

## **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))**

The purpose of the proposed rule changes is to modernize OHCA lactation consultant coverage policy and expand access to lactation consultant services for SoonerCare members.

The legal authority for this proposed rule is 63 O.S. §5007(C)(2).

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

The proposed policy changes amend the licensing requirements for lactation consultants. Current OHCA policy requires that lactation consultants be both an International Board Certified Lactation Consultant (IBCLC) and a registered nurse or registered dietitian. The proposed revisions remove the requirement that lactation consultants be a registered nurse or registered dietitian as a condition of coverage. Providers will only be required to be an IBCLC to contract with OHCA and be reimbursed for lactation consultant services. The proposed changes will also allow lactation consultant services to be provided via telehealth when appropriate. Such services will be subject to existing telehealth limitations. Lactation consultant services must be recommended by a physician or other licensed provider, such as a physician assistant, advanced practice registered nurse, certified nurse midwife, or licensed midwife. There is no change to reimbursement rates for lactation consultants.

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

**Classification:** Nonmajor

**Justification:** The proposed changes are expected to be budget neutral because they do not impact coverage or reimbursement.

**Total annual implementation and compliance costs:** Budget neutral.

**Methodology used to calculate costs (75 OS 253(B)(2)(b)(7)):** The proposed rules do not make any changes to what services are provided (as denoted by HCPCS codes). The proposed changes amend the professional credential requirements for providers who render services that are already covered. There is no change to reimbursement. Because there is no change to coverage or reimbursement, there is no anticipated budget impact.

### **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))**

Lactation consultants and SoonerCare members who choose to receive services from those providers will be positively affected by this rule.

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

Lactation consultants and SoonerCare members who choose to receive services from those providers will benefit from the proposed rule. The proposed policy changes modernize the

credentialling requirements for lactation consultants, which may increase the number of lactation consultants contracted with SoonerCare and available to provide services to SoonerCare members. Members who require lactation consultant services may benefit from increased access to necessary services.

**F. Comprehensive economic impact analysis (75 OS 253(B)(2)(b)(6), 75 OS 303(D)(2)(d)):** The proposed changes are expected to be budget neutral because they do not impact coverage or reimbursement.

**Methodology used to calculated costs (75 OS 253(B)(2)(b)(7)):** The proposed rules do not make any changes to what services are provided (as denoted by HCPCS codes). The proposed changes amend the professional credential requirements for providers who render services that are already covered. There is no change to reimbursement. Because there is no change to coverage or reimbursement, there is no anticipated budget impact.

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

The probable costs to OHCA are those associated with minor systems changes necessary to update the professional credential requirements for lactation consultants and staff time to process contracts for lactation consultants. These are routine, anticipated costs and will be absorbed by existing agency capacity.

There are no anticipated impacts of the proposed rules on other agencies.

**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))**

There is no anticipated economic impact on any political subdivisions, and their cooperation is not required.

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

There is no anticipated economic impact on small businesses. Some lactation consultants may provide services through a small business. The proposed changes should have a positive economic impact on those providers by easing the regulatory burden of contracting with OHCA and receiving reimbursement for services provided to SoonerCare members.

**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))**

The proposed changes remove two regulatory requirements for Oklahoma Medicaid coverage of lactation consultant services. The proposed changes are necessary to remove those requirements from the administrative code. There is no less costly, less intrusive, or nonregulatory alternative.

**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 changes are anticipated to have a positive effect on public health by increasing access to lactation consultant services for SoonerCare members.

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

If the proposed rules are not implemented, SoonerCare members will continue to have limited access to lactation consultant services. Lactation consultants will continue to be subject to outdated coverage requirements.

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

The proposed changes are aligned with federal regulations on preventive services (42 CFR 440.130). OHCA is not aware of any applicable proposed federal regulations.

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

The proposed changes are necessary to remove two outdated regulatory requirements for coverage of lactation consultant services. These requirements cannot be removed with a rule change. There is no alternative to adopting the proposed rule for removal of the requirements.

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

Policy staff time: 20 hours

Quality staff time: 20 hours

Provider engagement and education/systems staff time: 10 hours

SoonerSelect operations staff time: 5 hours

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

Prepared: December 1, 2025