

Public Notice

Pursuant to Section 447.205 of Title 42 of the Code of Federal Regulations, the Oklahoma Health Care Authority (OHCA) is required to give public notice of any significant proposed change in methods and standards for setting payment rates for services in the SoonerCare program. Section 440.386 of Title 42 of the Code of Federal Regulations also requires the OHCA to provide public notice of its intent to submit a state plan amendment (SPA) to modify the existing Adult Expansion Alternative Benefit Plan (ABP). An ITU notice was sent to inform tribal partners of these changes on December 1, 2025. The proposed changes were presented at the Tribal Consultation meeting on January 6, 2026, and will be presented to the OHCA Board meeting on January 21, 2026, at 2:00 PM.

Telehealth Origination Site Fee, Effective date: February 1, 2026, contingent upon CMS approval.

The proposed revisions amend the Medicaid State Plan to add a reimbursable originating site (facility) fee for telehealth services. This change allows certain facilities hosting a member during a telehealth visit to receive separate reimbursement when the appropriate facility-fee code is billed. Eligible originating sites include hospitals, outpatient departments, physician and practitioner offices, Rural Health Clinics (RHCs), Federally Qualified Health Centers (FQHCs), Indian Health/Tribal/Urban (I/T/U) clinics, and public health clinics. This fee is reimbursed separately from the professional service billed by the distant-site provider and does not apply when the member's home is the originating site or when no staff or facility resources are used. Equipment and transmission costs remain non-reimbursable.

The estimated budget impact for SFY 2026 is \$1,390,222; with \$393,940 in state share. The estimated total cost for SFY 2027 is \$3,336,531; with \$945,457 in state share.

Removal of Physician Visit Limits, Effective date: February 1, 2026, contingent upon CMS approval.

The proposed revisions remove existing caps on adult physician visits, including the four-visit monthly limit and the two-visit limit for members residing in nursing facilities. Removing these limits allows members to receive all medically necessary outpatient services and supports timely access to primary and preventive care.

The estimated budget impact for SFY 2026 is \$763,761; with \$170,752 in state share. The estimated total cost for SFY 2027 is \$1,833,024; with \$409,803 in state share.

Interested persons may visit oklahoma.gov/ohca/policies-and-rules/public-notices to view a copy of the public notice(s) and visit oklahoma.gov/ohca/policies-and-rules/proposed-changes to view a copy of the proposed policy revisions and a link to provide public comments on the proposal. Persons wishing to present their views in writing or obtain copies of the proposed policy revisions

may do so via mail by writing to: Oklahoma Health Care Authority, Federal Authorities Unit, 4345 N. Lincoln Blvd., Oklahoma City, Oklahoma 73105, or by email at federal.authorities@okhca.org. Written comments or requests for copies of the proposed state plan amendments will be accepted by contacting OHCA as indicated. Comments submitted through the OHCA policy blog will be available for review online at oklahoma.gov/ohca/policies-and-rules/proposed-changes. Other written comments are available upon request at federal.authorities@okhca.org. Comments will be accepted beginning January 9, 2026, through January 24, 2026.

The Agency solicited input from Oklahoma's tribal representatives regarding the proposed changes herein in compliance with section 5006(e) of the American Recovery and Reinvestment Act of 2009 and in accordance with the Oklahoma State Plan tribal consultation policy. The Agency also assures that individuals under twenty-one (21) years of age, pursuant to EPSDT federal regulations, Section 440.345 of Title 42 of the Code of Federal Regulations and 1905(r) of the Social Security Act, may receive additional services if determined medically necessary.