’s Program (SSI-DCP).

(b) To determine if the child is eligible for a State Supplemental Payment (SSP), the Information Management System (IMS) transaction, CID, must be used to determine family income and compare this calculation with Schedule VIII.A of Oklahoma Department of Human Services (OKDHS) Appendix C-1, Schedule of Maximum Income, Resource, and Payment Standards. It is
possible for the child with disabilities to be eligible for SSI payment but ineligible for SSP due to family income in excess of the standard on Appendix C-1 Schedule VIII.A.

(c) To determine if the child is receiving SSI, the worker uses IMS transaction PY space Social Security number (SSN).

2. (a) When no other social service program is involved, the worker offers social services to the parent, guardian, or caretaker for the child.

(1) The worker interviews the parent, guardian, or caretaker during a home visit to assess the child, evaluate the child's needs, and document social service needs by completing Form 08MA017E, SSI-DCP Service Plan.

(2) To approve the child for SSI-DCP, the worker certifies the Social Services tab in the Eligibility Notebook of the Family Assistance/Client Services (FACS) system and adds the child to "social services" in the "benefit" field of the Household tab in the FACS Interview Notebook.

(3) The worker also documents case actions in FACS Case Notes.

(4) The worker must update the SNCU screen to reflect the family's response to the social services offer.

(b) If the child is receiving social services from another OKDHS division, such as Children and Family Services Division (CFSD) or Developmental Disabilities Services Division (DDSD), the worker must review the social service plan with a representative from each division to determine if the current service plan is adequate. The Family Support Services (FSS) worker updates any additions, changes, or notations on Form 08MA017E or in FACS Case Notes.

(1) The FSS worker is the primary worker. If any of the division representatives do not consider the plan adequate, staff in the different divisions must collaborate to develop a plan agreeable to all representatives on Form 08MA017E.

(2) The FSS worker must complete Form 08MA017E within ten calendar days and document the collaborative efforts among programs to obtain social services. The original form must be filed in the FSS case record. A copy of the form must be filed in the DDSD and/or CFSD record.
(3) Information concerning the home visit and any case actions must be documented in FACS Case Notes.

(c) At the annual review, the FSS worker makes a visit to the child's home and updates the social service plan on Form 08MA017E to reflect changes or new requests.

(1) If another division is involved, such as CFSD or DDSD, the FSS worker must collaborate with the other division representative to develop the social service plan on Form 08MA017E.

(2) A copy of Form 08MA017E is included in each division's case record.

(3) The FSS worker documents case actions, including the home visit, in FACS Case Notes.

(d) If DDSD or CFSD has a service plan that contains duplication of service needs in the SSI-DCP service plan, that plan may be substituted for Form 08MA017E at the certification or the annual review. The FSS worker must obtain written approval from the immediate supervisor before making a program substitution. The FSS worker files the social service plan substitute and the written approval from the worker's immediate supervisor in the case record.

3. (a) The worker enters the child care request on the AUSN-C screen and sends the professional recommendation with Form 23AD117E, Routing and Transmittal Slip, to FSSD Health Related and Medical Services (HR&MS) Section for pre-authorization.

(b) The SSI-DCP coordinator notifies the worker by e-mail regarding approval or denial of the request. Care is approved for no more than six months at a time.

(c) Child care is only authorized for socialization purposes when the parent, guardian, or caretaker is not employed or attending school and the child is not already in a classroom setting. If child care is needed in order for the parent, guardian, or caretaker to attend school or work, see OAC 340:40 for information about the subsidized Child Care Program.

(d) The FSS worker enters the approval or denial in the FACS Eligibility Notebook, Auth. Daycare tab. The worker enters as the reason "enrichment,
supervision, training, or to avoid institutionalization.” The family is notified by a computer-generated notice.

(e) See OAC 340:40-7-3.1 for information about the approval process for the higher special needs unit type that is available to children with disabilities.

4. (a) Equipment is recommended by a professional, such as an occupational therapist, physical therapist, special education teacher, or physician, who evaluates the needs of the child. Classroom supplies or equipment for educational purposes are not in the scope of SSI-DCP. Examples of items not covered are:

   (1) devices for learning;
   (2) learning programs;
   (3) psychological programs;
   (4) books;
   (5) video tapes;
   (6) audio tapes;
   (7) paper;
   (8) pencils;
   (9) art supplies; and
   (10) other items directly related to classroom learning.

(b) The professional submits a written recommendation to the worker listing the item name and item number, the name, address, and phone number of the vendor, the objectives and goals to be achieved through the purchase of the equipment, and the cost of the item.

(c) The worker inputs the request on the AUSN-E screen for approval and sends the written recommendation to FSSD HR&MS Section attached to Form 23AD117E.
(1) If the requested item is over $2500, the worker must contact FSSD HR&MS Section for further instruction.

(2) To determine the result of the request, the worker checks the AUSN-E screen for the decision.

(3) When the equipment is received in the local human services center (HSC), the worker checks the equipment to be sure the proper order was received and updates the AUSN-E screen to reflect the date the equipment is received.

(4) The worker delivers the equipment to the child.

(d) HSC staff are responsible for paying invoices promptly to avoid difficulties with the vendor and to prevent paying interest charges on a delinquent invoice.

5. (a) Van lifts are not approved for any child in an out-of-home placement, including DDSD Home and Community-Based Waiver Services (HCBWS) program, or any CFSD program.

(b) The worker submits the two estimates and Form 23AD117E to FSSD HR&MS Section for approval.

(c) When the van lift request is approved, the worker enters the information on the AUSN-E screen.

(d) A van lift request is not approved if the current van lift is less than ten years old.

(e) SSI-DCP does not pay for repairs of vans or van lifts.

6. (a) Authorized HSC staff are responsible for ordering diapers on the OKDHS consumable supply screen and updating the AUSN-D screen requesting size and number.

(b) Diapers are stocked in the OKDHS Supply Warehouse and distributed as requested to local HSCs.

(c) The worker is responsible for delivery of the diapers to the client.
7. **(a)** Authorized HSC staff are responsible for ordering formula through the OKDHS consumable supply screen and updating the AUSN-F screen requesting the brand and amount of formula needed.  

**(b)** Formula is stocked in the OKDHS Supply Warehouse and distributed as requested to the local HSC.  

**(c)** The worker is responsible for delivery of the formula to the child.

8. Developmental aids requested by the professional must be adapted to meet the special needs of the child with disabilities. Even if the child could use a regular toy, it is not in the scope of the program.

9. Professional services are any services that enhance the child's mobility. Examples of services to enhance mobility are swimming lessons, gymnastics lessons, or health club membership. These services are requested on the AUSN-P screen.

10. **(a)** Orders are shipped to the local HSC unless otherwise specified. Heavy objects such as beds can be shipped directly to the child's home.  

**(b)** After the requested items are delivered to the local HSC, the worker updates the AUSN-E screen to document receipt of equipment.  

**(c)** Local HSC staff must pay for SSI-DCP equipment within 45 calendar days of equipment receipt to avoid interest charges being assessed by the vendor for a late payment. Delayed payment by HSC staff creates a problem for current or future orders because vendors hold those orders until all late payments are received. One unpaid invoice can hold up all orders in the state for OKDHS and other agencies.  

**(d)** Local HSC staff is responsible for delivering all SSI-DCP items to the child.

11. **(a)** To view a list of notices on IMS, enter NL space case number.  

**(b)** To view a particular notice listed on the NL screen, enter NI beside the notice selected.  

**(c)** If the system does not create a notice, the FSS worker sends to the client a hand-generated notice on Form 08MA004E, Notification of Eligibility Status for Medical Assistance.
SUBCHAPTER 9. HEALTH RELATED SERVICES

Section
340:70-9-1. Health Related Services [REVOKED]
340:70-9-2. Early and Periodic Screening, Diagnosis and Treatment (EPSDT)
340:70-9-3. Providers of services
340:70-9-4. Eligibility for Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services
340:70-9-5. Mandatory offer of Early and Periodic Screening, Diagnosis and Treatment (EPSDT)
340:70-9-6. Multiple certifications for AFDC, Refugee Assistance, SSP for blind or disabled or Title XIX [REVOKED]
340:70-9-7. Notice of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) availability to families not literate in English [REVOKED]
340:70-9-8. EPSDT services provision [REVOKED]
340:70-9-9. Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services for persons not receiving SoonerCare
340:70-9-10. Early and Periodic Screening, Diagnosis and Treatment (EPSDT) support services [REVOKED]
340:70-9-11. Determination of service status following referral for physical screening [REVOKED]
340:70-9-12. Determination of service status following referral for dental care [REVOKED]
340:70-9-14. Need for further diagnosis and/or treatment [REVOKED]
340:70-9-17. Family planning services
340:70-9-2. Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

(a) Early and Periodic Screening, Diagnosis and Treatment (EPSDT) is a preventive health program under the SoonerCare Program that provides for comprehensive medical services to SoonerCare recipients under 21 years of age. It helps identify and treat physical, mental, or emotional illnesses or conditions in order to prevent or reduce human suffering and economic loss.

(1) EPSDT services consist of physical, dental, visual, or hearing screening, family planning, and assessment services and include the provision of recommended treatment and diagnostic services.

(2) Recipients may receive initial and periodic screening examinations at no cost, provided they continue to be eligible for SoonerCare.

(3) The initial screening may be obtained any time during the recipient’s period of eligibility.

(4) The recipient uses the provider of his or her choice within the confines of the Oklahoma Health Care Authority’s (OHCA) provider network. If the recipient does not know of a provider, the worker assists in locating one.

(5) See OAC 340:70-9-17 for information about family planning.

(b) Recipients who receive EPSDT screenings are eligible for all recommended treatment and diagnostic services:

(1) within the scope of the SoonerCare Program; and

(2) beyond the scope of the SoonerCare Program when the services are pre-authorized by OHCA. The scope of the SoonerCare Program is detailed in OAC 317.

(c) The local human services center (HSC) worker is responsible for identifying and documenting EPSDT services and offering support services. Support services include identifying and resolving any existing barriers to the utilization of EPSDT services.

(1) The worker offers all recipients requesting EPSDT support services assistance in arranging appointments for screening examinations. The worker involves the recipient to the greatest extent possible in the process of arranging appointments for screening.
(2) If lack of transportation is identified as a barrier, the worker assists the recipient in exploring family, neighborhood, and community resources. When appropriate, the worker refers the recipient to SoonerRide, community service groups, or arranges for the services of an Oklahoma Department of Human Services (OKDHS) volunteer, or other staff to meet the need.

(3) If immunizations are not current for children in the family, the worker discusses the importance of keeping immunizations current. The family is also informed that state law requires all children in child care and/or public school to have current immunizations unless exempt for health or religious reasons. The worker recommends that the children make an appointment with their SoonerCare provider or other appropriate local resources to obtain immunizations.

(d) Medical providers of EPSDT services may include physicians, dentists, optometrists, psychologists, clinics, hospitals, child health centers, local health departments, and school districts.

INSTRUCTIONS TO STAFF 340:70-9-2

1. The date of the offer of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) and result of the offer may be computer-generated or entered by the worker in the Family Assistance/Client Services (FACS) system, Social tab of the Interview Notebook and in FACS Case Notes.

2. The worker documents in FACS Case Notes the referral or the child's exemption from the immunization regulation of state law.
340:70-9-5. Mandatory offer of Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

(a) Section 1902 of Title XIX of the Social Security Act requires that all persons under 21 years of age who are determined eligible for SoonerCare must be informed of the availability of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services:

(1) within 60 days of the initial eligibility determination; and

(2) on an annual basis.

(b) The Oklahoma Department of Human Services (OKDHS) mails at the time of each certification, and each year thereafter, a written notice to eligible SoonerCare recipients informing them of the availability of EPSDT services.

(c) Special arrangements must be provided for recipients who do not read or understand English.

(1) Recipients unable to read or understand written English are informed through face-to-face contact by the worker of the availability of EPSDT services.

(2) When necessary, the worker arranges for the assistance of a second-language translator, either from among members of the recipient's family or other community resources. For visually handicapped or illiterate English-speaking recipients, the worker reads and explains the written notice of EPSDT availability.

(d) Persons who apply at a SoonerCare outreach facility are advised of the availability of EPSDT services at the time their SoonerCare applications are processed or completed.

(e) When the offer of EPSDT services is made face-to-face to any eligible recipient, the worker provides the recipient with a copy of OKDHS Pub. No. 87-36, Early and Periodic Screening, Diagnosis and Treatment. The worker discusses preventive health services, including EPSDT in language appropriate for the recipient's level of understanding.

(f) If the medical provider finds an abnormality at the time of the screening, the provider notes this when filing a claim for payment. The results of the screening and abnormal finding are provided to OKDHS and appears on the worker's CWA report.

INSTRUCTIONS TO STAFF 340:70-9-5

1. Families who are unable to read or understand English are identified on the Family Assistance/Client Services system (FACS).
2. The worker records in FACS Case Notes the contact and specific method used to explain and offer the service, for example, reading aloud in English or using a translator. The worker documents the recipient's response to the offer in FACS Case Notes, if applicable.

3. (a) As part of the outreach effort for Early and Periodic Screening, Diagnosis and Treatment (EPSDT), the computer system automatically codes every SoonerCare eligible individual under 21 years of age as accepting EPSDT services at time of application and review. The offer and acceptance or declination of EPSDT services and/or support services may be documented by the worker in the FACS system, Social tab of the Interview Notebook and by making a narrative entry in FACS Case Notes.

(b) The worker documents in FACS Case Notes that OKDHS Pub. No. 87-36, Early and Periodic Screening, Diagnosis and Treatment, was provided to the family. All attempted home visits and other attempted contacts that result in failure to locate the recipient are documented in FACS Case Notes.

4. (a) When a medical provider completes an EPSDT exam and determines that follow-up is necessary, this is posted on the worker's CWA report entitled "EPSDT Screening Requires Follow-up."

(b) To clear the CWA report, the worker must make contact with the family and offer assistance in obtaining follow-up services. This contact may be in person, by phone, or by personalized letter.

(c) The worker must enter the results of the contact in the FACS Social tab of the Interview Notebook and in FACS Notes. The CWA report a 'real time report' and does not clear until the next update to the case.
340:70-9-9. Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services for persons not receiving SoonerCare

When a request for Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services is made by or on behalf of a person who is not currently receiving public assistance or already approved for SoonerCare, the person must complete an application so eligibility for SoonerCare can be determined. If the EPSDT service was provided prior to the month of the request for SoonerCare, it is not covered in accordance with OAC 317:35-6-60. 1

INSTRUCTIONS TO STAFF 340:70-9-9

1. When the application for SoonerCare is certified, the worker enters the date and result of the offer of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) in the Family Assistance/Client Services (FACS) Social tab of the Interview Notebook.
340:70-9-17. Family planning services

Family planning services include information and counseling services, and referrals to medical providers of family planning services. This includes, but is not necessarily limited to, physical examinations, laboratory tests, tubal ligations for women over 21, vasectomies for men over 21, and birth control supplies.

(1) When the family has the goal of preventing unwanted pregnancy, limiting family size, and spacing births of children, the worker has the responsibility to assist the family to become aware of how the utilization of family planning services can affect the future plans of the person as well as the functioning of the entire family unit.

(2) If the person requesting family planning services is not eligible for SoonerCare, the worker determines whether the person is eligible for the stand-alone Family Planning Waiver program outlined in OAC 317:35-7-48.

(3) In addition to offering family planning services to the adult members of the family, the worker assists the family in assessing the need for family planning services for any child, both male and female, in the household.

(A) The worker assists the family to become aware of some of the consequences of adolescent pregnancy.

(B) When there is a need for family planning services for any minor child in the household, the minor child may self-refer to the SoonerCare medical provider of his or her choice.

(4) If the family and worker decide that family planning services are needed, the worker refers the family to their SoonerCare medical provider.

INSTRUCTIONS TO STAFF 340:70-9-17

1. The worker documents all offers, discussions, and acceptance or declination of family planning services in the Family Assistance/Client Services (FACS) system, Social tab of the Interview Notebook and in FACS Case Notes.