

Rule Impact Statement (2025)

A. Purpose of the proposed rule and legal authority (75 OS § 253(B)(2)(b)(1), 75 OS 303(D)(2)(a))

This rule revises the choice period for SoonerSelect enrollment and clarifies excluded populations, to align with the 1915(b) waiver.

Legal authority: The Oklahoma Health Care Authority Act, Section 5007 (C)(2) of Title 63 of Oklahoma Statutes; the Oklahoma Health Care Authority Board, Sections 1915(b) and 1932(a) of the Social Security Act.

B. Brief description of the proposed rule (75 OS 253(B)(2)(b)(3))

The Oklahoma Health Care Authority proposes policy revisions to align agency rules with the state's approved 1915(b) Managed Care (SoonerSelect) waiver amendment. Revisions include a change to clarify that members receiving only family planning services are excluded from SoonerSelect, and an amendment to shorten the auto assignment delay, and streamline the auto assignment methodology.

C. Classification of proposed rule (75 OS 253(B)(2)(b)(2))

Classification: Major Nonmajor

Justification: (Include estimate of total implementation and compliance costs over 5 years and basis for estimate. If $\geq \$1,000,000$ → classified as major.)

Total annual implementation and compliance costs:

Methodology used to calculate costs (75 OS 253(B)(2)(b)(7)):

This project is expected to be budget neutral. Incidental costs associated with the development of this rule were not collected, as this change was initiated prior to legislative changes outlining criteria for classification and cost impacts.

D. Description of affected classes of persons most likely to be impacted by the proposed rule

(75 OS 253(B)(2)(b)(4), 75 OS 303(D)(2)(b))

The proposed rule is anticipated to impact the following:

- **Members** may experience changes in the timing of plan section, auto-assignment, or reassignment. Individuals who receive family planning only services are clarified as being excluded from SoonerSelect and will continue to receive services through OHCA's fee-for-service program known as SoonerCare.

- **Providers** may experience indirect operational impacts due to changes in member assignment patterns and timing. No new billing codes, documentation requirements, or reimbursement changes are created by this rule.
- OHCA's **enrollment broker** may experience indirect operational impacts related to updated training for staff. These costs are expected to be absorbed within existing contractual obligations.
- **Contracted Entities** (CEs) will be impacted as it relates to the timing of when members are enrolled within SoonerSelect, as well as to the eligible populations for participation in the program. CEs will be required to ensure their policies and procedures are updated accordingly. Contractual modifications will also be required to clarify the rule changes.

E. Description of classes who will benefit from the proposed rule (75 OS 253(B)(2)(b)(5), 75 OS 303(D)(2)(c))

The proposed rule will benefit multiple stakeholder groups, including:

- **Members** will benefit from clearer and more predictable enrollment rules, including a defined choice period and streamlined auto-assignment methodology. This is expected to improve continuity of care and member understanding of plan options, and to reduce confusion about who is required to enroll in SoonerSelect. Members eligible for family planning only services will also benefit from explicit clarification that they are excluded from SoonerSelect enrollment, ensuring they continue to receive services in the delivery system defined in the waiver and avoiding inappropriate or unnecessary managed care enrollment.
- **Contracted Entities** (CEs) will benefit from greater regulatory alignment with state rules, contracts, and the 1915(b) waiver. Clearer choice and auto-assignment rules can reduce enrollment file errors, member disputes, and administrative rework, supporting more efficient operations.
- **OHCA** will benefit from improved compliance with the approved 1915(b) waiver, clearer enrollment policy, and reduced risk of inconsistent application of enrollment rules across systems and contractors. This supports more efficient oversight and monitoring of SoonerSelect enrollment processes.

**F. Comprehensive economic impact analysis (75 OS 253(B)(2)(b)(6), 75 OS 303(D)(2)(d))
Methodology used to calculate costs (75 OS 253(B)(2)(b)(7)):**

The proposed rule is not expected to produce significant economic impacts on affected classes of people or political subdivisions. Rather, the proposed changes primarily involve administrative and system alignment with Oklahoma's approved 1915(b) waiver.

- SoonerSelect contracted **providers** may experience minor indirect impacts related to billing, namely time and resources to ensure they are verifying eligibility for all members, to ensure claims for services are directed to the correct payor.
- On a broader scale, **members** will have additional time to review applicable choice counseling materials and make an informed decision for plan assignment purposes. No additional out-of-pocket costs, premiums, or fees are anticipated for members. Changes are limited to the timing and clarity of plan choice and auto-assignment.
- OHCA contracts with an **enrollment broker** who is responsible for assisting members and potential members with Medicaid enrollment by providing unbiased education (choice counseling) to help members understand their options and make informed decisions. OHCA's enrollment broker will be impacted by this rule promulgation, as they will need to update internal policies and procedures related to choice counseling services and provide training to staff on the proposed revisions.
- **Contracted Entities (CEs)** may experience impact associated with contract changes and operational changes. Education will be needed for CE staff to ensure they are aware of the changes and impacts to who is and is not eligible for SoonerSelect, and the timing to which members will transition to a plan.
- **OHCA** will incur staff costs associated with rule development, system testing coordination, and stakeholder communication, including the updating of member facing materials. These costs will be covered within existing administrative appropriations and FTE capacity.

The development of this proposed rule predates the requirement to track these measurements, so these costs have not been quantified.

G. Probable costs and benefits to OHCA and other agencies (75 OS 253(B)(2)(b)(6), 75 OS 303(D)(2)(e))

The proposed rule requires system changes to update eligibility and managed care processes, both of which carry associated costs for OHCA. The federal match for the systems work related to this change is 75/25. Because this project was initiated prior to legislative changes outlining criteria utilized to determine probable costs to OHCA, this information was not collected prior to initiation.

H. Economic impact on political subdivisions and whether their cooperation is required (75 OS 253(B)(2)(b)(8), 75 OS 303(D)(2)(f))

No cooperation from political subdivisions is required for implementation or enforcement of this rule.

I. Economic impact on small businesses (75 OS 253(B)(2)(b)(9), 75 OS 303 (D)(2)(g))

The proposed rule is not anticipated to create disproportionate economic impact on small businesses. The proposed rule impacts member eligibility requirements and auto-enrollment processes, which will have a uniform, indirect impact on all providers, regardless of type and size, as they must actively confirm member eligibility for Medicaid and/or SoonerSelect to determine the appropriate payor for billing purposes.

J. Measures taken to minimize compliance costs and assessment of less costly, less intrusive, or nonregulatory alternatives (75 OS 253(B)(2)(b)(10), 75 OS 303(D)(2)(h))

A formal rule is necessary to align OHCA administrative rules with the CMS approved 1915(b) waiver governing SoonerSelect enrollment, choice periods, excluded populations, and the auto-assignment methodology. OHCA considered other nonregulatory alternatives to minimize costs, including implementing changes solely through contract amendments, provider letters, and operational guidance and/or relying on waiver documents and internal procedures without updating the rules. These alternatives were not selected because they would not provide the same level of transparency to the public and stakeholders and would not ensure consistent and enforceable standards.

To minimize compliance costs, OHCA limited changes to what is necessary to reflect the waiver approved enrollment design, utilized existing system infrastructure and contractual arrangements for implementation, and clarified, rather than expanded, enrollment requirements and excluded populations, thereby avoiding new substantive obligations for providers or members.

As a result, the rule is no more extensive than necessary to achieve federal and state compliance while minimizing administrative burden.

K. Effect of the rule on public health, safety, and the environment (75 OS 253(B)(2)(b)(11), 75 OS 303(D)(2)(i))

The proposed rule primarily affects administrative enrollment processes and is not expected to have a direct impact on public health, safety, or the environment.

From a public health perspective, the rule is expected to have a positive, although indirect impact, by:

- Supporting timely and accurate enrollment into SoonerSelect plans, which can promote continuity of care and more stable access to covered services; and
- Ensuring that individuals who receive family planning only services are correctly excluded from SoonerSelect in accordance with the approved waiver, maintaining the delivery structure intended for this population.

L. Detrimental effects if the proposed rule is not implemented (75 OS 253(B)(2)(b)(12), 75 OS 303(D)(2)(j))

Not adopting the proposed rule would hinder OHCA's ability to consistently implement SoonerSelect enrollment requirements and fully demonstrate compliance with the 1915(b) waiver. Impacts include:

- Misalignment with the CMS approved 1915(b) waiver, resulting in potential compliance concerns and increased federal oversight risk;
- Continued or increased inconsistency between administrative rules, waiver terms, and operational practice, which may lead to member and provider confusion;
- Greater likelihood of enrollment and auto-assignment errors, disputes, or appeals if choice periods and excluded populations are not clearly defined; and
- Increased administrative burden on OHCA, CEs, and the enrollment broker to reconcile discrepancies between rules, contracts, and waiver requirements on a case-by-case basis.

Aside from OHCA impacts, members may also experience confusion surrounding enrollment status and plan options, while CEs and the enrollment broker may also be impacted as a result of potential enrollment disputes.

M. Summary of and preliminary comparison to existing or proposed federal regulations (75 OS 303(D)(2)(n))

SoonerSelect is administered pursuant to a CMS approved 1915(b) waiver, in accordance with the managed care federal regulations outlined at 42 C.F.R. Part 438.

The proposed rule:

- Aligns state administrative rules with the CMS approved 1915(b) waiver, which defines the populations subject to managed care, excluded groups, and enrollment/auto-assignment processes;
- Does not establish requirements that are more restrictive than federal minimums for managed care enrollment; and
- Does not conflict with or duplicate any existing federal regulations.

There are no known federal regulations that conflict with the proposed changes. The rule serves as a state level implementation mechanism, translating waiver terms and federal requirements into clear Oklahoma Administrative Code language for SoonerSelect enrollment.

N. Analysis of alternatives to adopting the proposed rule (75 OS 303(D)(2)(l))

In developing this proposal, OHCA considered the following alternatives:

- **Maintaining the status quo (no rule changes):** This option was not selected because it would leave state rules misaligned with the approved 1915(b) waiver and current operational practice.
- **Implementing changes solely through contracts, provider letters, and operational guidance:** While some elements could be addressed contractually, this approach would not provide the same level of transparency, consistency, and enforceability as codified rules and could result in variation in how CEs interpret and apply rules.
- **Delaying rulemaking until a future cycle:** Delay would prolong misalignment between waiver terms, contracts, and existing rules, and could complicate oversight of SoonerSelect enrollment as implementation continues.

The proposed rule approach was selected because it provides clear, uniform standards for enrollment and auto assignment; ensures that state rules accurately reflect the CMS approved waiver, supports consistent enforcement and auditability across CEs, and allows for public notice and comment, enhancing transparency.

O. Estimates of internal OHCA employee time and other resources used to develop the proposed rule (75 OS 303(D)(2)(m))

Development of the proposed rule required coordinated staff effort across multiple OHCA units, including but not limited to, Policy, Legal, SoonerSelect, Business Enterprises (BE), and Communications.

Activities included:

- Reviewing and interpreting the approved 1915(b) waiver language;
- Drafting and revising rule text;
- Coordinating with internal stakeholders on operational feasibility;
- Conducting a legal review; and
- Preparing rule impact materials and stakeholder communications.

In total, OHCA estimates that development of this rule required 120 staff hours, distributed among several employees. No additional staff positions were created for this effort, and no external consultants were engaged beyond existing waiver and actuarial support contracts.

P. Date statement prepared or modified (75 OS 253(B)(2)(b)(13), 75 OS 303(D)(2)(k))

Prepared date: November 27, 2024
 Modified date: January 22, 2025
 Modified date: December 8, 2025
 Modified date: December 17, 2025