

Important Information Regarding Prior Authorizations and Billing for SoonerCare Behavioral Health Providers Contracted with ODMHSAS

Effective April 1, 2024, due to the transition to SoonerSelect, there will be some important changes to prior authorizations and requirements for completion of the Customer Data Core (CDC).

SoonerCare Members NOT Enrolled in SoonerSelect (Managed Care)

Prior Authorizations:

For individuals with SoonerCare who are not enrolled in SoonerSelect (managed care), providers will continue to use the existing protocol for prior authorization. This means providers will continue to submit CDCs to PICIS for these services.

Billing:

For services for individuals not enrolled in SoonerSelect (managed care), claims will continue to be submitted to the MMIS and paid as they are now.

SoonerCare Members Enrolled in SoonerSelect (Managed Care)

Prior Authorizations:

For SoonerSelect (managed care) enrollees, prior authorizations will be submitted using Availity for all participating plans. For services which require prior authorization, each plan will outline the specific requirements.

In addition, ODMHSAS-contracted providers will **continue to submit CDCs** to PICIS for all publicly funded consumers, including those in SoonerSelect (managed care). While PA/QI lines will be returned, they will not be effective unless billing for a service that is only compensable by ODMHSAS (not SoonerCare).

NOTE: Enhanced Tier Payment System (ETPS) and value-based payment system (VBP) metrics will not be calculated for any members in managed care that do not have CDC coverage for the time of the measurement.

Billina:

For covered services for individuals enrolled in SoonerSelect (managed care), claims will be submitted using Availity for all participating plans.

If a SoonerSelect (managed care) member receives a service which is only compensable by ODMHSAS (not SoonerCare), claims will continue to be submitted to the MMIS and paid as they are now.





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Prior Authorizations:

For individuals with SoonerCare who are not enrolled in SoonerSelect (managed care), providers will continue to use the existing protocol for prior authorization. This means providers will continue to submit CDCs to PICIS for these services.

Billing:

For services for individuals not enrolled in SoonerSelect (managed care), claims will continue to be submitted to the MMIS and paid as they are now.

SoonerCare Members Enrolled in SoonerSelect (Managed Care)

Prior Authorizations:

For SoonerSelect (managed care) enrollees, prior authorizations will be submitted using Availity for all participating plans. For services which require prior authorization, each plan will outline the specific requirements. A CDC will NOT be required for prior authorization.

Billing:

For services for individuals enrolled in SoonerSelect (managed care), claims will be submitted using Availity for all participating plans.

