

**CENTERS FOR MEDICARE & MEDICAID SERVICES
EXPENDITURE AUTHORITY**

NUMBER: 11-W-00048/6

TITLE: SoonerCare

AWARDEE: Oklahoma Health Care Authority

Under the authority of section 1115(a)(2) of the Social Security Act (“the Act”), expenditures made by Oklahoma for the items identified below, which are not otherwise included as expenditures under section 1903 of the Act shall, for the period from January 1, 2027 through December 31, 2031, unless otherwise specified, be regarded as expenditures under the state’s title XIX plan, except those specified below as not applicable to these expenditure authorities.

The following expenditure authorities and the provisions specified as “not applicable” may only be implemented consistent with the approved Special Terms and Conditions (STC) and shall enable Oklahoma to operate the above-identified section 1115(a) demonstration.

- 1. Employer-Sponsored Health Insurance Population.** Expenditures for premium and cost sharing assistance for non-state plan eligible individuals who work for a qualifying employer and have income no more than 200 percent of the federal poverty level (FPL), and their spouses. These individuals include:
 - a. Non-disabled low-income workers from age 19 up to and including age 64 years.
 - b. Working disabled adults age 19 up to and including age 64 years.
 - c. No more than 3,000 full-time college students age 19 up to and include age 22 years, who have no minimum essential coverage, and whose parent(s)/guardian(s), who claim the individual as a dependent, work for a qualifying employer.
 - d. Foster parents
 - e. Employees and spouses of not-for-profit businesses with 500 or fewer employees.
- 2. Health Access Networks Expenditures.** Expenditures for Per Member Per Month payments made to the Health Access Networks for case management activities.
- 3. Health Management Program.** Expenditures for otherwise non-covered costs to provide services authorized through the Health Management Program as described in these STCs.

Title XIX Requirements Not Applicable to the Demonstration Expenditure Authorities

Not Applicable to the Employer-Sponsored Health Insurance population

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| 1. Comparability | Section 1902(a)(10)(B) and
1902(a)(17) |
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Oklahoma SoonerCare
Approval Period: January 1, 2027 through December 31, 2031
Renewal Approved: August 28, 2026

To permit the state to provide different benefit packages to individuals in the Employer-Sponsored Health Insurance population who are enrolled in the Premium Assistance Employer Coverage Plan that may vary by individual.

2. Cost Sharing Requirements

Section 1902(a)(14) insofar as it incorporates Section 1916

To permit the state to impose premiums, deductibles, cost sharing, and similar charges that exceed the statutory limitations for individuals in the Employer-Sponsored Health Insurance population who are enrolled in the Premium Assistance Employer Coverage Plan.

3. Freedom of Choice

Section 1902(a)(23)(A)

To permit the state to restrict the choice of provider for beneficiaries eligible in the Employer-Sponsored Health Insurance population enrolled in the Premium Assistance Employer Coverage Plan. No waiver of freedom of choice is authorized for family planning providers.

4. Retroactive Eligibility

Section 1902(a)(34)

To enable the state to not provide retroactive eligibility for demonstration participants in the Employer-Sponsored Health Insurance population.

5. Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Services

**Section 1902(a)(4)(B);
1902(a)(10)(A); and
1902(a)(43)**

To exempt the state from furnishing or arranging for EPSDT services for individuals in the Employer-Sponsored Health Insurance population who are age 19 through age 22.

6. Assurance of Transportation

**Sections 1902(a)(4) and
1902(a)(19)
42 CFR 431.53**

To permit the state not to provide non-emergency transportation benefits to individuals in the Employer-Sponsored Health Insurance population enrolled in Insure Oklahoma.