Do expansion adult members require a SoonerCare referral?

Expansion members enrolled with a primary care provider will need a referral for specialty services. Please refer to the referral exclusions for a list of services exempt from a SoonerCare referral.

Is a SoonerCare referral required for TDAP or FLU vaccines if the member is pregnant?

Vaccines are exempt from a SoonerCare referral, however, if a claim denial occurs, please ensure a pregnancy diagnosis is listed as primary. Additionally, pregnant members ages 0-18 are eligible to receive vaccines under the Vaccines for Children (VFC) program.

When is a SoonerCare referral required?

SoonerCare referrals are required for members assigned to a primary care provider for specialty services except for self-referred services mentioned in OHCA policy 317:25-7-10.

Is a SoonerCare referral required for postoperative appointments within the post-op global period? What about hospital follow-up appointments?

Post-op visits are part of the global charge and do not require a referral. There is an exception if the provider billing the service was not the same surgeon who performed the surgery.

Can referrals be made to the group or individual?

Referrals can be issued to the individual specialist or the group the specialist is associated with on the provider file. This may vary depending how the specialist/group contract is set up to bill.

What is the process for members to change their assigned PCP and can this be done immediately?

Members can log into mysoonercare.org to change their PCP but this change is not immediate. Members can also call the SoonerCare helpline at 800-987-7767 and request a PCP change effective immediately.
What information is required for SoonerCare referrals?

Minimum requirements for SoonerCare referrals are mentioned in Dear Provider Letter 2017-10 (insert hyperlink). Additionally, referrals must include the chief complaint diagnosis and should include more than “evaluate and treat.”

Can SoonerCare referrals be forwarded to other specialists?

SoonerCare referrals can be forwarded to another specialty provider with approval from the PCP. Specialists must communicate any findings to the PCP via fax, e-mail or phone, and they must document in the medical record of the communication made to the PCP.

Are referrals required for GYN services?

Yes, GYN services require a SoonerCare referral.

How will OHCA notify providers of an approved administrative referral?

Providers will be notified of approved admin referrals via letters which can only be accessed in the OHCA provider portal under the individual rendering provider’s login.

Can a SoonerCare referral be backdated?

A SoonerCare referral may be backdated at the discretion of the PCP up to six months. It’s important the individual referring provider is contracted and tied to the PCP group during that back dated referral time.

Why do some SoonerCare members’ eligibility plans change from Medicaid and SoonerCare Choice?

A SoonerCare member’s situation may change at any time during the month. Please remember to verify eligibility on the date of service.

Are SoonerCare referrals required for members enrolled with a primary insurance?

Members enrolled with a primary insurance are not eligible to enroll in the SoonerCare Choice program. Therefore, the provider would need to follow the rules of the primary insurance.