



Clay Bullard | Chief Executive Officer

J. Kevin Stitt | Governor

OHCA 2026-11

June 4, 2026

Re: Immediate Medicaid Coverage Change; Senate Bill 904 (2026)

Dear Provider,

[Senate Bill 904](#), now signed into state law, prohibits Medicaid coverage of surgical procedures and pharmaceuticals for the purpose of gender transition.

Pursuant to the law, the following immediate changes to Medicaid coverage are in effect:

For medical coverage:

- Claims that indicate a diagnosis of gender dysphoria and a procedure code that can be used for gender transition will suspend for review.
- Providers are required to submit documentation with their billed claim that supports the medical necessity and indications for the procedure billed.
- The claim will suspend for review by a Medical Authorization Unit (MAU) nurse. If it is determined the procedure is being done for gender transition, the service will be denied.
- Agency staff will perform look-back reviews on a regular basis for members with a history of claims billed with gender dysphoria diagnoses. Any suspect claims identified through this review will be referred to OHCA's Program Integrity unit for further investigation.

For pharmaceutical coverage:

- Prior authorization (PA) is required for males of all ages requesting female hormones.
- PA is required for gonadotropin-releasing hormones (GnRH) for all ages.
- Testosterone products will continue to require a PA.
- All PAs are reviewed by OHCA's Clinical Pharmacy team.



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WEBSITES

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IMMEDIATE MEDICAID COVERAGE CHANGE; SENATE BILL
904 (2026)

- Providers and/or pharmacists are required to submit documentation supporting the medical necessity and indications for the requested use.

Behavioral health services and other services excluded in Senate Bill 904 are not affected.

Please contact massunit@okhca.org with any questions or concerns.

Thank you,

Oklahoma Health Care Authority