



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 15, 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				
OHCA's CURRENT PROCESSING PROTOCOL	PROPOSED MODIFICATION TO CLAIMS PROCESSING PROTOCOL	REASON FOR PROPOSED CHANGE	ANTICIPATED IMPACT	OHCA DECISION
Removing Prior Authorization Requirements for Certain HCPCS Codes				
A4453 – Rectal catheter A4459 – Manual trans anal irrigation system	Aetna Better Health of Oklahoma is requesting to remove these HCPCS codes from their Prior Authorization list.	Aetna is seeking to align with other CE's who have removed these codes from their Prior Authorization List.	Aetna does not anticipate significant claim impact or increased spending by not requiring a PA for these codes.	Approved 10/15/2025 <i>Item will be presented at the January 2026, MAC meeting</i>