



SoonerSelect Medical Contracted Entity (CE) Requests to Change Service Provisions

The SoonerSelect Medical Contract at Section 1.7: Covered Benefits and Section 1.8: Medical Management states that medical contracted entities (CEs) may not impose prior authorization guidelines/criteria or utilization management practices that are more restrictive than OHCA without OHCA prior approval.

On October 23, 2025, Aetna Better Health of Oklahoma (ABHOK) submitted a formal request to OHCA for review and approval to change service provisions.

OHCA subject matter experts (SMEs) reviewed the requests, evaluating them in comparison to OHCA historical processes and practices, standard business practice in other markets, and available data to determine whether to approve the requests.

OHCA decisions are noted in the table below:

SoonerSelect Medical Requests to Change Service Provisions				
PROCEDURE CODE(S) IMPACTED	PROPOSED MODIFICATION TO CLAIMS PROCESSING PROTOCOL	REASON FOR PROPOSED CHANGE	ANTICIPATED IMPACT	OHCA DECISION
Not Adding Prior Authorization Requirements for Certain CPT Codes				
97022 – Application of whirlpool therapy 97150 – Group therapy sessions 97164 – Re-evaluation of physical therapy plan 97168 – Re-evaluation for occupational therapy	Aetna Better Health of Oklahoma is requesting to remove these CPT codes from their Prior Authorization list.	Aetna does not feel the addition of these codes to their prior authorization list would be beneficial.	Aetna does not anticipate significant claim impact or increased spending by not requiring a PA for these codes.	Approved 10/24/2025 <i>Item will be presented at the November 2025, MAC meeting</i>