

Oklahoma Health Care Authority  
MEDICAL ADVISORY COMMITTEE  
July 9<sup>th</sup>, 2026  
1:00 – 3:00 PM  
Charles Ed McFall Board Room

## **AGENDA**

Please access via zoom: [https://www.zoomgov.com/webinar/register/WN\\_fZUpDHU\\_RKCVR0vAz4RG2g](https://www.zoomgov.com/webinar/register/WN_fZUpDHU_RKCVR0vAz4RG2g)

Telephone: 1-669-254-5252

Webinar ID: 160 110 0189

- I. Welcome, Roll Call, and Public Comment Instructions: **Chairman, Jason Rhynes, O.D.**
- II. Action Item: Approval of Minutes of March 5<sup>th</sup>, 2026: **Medical Advisory Committee Meeting**
- III. Public Comments (2 minute limit)
- IV. MAC Member Comments/Discussion
- V. Financial Reports: **Tasha Black, Senior Director of Budget and Procurement**
- VI. Legislative Updates: **Bradley Downs, Legislative Liaison**
- VII. Medicaid Directors Update: **Melissa Miller, State Medicaid Director**
- VIII. New Business: **Chairman, Jason Rhynes, O.D.**
- IX. Next MAC Meeting: **Chairman, Jason Rhynes, O.D.**  
  
September 3, 2026  
November 5, 2026
- X. Adjourn **Chairman, Jason Rhynes, O.D.**

Oklahoma Health Care Authority  
MEDICAL ADVISORY COMMITTEE  
MINUTES of the March 5<sup>th</sup>, 2026, Meeting  
4345 N. Lincoln Blvd., Oklahoma City, OK 73105

**1. Welcome, Roll Call, and Public Comment Instructions:**

Chairman, Dr. Jason Rhynes called the meeting to order at 1:00 PM.

***Delegates present were:*** Mr. Nick Barton, Ms. Joni Bruce, Mr. Brett Coble (virtual), Dr. Steven Crawford, Ms. Wanda Felty, Dr. Autumn Hurd, Dr. Daniel Post, Dr. Jason Rhynes (virtual), providing a quorum.

***Alternates present were:*** Dr. Sherrita Polk (virtual), Dr. Syeachia Dennis, Dr. Eve Switzer, providing a quorum.

***Ex-officio members present:*** Ms. Kimrey McGinnis

***Delegates absent without an alternate were:*** Ms. Janet Cizek

***Ex-officio members not present:*** Ms. Madison Miller, Mr. Tracy Ellis

**2. Approval of January 8<sup>th</sup>, 2026, Minutes**

Medical Advisory Committee

**The motion to approve the minutes was by Dr. Steven Crawford, seconded by Dr. Eve Switzer and passed unanimously.**

**3. MAC Member Comments/Discussion:**

Dr. Switzer asked if the MAC has discussed code G2211, an outpatient primary care code. She also emailed Ms. Miller and Dr. Rhynes prior to the committee meeting regarding this matter.

Dr. Crawford introduced former OHCA staff who were in attendance.

**4. State Medicaid Director Update**

Melissa Miller, State Medicaid Director

**Budget Update:** Ms. Miller provided a brief update on OHCA's current budget status, which is currently at \$500 million for SFY 2027. OHCA is working diligently and engaging frequently with members of the legislature to explain the needs of the program and how OHCA got to that number. Included in OHCA's budget are FMAP reduction, projected increased in utilization for traditional and expansion populations, and increases due to rural health transformation.

**Patient Panels:** OHCA continues to work with the managed care entities and primary care providers to help explain and understand what the issues are. Initial rosters were sent out by OHCA. Ms. Miller added that there are specific limitations on how individuals can be moved on panels, including

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federal requirements, patient choice, and claims-based logic review by managed care entities. OHCA understands there are ongoing issues that providers are experiencing; the team is working with them on those.

H.R.1 Implementation: OHCA continues to participate in ongoing conversations with other states, as well as with federal partners. The final regulatory language will not be ready until June. Ms. Miller reminded the committee that the community engagement requirements are expected to impact about 86,000 of Oklahoma's Medicaid expansion members, and the six-month redeterminations are expected to affect approximately 190,000 expansion members, and the most imminent change will affect about 4,000 qualified alien refugee individuals. OHCA did confirm that its Insure Oklahoma program will not be subject to the work requirements.

Call Center: OHCA is working to implement an AI chatbot and a member app with live chat within the next few months in hopes to reduce the call volume and overall workload and not have to temporarily close the call center every Tuesday. Ms. Miller added that staff are aware that there are some delays on the provider contract renewals side. Provider contracts staff are currently working on 14,000 contract renewals but hope that changes to staff and processes will help streamline workflow.

Rural Health Transformation: The Feds officially approved the entire award, so the money is available. OHCA, as well as OSDH and other agencies involved are working on getting contracts and RFPs out the door so work can begin for Rural Health. Vice-Chairwoman Felty asked if the changes will impact the DHS and their online system. Ms. Miller stated that it will not affect ABD, these changes are for the expansion population.

**5. Change of Service Provision:**

Stephanie Mavredes, Deputy State Medicaid Director

Ms. Mavredes presented the following seventeen Change of Service Provisions. As a reminder, she stated that the SoonerSelect contracts have language in them that requires the plans to ask for OHCA review and approval when they deviate from the current OHCA process, which is represented by the change of service provisions listed below. The MAC is not required to vote on these items.

- i. Remove Prior Authorization for Nursing Assessment and Evaluation Code T1001
- ii. Remove Prior Authorization for Incontinence Supplies for Codes A4335, A4927, T4521, T4522, T4523, T4524, T4529, T4530, T4533, T4543, T4525, T4526, T4527, T4528, T4531, T4532, T4534, T4544, T4535, T4537, T4540, T4541, T4542
- iii. Remove Prior Authorization for Doppler Velocimetry Code 76821
- iv. Remove Prior Authorization Enteral Nutrition Infusion Pump Codes B9002, B9004, B9006
- v. Remove Prior Authorization for Neurobehavioral Stats Exam Code 96116
- vi. Remove Prior Authorization for CT scan and Visit for Codes 71271, G0296

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- vii. Remove Prior Authorization for Certain Codes for Hearing Aids for Codes 92628, 92629, 92631, 92632, 92634, 92635, 92642
- viii. Remove Prior Authorization for Diagnostic Ultrasounds for Codes 76815, 76816, 76817, 76818, 76819, 59025
- ix. Remove Prior Authorization for Compression Burn Garment for Code 6512
- x. Remove Prior Authorization for Implantable Pumps for Codes 95990 and 95991
- xi. Process Change for ABA Assessment for Codes 97151 and 97151-TS
- xii. Change of Requirements for ABA Supervision
- xiii. Add Prior Authorization for Air Transport for Codes A0430 and A0435

For more detailed information, see Attachment A of the Committee packet.

**6. Financial Update**

Tasha Black, Senior Director of Budget and Accounting

Ms. Black presented the SFY2026 financial transactions through the month of November. Ms. Black stated that OHCA was under budget in revenues and expenditures, with revenues, accounting for receivables, at \$4.1 billion under budget and expenditures, accounting for encumbrances at \$4.092 billion under budget. The primary driver for the \$7.3 million positive variance is attributed to the Medicaid program spend, representing \$100.6 million of the total variance. On the revenue side, outside of the federal matching funds, OHCA was also under budget in healthcare enhancement appropriation by \$3.6 million, medical refunds by \$15.8 million, taxes and fees by \$5.4 million, and over budget in drug rebates by \$3.1 million.

For more detailed information, see Attachment B of the committee packet.

**7. Legislative Update**

Bradley Downs, Legislative Liaison

Mr. Downs provided a brief update on several bills that OHCA is tracking and recent budget discussions. He added that this year, OHCA is primarily focused on the budget and working with the bill authors to ensure the agency's stance is known. OHCA met with the legislative appropriations leadership a couple of weeks ago and asked OHCA to create several appropriations scenarios for \$150 million, \$250 million, \$350 million, and a full appropriation. OHCA's financial team is currently working on those scenarios.

Bills discussed:

- HB 2059 – directs OHCA to partner with OU Health Sciences Center to provide coverage for prescription medication for certain inmates who are in county or municipal correctional facilities. Ms. Miller added that this will have a direct impact on the agency, but will not have a direct Medicaid program impact.

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- SB 1566 – revises Medicaid requirements for ABA treatment of autism by codifying that an out-of-state BCBA could supervise via telehealth. There has been some discussion on this bill pertaining to OHCA’s fiscal impact. As of right now, OHCA does not have a formal fiscal impact on this, as OHCA does not have the actuarial capacity to tie any sort of increase in utilization to this specific bill. The MCOs are working diligently, not only with OHCA, but with legislative partners to keep them aware of any sort of financial impact that this change will have.
- SB 1565 – requires OHCA to add in nutrition support into the Transforming Maternal Health Grants. OHCA has been working with Sen. Stanley, bill author, as well as Mom’s Meals, to modify the language so that it’s permissive language rather than mandatory language.
- HJR 1067 – a potential constitutional amendment to allow the legislature to not cover lost Medicaid costs if federal matching funds are reduced below 90% and would require a vote of the people. Dr. Crawford asked for clarification regarding fiscal impact. Mr. Downs stated that he would get back with the committee on this bill, as it was just received that morning.
- HB 4423 – requires OHCA to report applicants for Medicaid, whose citizenship is unable to be verified to the Attorney General for subsequent potential reporting to ICE. Due to the sensitive nature of the issue, OHCA is getting input from its legal team to inform the Speaker and Pro Tem’s offices on any sort of potential conflicts with federal law.
- HB 3650 – Modifies the end date of OHCA’s Medicaid minimum rate provisions for reimbursement from the MCOs to providers who don’t opt into value-based arrangements. The current end date is July 1, 2027. The bill would extend that one year making the deadline July 1, 2028.

Dr. Crawford requested clarification on SB 1836, as he believed the requirement for physicians to provide certain mental health screening instruments was already being covered. Ms. Miller stated that she believes it is because OHCA allows it. This change would require it at a certain frequency, so OHCA would expect and anticipate an increased billing of the code.

The next deadline is March 28, 2026, and requires bills to be off the floor of their chamber of origin.

**8. Discussion and Possible Action: MAC Charter and Bylaws**

Chairman, Jason Rhynes, O.D.

Ms. Miller provided a brief overview of the MAC Charter and Bylaws and highlighted the major changes:

- The addition of a managed care plan association representative
- The addition of a required number of MATF members
- Term limits will be set at four years
- State agency reps will be non-voting members and will not count towards the quorum
- Hybrid meeting option – in-person and virtual

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Vice-Chairwoman Felty asked that the language under item #5 Alternates be updated to clarify who appoints the alternate. Ms. Miller suggested the following language:

*The appointing authority shall consider feedback from the MAC member and/or Organization when selecting an alternate.*

**The motion to approve the change to the bylaw language was by Dr. Steven Crawford, seconded by Dr. Eve Switzer and passed unanimously.**

**The motion to approve the amended MAC Charter and Bylaws was by Dr. Steven Crawford, seconded by Dr. Daniel Post and passed unanimously.**

For more detailed information, Attachment C of the Committee packet.

**9. New Business:**

Vice-Chairwoman, Wanda Felty.

No new business was discussed.

**10. Adjourn:**

Vice-Chairwoman, Wanda Felty.

**Ms. Wanda Felty asked for a motion to adjourn. Motion was provided by Dr. Steven Crawford and seconded by Dr. Daniel Post; there was no dissent and the meeting adjourned at 2:10pm.**

**OKLAHOMA HEALTH CARE AUTHORITY**  
**SFY-2027 BUDGET WORK PROGRAM**  
**Summary by Program Expenditure**

| Description                                     | SFY-2026              | SFY-2027              | Inc / (Dec)          | % Change      |
|-------------------------------------------------|-----------------------|-----------------------|----------------------|---------------|
| <b>Medical Program</b>                          |                       |                       |                      |               |
| Managed Care:                                   |                       |                       |                      |               |
| SoonerCare Choice / HAN / PACE                  | 41,089,263            | 50,714,439            | 9,625,175            | 23.4%         |
| SoonerSelect Medical                            | 2,804,657,142         | 3,035,462,564         | 230,805,422          | 8.2%          |
| SoonerSelect CSP                                | 161,858,174           | 165,339,047           | 3,480,874            | 2.2%          |
| SoonerSelect Dental                             | 200,199,922           | 217,632,398           | 17,432,476           | 8.7%          |
| SoonerSelect SFY25 Risk Corridor Payment        | -                     | 180,312,910           | 180,312,910          | 100.0%        |
| SoonerSelect MY26 Rate Adjustment               | -                     | 185,556,023           | 185,556,023          | 100.0%        |
| SoonerSelect MY27 Rate Adjustment               | -                     | 170,556,023           | 170,556,023          | 100.0%        |
| Hospitals                                       | 1,159,524,096         | 1,186,777,391         | 27,253,295           | 2.4%          |
| Behavioral Health                               | 16,582,994            | 16,981,502            | 398,508              | 2.4%          |
| Nursing Homes                                   | 952,797,458           | 1,014,868,034         | 62,070,576           | 6.5%          |
| Physicians                                      | 297,297,104           | 297,934,479           | 637,375              | 0.2%          |
| Dentists                                        | 60,637,156            | 60,100,125            | (537,032)            | -0.9%         |
| Mid-Level Practitioner                          | 154,362               | 235,009               | 80,647               | 52.2%         |
| Other Practitioners                             | 30,663,899            | 27,693,905            | (2,969,994)          | -9.7%         |
| Home Health                                     | 32,941,435            | 36,174,584            | 3,233,149            | 9.8%          |
| Lab & Radiology                                 | 19,135,003            | 19,425,714            | 290,711              | 1.5%          |
| Medical Supplies                                | 83,800,725            | 90,202,110            | 6,401,385            | 7.6%          |
| Clinic Services                                 | 446,385,491           | 514,439,886           | 68,054,395           | 15.2%         |
| Ambulatory Surgery Center                       | 7,867,103             | 9,189,066             | 1,321,963            | 16.8%         |
| Prescription Drugs                              | 965,324,724           | 1,109,099,005         | 143,774,280          | 14.9%         |
| Miscellaneous                                   | 300,756               | 301,046               | 290                  | 0.1%          |
| ICF/IID                                         | 93,345,474            | 92,446,532            | (898,942)            | -1.0%         |
| Transportation                                  | 138,711,910           | 179,881,024           | 41,169,114           | 29.7%         |
| Medicare Buy-in (Part A & B )                   | 259,557,360           | 281,948,740           | 22,391,380           | 8.6%          |
| Medicare clawback payment (Part D)              | 146,129,387           | 159,116,096           | 12,986,709           | 8.9%          |
| SHOPP - Supplemental Hosp Offset Pymt.          | 1,391,853,449         | 1,392,576,561         | 723,112              | 0.1%          |
| Provider Incentive Program                      | 115,089,502           | 112,473,904           | (2,615,598)          | -2.3%         |
| Money Follows the Person - Enhanced             | 1,609,635             | 2,582,529             | 972,894              | 60.4%         |
| Health Management Program (HMP)                 | 12,560,024            | 11,304,022            | (1,256,002)          | -10.0%        |
| Non-Title XIX Medical                           | 50,000                | 50,000                | -                    | 0.0%          |
| <b>TOTAL OHCA MEDICAL PROGRAM</b>               | <b>9,440,123,549</b>  | <b>10,621,374,667</b> | <b>1,181,251,119</b> | <b>12.5%</b>  |
| <b>Insure Oklahoma - Premium Assistance</b>     |                       |                       |                      |               |
| Employer Sponsored Insurance - ESI              | 28,230,478            | 24,933,829            | (3,296,649)          | -11.7%        |
| Individual Plan - IP                            | 200,000               | 200,000               | -                    | 0.0%          |
| <b>TOTAL INSURE OKLAHOMA PROGRAM</b>            | <b>28,430,478</b>     | <b>25,133,829</b>     | <b>(3,296,649)</b>   | <b>-11.6%</b> |
| <b>Rural Health Transformation Grant</b>        |                       |                       |                      |               |
| Rural Health Transformation - Division 53       | 9,297,914             | 56,182,424            | 46,884,510           | 504.2%        |
| <b>OHCA Administration</b>                      |                       |                       |                      |               |
| Operations - Division 10                        | 63,836,277            | 62,538,873            | (1,297,404)          | -2.0%         |
| Contracts - Division 30                         | 48,626,036            | 49,614,237            | 988,201              | 2.0%          |
| Insure Oklahoma - Division 40                   | 1,467,659             | 1,410,989             | (56,670)             | -3.9%         |
| Grants Management - Division 50                 | 14,914,860            | 7,774,390             | (7,140,470)          | -47.9%        |
| EGID - Division 80                              | 53,450,300            | 59,139,508            | 5,689,208            | 10.6%         |
| Business Enterprises - Division 88              | 136,615,532           | 181,629,180           | 45,013,648           | 32.9%         |
| <b>TOTAL OHCA ADMIN</b>                         | <b>318,910,664</b>    | <b>362,107,177</b>    | <b>43,196,513</b>    | <b>13.5%</b>  |
| <b>TOTAL OHCA PROGRAMS</b>                      | <b>9,796,762,605</b>  | <b>11,064,798,098</b> | <b>1,268,035,493</b> | <b>12.9%</b>  |
| <b>Other State Agency (OSA) Programs</b>        |                       |                       |                      |               |
| Oklahoma Human Services (OHS)                   | 971,187,756           | 1,001,246,504         | 30,058,749           | 3.1%          |
| Oklahoma State Dept of Health (OSDH)            | 5,516,449             | 6,004,396             | 487,948              | 8.8%          |
| The Office of Juvenile Affairs (OJA)            | 5,600,170             | 8,621,175             | 3,021,004            | 53.9%         |
| University Hospitals (Medical Education Pymnts) | 773,757,681           | 796,547,327           | 22,789,646           | 2.9%          |
| Department of Mental Health (ODMHSAS)           | 829,717,894           | 936,171,401           | 106,453,507          | 12.8%         |
| Department of Education (DOE)                   | 7,838,848             | 9,209,752             | 1,370,904            | 17.5%         |
| Non-Indian Payments                             | 29,897,897            | 35,223,186            | 5,325,289            | 17.8%         |
| Department of Corrections (DOC)                 | 10,870,206            | 10,502,902            | (367,304)            | -3.4%         |
| JD McCarty                                      | 26,740,880            | 19,153,667            | (7,587,213)          | -28.4%        |
| OSA Non-Title XIX                               | 119,095,000           | 119,095,000           | -                    | 0.0%          |
| <b>TOTAL OSA PROGRAMS</b>                       | <b>2,780,222,780</b>  | <b>2,941,775,310</b>  | <b>161,552,530</b>   | <b>5.8%</b>   |
| <b>TOTAL MEDICAID PROGRAM</b>                   | <b>12,576,985,385</b> | <b>14,006,573,407</b> | <b>1,429,588,023</b> | <b>11.4%</b>  |

**OKLAHOMA HEALTH CARE AUTHORITY**  
**SFY-2027 BUDGET WORK PROGRAM**  
**Summary by Program Expenditure**

| Description                             | SFY-2026              | SFY-2027              | Inc / (Dec)          | %<br>Change  |
|-----------------------------------------|-----------------------|-----------------------|----------------------|--------------|
| <b>REVENUES</b>                         |                       |                       |                      |              |
| Federal - Medicaid Traditional          | 5,795,516,437         | 6,184,932,530         | 389,416,093          | 6.7%         |
| Federal - Medicaid Expansion            | 2,525,594,275         | 3,110,256,207         | 584,661,932          | 23.1%        |
| Federal - Admin                         | 183,198,293           | 256,630,984           | 73,432,691           | 40.1%        |
| Drug Rebates                            | 773,699,064           | 803,736,608           | 30,037,544           | 3.9%         |
| Medical Refunds                         | 65,834,100            | 47,733,879            | (18,100,222)         | -27.5%       |
| NF Quality of Care Fee                  | 102,663,730           | 110,203,669           | 7,539,939            | 7.3%         |
| OSA Refunds & Reimbursements            | 904,573,670           | 959,142,335           | 54,568,665           | 6.0%         |
| Tobacco Tax                             | 67,525,933            | 65,501,613            | (2,024,320)          | -3.0%        |
| MISC / GEMT / ASPAPP Assessment Fee     | 4,805,203             | 10,514,823            | 5,709,620            | 118.8%       |
| Prior Year Carryover (Fund 200 Admin)   | 28,415,268            | 6,870,097             | (21,545,171)         | -75.8%       |
| Prior Year Carryover (Fund 340 Program) | 96,636,158            | 179,600,487           | 82,964,328           | 85.9%        |
| Other Grants                            | 156,160               | 158,740               | 2,580                | 1.7%         |
| Hospital Provider Fee (SHOPP bill)      | 409,224,691           | 427,272,848           | 18,048,157           | 4.4%         |
| EGID - Funds 290 / 292                  | 53,450,300            | 59,139,508            | 5,689,208            | 10.6%        |
| MCO premium tax                         | 129,109,875           | 124,018,311           | (5,091,564)          | -3.9%        |
| Transfer from Rate Preservation Fund    | 26,041,449            | -                     | (26,041,449)         | -100.0%      |
| State Appropriated - OHCA               | 1,410,540,778         | 1,660,860,769         | 250,319,991          | 17.7%        |
| <b>TOTAL REVENUES</b>                   | <b>12,576,985,385</b> | <b>14,006,573,407</b> | <b>1,429,588,023</b> | <b>11.4%</b> |