1. Are provider action forms acceptable to use for existing patients that are new to SoonerCare?
As long as the panel is under 90-95% capacity and the member does not fall outside of the panel age restriction, you can use the action form to add the member to the panel.

2. Can we accept newborns that are not family of current panel members if our panel is at 90% of the limit?
Yes, newborns are a category exception. Please remember to verify the panel size and age restriction prior to submitting the action form.

3. How can I find our current PCMH tier and how does the tier affect patient care?
The current PCMH tier can be found by using your capitation roster, available under the Financial tab on the OHCA secure provider portal by selecting CAP Reports. Look at the amount paid and compare that amount to the care coordination rates that are available on the Patient Centered Medical Home webpage (see below). Each tier has different requirements for patient care.
4. How can panel members who no longer wish to be our patients be removed from our panel?
OHCA is currently reviewing the panel members who have not established care with their current PCP and more information will be shared at a later time. Members may login to mysoonercare.org or contact the SoonerCare helpline at 800-987-7767 to change their PCP.

**WEBINAR #2 – March 24, 2022:**

1. How will optimal providers submit their quarterly quality improvement reporting?
   We are currently working through that process and will be sending out additional information to our providers concerning how to submit that information.

2. Since patients no longer need to sign the Medical Home Agreement, do we need to give the patient a copy or document our review of the agreement in the patient’s chart?
   It is up to each clinic practice whether to give the patient a copy. The expectation is that the information is reviewed with the patient, but there is no requirement for documentation in the patient’s medical record.

3. Can you expand on the additional four-hour requirement for patients to be seen? Is this one day of the week additional or can I add two additional hours on one day and then on another?
   It must be four additional hours total, which may be determined by the provider outside of the Monday through Friday 8 a.m. – 5 p.m. core schedule.

4. Can a telemedicine visit meet the additional four-hour requirement or does that requirement need to be met in the office?
   Telemedicine services are considered face-to-face, so as long as the visit falls outside of the 8 a.m. – 5 p.m. core schedule, it would count toward the additional four-hour requirement.