

**OKLAHOMA HEALTH CARE AUTHORITY
PUBLIC HEARING ON PERMANENT RULEMAKING UNDER THE OKLAHOMA
ADMINISTRATIVE PROCEDURES ACT**

January 15, 2026, at 1:00 P.M.

Charles Ed McFall Board Room of the Oklahoma Health Care Authority
4345 N. Lincoln Blvd.
Oklahoma City, OK 73105

Anyone who wishes to orally present their views will be allowed a maximum of two minutes to speak and must sign in at the door by 1:05 P.M.

AGENDA FOR THE MEETING

1. INTRODUCTIONS AND PURPOSE OF MEETING

2. RULES TO BE CONSIDERED

PERMANENT RULES

A) Chapter 150: Employees Group Insurance Division — This rulemaking action amends rules related to the administrative operations of the Employees Group Insurance Division (EGID). House Bill 1187 of the 2025 legislative session modified the opt-out provision to remove a reference to group insurance, and these proposed rule changes remove that reference. Additional amended language clarifies audit requirements for providers to furnish requested information and documentation to EGID or its designated vendor.

Amended sections of OAC Title 317: 150-3-15; 150-5-17.

The proposed policy changes are being promulgated as Permanent Rules.

B) APA WF# 25-01: Functional Family Therapy — The Oklahoma Health Care Authority (OHCA), in collaboration with Oklahoma Juvenile Affairs (OJA) and Oklahoma Human Services (OHS), is proposing policy revisions to add coverage for Functional Family Therapy (FFT). FFT is a short-term, evidence-based therapeutic intervention designed to improve family functioning and address behavioral issues in adolescents who are at risk of or engaged in delinquent behavior, substance abuse, or other challenges. The therapy is rooted in a systemic approach, focusing on the relationships within the family rather than treating the individual in isolation. The proposed policy defines eligible populations, eligible providers, referral requirements, service limitations and exclusions.

Amended sections of OAC Title 317: 30-5-240.2; 30-5-240.3; 30-5-241.8.

The proposed policy changes are being promulgated as Permanent Rules.

C) [APA WF# 25-02A&B: ADvantage Waiver Revisions](#) — The proposed revisions align the ADvantage Waiver policy with the waiver amendments approved on October 16, 2024, with a retroactive effective date of October 1, 2023. Key changes include lowering the minimum age for program eligibility from twenty-one (21) to nineteen (19) years, clarifying procedures for obtaining member or representative signatures for home-delivered meals, and removing redundant expanded criteria language now addressed under the Level of Care medical eligibility determination section. Additional revisions reformat policy for clarity, remove outdated language, and improve consistency in describing ADvantage program capacity.

Amended sections of OAC Title 317: 30-5-760; 30-5-763; 35-9-1; 35-17-3; 35-17-4.

The proposed policy changes are being promulgated as Permanent Rules.

D) [APA WF# 25-03: SoonerSelect Auto-Assignment](#) — The proposed changes clarify that members receiving only family planning services through SoonerPlan are excluded from enrollment in the SoonerSelect program. Additionally, the choice period for SoonerSelect enrollees will be changed from 60 days to 30 days. The choice period is the timeframe during which a SoonerSelect enrollee may select a plan. If a selection is not made during this timeframe, the enrollee will be automatically assigned to one of the contracted entities.

Amended sections of OAC Title 317: 55-3-1; 55-3-2.

The proposed policy changes are being promulgated as Permanent Rules.

E) [APA WF# 25-04A&B: Hospice for HCBS](#) — The proposed policy revisions remove hospice services from the 1915(c) Home and Community-Based Services (HCBS) waivers, including the ADvantage and Medically Fragile waivers, as well as the Money Follows the Person demonstration. Hospice services will instead be provided under the State Plan. The revisions also update hospice certification requirements to align with federal standards, requiring statements from both the member's attending physician and the hospice provider's physician. Additional revisions clarify the length of the hospice benefit election.

Amended sections of OAC Title 317: 30-5-531; 30-5-764; 30-5-1200; 30-5-1202; 50-1-3; 50-1-12; 50-1-14.

The proposed policy changes are being promulgated as Permanent Rules.

F) [APA WF# 25-05: Ancillary Services](#) — The proposed policy changes revise the Nursing Facility policy to align agency rules with the Title XIX State Plan durable medical equipment (DME) reimbursement guidelines for nursing facilities, which stipulate that DME is included as part of the nursing facility rate methodology, and is not billed separately.

Amended sections of OAC Title 317: 30-5-133.2.

The proposed policy changes are being promulgated as Permanent Rules.

G) APA WF# 25-06: Rapid Genome Sequencing — The proposed policy changes establish coverage and reimbursement for rapid whole genome sequencing (rWGS) in accordance with House Bill 1576 (2025). Coverage applies to members under age 21 who have an unknown complex or acute illness and are receiving intensive care unit hospital services. The testing may help identify genetic changes and determine the member's condition. When medically necessary, coverage on behalf of the child will include comparator testing of one or both parents. Prior authorization will be required. Rapid whole genome sequencing will be excluded from the Per Discharge Prospective Rate for hospitals and reimbursed separately under the Ambulatory Payment Classification fee schedule. Reimbursement for testing provided in an I/T/U facility will be included in the Inpatient Hospital Per Diem Rate.

Amended sections of OAC Title 317: 30-5-47; 30-5-47.7.

These rule changes are currently approved as Emergency Rules and must be promulgated as Permanent Rules.

H) APA WF# 25-07: Health Information Exchange (HIE) Cleanup — The proposed policy revisions align OHCA policy with current state law regarding the Health Information Exchange (HIE). The amendments clarify that participation in the HIE is voluntary, rather than mandatory. The HIE already operates under this voluntary structure, so no programmatic changes are anticipated.

Amended sections of OAC Title 317: 30-3-35.

The proposed policy changes are being promulgated as Permanent Rules.

I) APA WF#25-08: Birthing Centers & Midwives — The proposed policy changes establish coverage and reimbursement methodologies for birthing centers and licensed midwives. The revisions allow coverage of birthing center and licensed midwife services for normal, uncomplicated, low-risk births. Birthing centers must be accredited by the Commission for the Accreditation of Birth Centers (CABC). Licensed midwives must be Certified Midwives or Certified Professional Midwives and must be licensed by the Oklahoma State Department of Health (OSDH) to provide midwifery services. Birthing centers will be reimbursed a facility charge determined by the Ambulatory Payment Classification (APC) fee schedule. Licensed midwives will be reimbursed at 80% of the physician fee schedule for services within their scope of practice as defined by state law.

Amended sections of OAC Title 317: 30-5-229; 30-5-890; 30-5-890.1; 30-5-891; 30-5-892; 30-5-893; 30-5-1217; 30-5-1235; 30-5-1236; 30-5-1237.

These rule changes are currently approved as Emergency Rules and must be promulgated as Permanent Rules.

J) APA WF# 25-09: FQHC & RHC Revisions — The proposed policy changes revise the definition of Rural Health Center (RHC) and Federally Qualified Health Center (FQHC) core services. Marriage and Family Therapist (MFT) services and Mental Health Counselors (MHC) services will be added to the definition of RHC/FQHC core services.

The following provider types meet the definition of an MHC: Licensed Professional Counselor (LPC), Licensed Behavioral Health Provider (LBHP), and providers with a Licensed Drug and Alcohol Counselor/Mental Health (LADC-MH) credential. The policy changes also include clarification that certain medical services provided by an optometrist, podiatrist, or chiropractor in an RHC or FQHC can be reimbursed the encounter rate.

Amended sections of OAC Title 317: 30-5-354; 30-5-355.2; 30-5-356; 30-5-359.2; 30-5-659; 30-5-661.1; 30-5-661.5; 30-5-664.3; 30-5-664.5.

These rule changes are currently approved as Emergency Rules and must be promulgated as Permanent Rules.

K) [APA WF# 25-10: Residential Behavioral Management Services](#) — The proposed policy revisions, submitted on behalf of the Oklahoma Department of Human Services (OKDHS), update requirements for Qualified Residential Treatment Programs (QRTPs) under the Residential Behavioral Management Services (RBMS) policy. Revisions clarify existing QRTP nursing requirements. Additional changes will add policy language establishing expectations for weekly family therapy and timeframes for updates to the Individual Plan of Care, and implementing a Clinical Quality Review process to support consistent program oversight and service quality.

Amended sections of OAC Title 317: 30-5-1043.

The proposed policy changes are being promulgated as Permanent Rules.

L) [APA WF# 25-11: Individual Providers and Specialties; Dentists](#) — The proposed policy changes update dental imaging requirements to reflect the current standard of care and ensure appropriate billing for surgical extractions. Current OHCA policy defines full mouth images as two bitewings and panoramic images. The revision clarifies that a full mouth series consists of 10–12 periapical images and 2–4 posterior bitewings, consistent with current dental practice. The changes also establish a prior authorization requirement for complex extractions (codes D7210 and D7250) due to program integrity concerns. No changes are made to policy or billing expectations for simple extractions (code D7140).

Amended sections of OAC Title 317: 30-5-696; 30-5-698.

The proposed policy changes are being promulgated as Permanent Rules.

M) [APA WF# 25-12: Four Walls Clinic Services](#) — The proposed policy revisions implement the mandatory “four walls” exception for Clinic Services when provided by Indian Health Service (IHS) clinics and Tribal clinics, as required by the 2024 Outpatient Prospective Payment System final rule. Off-site services furnished by an IHS or Tribal clinic, outside of the “four walls” of the clinic, had previously been covered under a temporary exemption to the 42 CFR 440.90 Clinic Services location requirements. The 2024 OPPTS final rule codified this exemption.

Amended sections of OAC Title 317: 30-5-1096.

These rule changes are currently approved as Emergency Rules and must be promulgated as Permanent Rules.

N) APA WF# 25-13: Secure Behavioral Health Transportation — The proposed rule revisions modify eligibility and reimbursement policy for the Secure Behavioral Health Transportation program. The modifications include clearer language regarding services for which the transportation is covered, facilities to which a member may be transported, a requirement that the member meet criteria for emergency detention prior to transport, and coverage for court-ordered transportation for the purpose of evaluation and/or treatment. Modifications also include clarification that reimbursement is for loaded mileage.

Amended sections of OAC Title 317: 30-5-349; 30-5-351.

The proposed policy changes are being promulgated as Permanent Rules.

O) APA WF# 25-14: Paid Family Caregiver Program — The Oklahoma Health Care Authority proposes policy revisions to implement the Paid Family Caregiver (PFC) program, as authorized by Senate Bill 56 and codified at 63 O.S. § 5013.2. This new program is intended for children approved for Private Duty Nursing (PDN) who require care beyond personal care services, but which can be safely provided by a trained family caregiver. The caregiver must meet OHCA-established criteria and be employed and trained by a PDN agency. Additional revisions clarify PDN policy, streamline the prior authorization process for both PDN and PFC services and require service documentation at treatment plan recertification.

Amended sections of OAC Title 317: 30-5-550; 30-5-551; 30-5-552; 30-5-553; 30-5-554; 30-5-554.1; 30-5-554.2; 30-5-554.3; 30-5-555; 30-5-556; 30-5-557; 30-5-558; 30-5-559; 30-5-560.1.

These rule changes are currently approved as Emergency Rules and must be promulgated as Permanent Rules.

P) APA WF# 25-15: 340B Drug Discount Program — These rule revisions seek to remove certain high-cost drugs and therapies from the 340B Drug Pricing Program. The 340B program is a federal initiative that allows health care organizations to purchase certain drugs directly from pharmaceutical manufacturers at a discount. The revision creates a 340B Carve Out Drug list, consisting of cell and gene therapies, drugs currently under a value-based agreement, or Brand Preferred Drugs where the cost to the Medicaid program is \$500,000 or higher, annually. Drugs on this list would be prohibited from being dispensed or administered to Oklahoma Medicaid Members if purchased at 340B prices.

Amended sections of OAC Title 317: 30-5-87.

These rule changes are currently approved as Emergency Rules and must be promulgated as Permanent Rules.

Q) APA WF# 25-17: Outpatient Behavioral Health Agency Services — The proposed rule revisions clarify practitioner qualifications for Onsite and Mobile Crisis

Intervention Services. The revisions further define Facility Based Crisis Stabilization as a service and clarify qualifications for its practitioners. Finally, the revisions define coverage for Urgent Recovery Clinics.

Amended sections of OAC Title 317: 30-5-241.4.

The proposed policy changes are being promulgated as Permanent Rules.

R) APA WF# 25-18: Inpatient Psychiatric Accrediting Bodies — The proposed policy revisions expand recognition of facility accreditation to include all accreditation bodies approved by the Centers for Medicare & Medicaid Services (CMS). Facilities accredited by any CMS-approved organization will be eligible to contract with the Oklahoma Health Care Authority (OHCA). The revisions also include minor updates to reflect the new name of a related Behavioral Health service rule.

Amended sections of OAC Title 317: 30-5-95.40; 30-5-95.44; 30-5-95.52; 30-5-240.2.

The proposed policy changes are being promulgated as Permanent Rules.

S) APA WF# 25-19: Medically Fragile Waiver Services — The Oklahoma Health Care Authority (OHCA) is proposing revisions to reflect a change in operating agency for Medically Fragile Programs from OHCA to OKDHS. Additional revisions include minor technical corrections to language.

Amended sections of OAC Title 317: 50-1-1; 50-1-2; 50-1-4; 50-1-5; 50-1-6; 50-1-13; 50-1-16.

The proposed policy changes are being promulgated as Permanent Rules.

T) APA WF# 25-21: Pharmacists as Providers Cleanup — The proposed policy changes make minor administrative revisions to pharmacists' services. The proposed revisions remove citations of state law and Board of Pharmacy administrative rules. These changes will ensure that OHCA policy accounts for any statutory or regulatory changes to pharmacists' scope of practice in the future. There will be no impact on current coverage of pharmacists' services.

Amended sections of OAC Title 317: 30-5-1226.

The proposed policy changes are being promulgated as Permanent Rules.

U) APA WF# 25-22: Elective Sterilization Clarification — The proposed policy revisions remove the requirement for a signed sterilization consent form in non-elective situations to prevent delays in medically necessary care. The requirement for a signed consent form, along with the associated 30-day waiting period, will remain in place for elective sterilization procedures. These revisions ensure timely access to urgent or emergent sterilization services while maintaining federal consent standards for elective procedures.

Amended sections of OAC Title 317: 30-5-18; 30-5-51.

The proposed policy changes are being promulgated as Permanent Rules.

V) APA WF# 25-23: Sports Physical Clarification — This policy revision adds language specifying that sports physicals may occur during an Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) visit but are not billable as a stand-alone service. Revisions also clarify that sports physicals do not meet EPSDT screening requirements and cannot be reimbursed when performed as the only service of the day.

Amended sections of OAC Title 317: 30-3-65.

The proposed policy changes are being promulgated as Permanent Rules.

W) APA WF# 25-24: Programs of All-Inclusive Care for the Elderly (PACE) Agreement — The proposed policy changes establish a new contract requirement for Programs of All-Inclusive Care for the Elderly (PACE) organizations. Federal regulations require PACE organizations to enter into a three-way agreement with the Oklahoma Health Care Authority (OHCA) and the Centers for Medicare & Medicaid Services (CMS). The proposed revisions additionally require PACE organizations to enter into a two-way agreement with OHCA. The two-way agreement will support OHCA's state and federal oversight responsibilities as the regulatory agency for PACE organizations.

Amended sections of OAC Title 317: 35-18-4.

The proposed policy changes are being promulgated as Permanent Rules.

X) APA WF# 25-25: Opioid Overdose Reversal Agent — The proposed revisions update coverage language to allow for new opioid overdose reversal agents as they become available on the market. Current policy specifies coverage for Naloxone by name, which was appropriate when it was the only available option. As additional opioid overdose reversal agents are now available, the revised language broadens coverage to include other clinically appropriate agents, ensuring timely access and alignment with evolving federal and clinical standards.

Amended sections of OAC Title 317: 30-5-72

The proposed policy changes are being promulgated as Permanent Rules.

Y) APA WF# 25-26: Lactation Consultant Revisions — The proposed policy changes amend licensing requirements for lactation consultants. Current OHCA policy requires lactation consultants to be both an International Board Certified Lactation Consultant (IBCLC) and a registered nurse or registered dietitian. The proposed revisions remove the requirement that lactation consultants also be a registered nurse or registered dietitian. Providers will be required only to hold IBCLC certification to contract with OHCA and be reimbursed for lactation consultant services. The revisions also allow lactation consultant services to be provided via telehealth when appropriate, subject to existing telehealth limitations. Lactation consultant services must be recommended by a physician or other licensed provider, including a physician assistant, advanced practice registered nurse, certified nurse midwife, or licensed midwife. There is no change to reimbursement rates.

Amended sections of OAC Title 317: 30-5-231; 30-5-232; 30-5-234.

The proposed policy changes are being promulgated as Permanent Rules.

Z) [APA WF# 25-27](#): Determination of Qualifying Categorical Relationships — The proposed rule revisions shift responsibility for determining Medicaid eligibility for TANF recipients from OKDHS to OHCA. Federal regulations no longer provide for receipt of TANF to be an automatic eligibility trigger, instead requiring TANF recipients to have their income assessed under Modified Adjusted Gross Income (MAGI) rules. Eligibility groups for whom OKDHS determines eligibility (aged, blind, disabled, custody) are not income-based, while OHCA determines eligibility for income-based groups. Enrollment systems have already been updated in compliance with federal regulations.

Amended sections of OAC Title 317: 35-5-2; 35-5-63; 35-6-37; 35-6-60; 35-7-61.

The proposed policy changes are being promulgated as Permanent Rules.

AA) [APA WF#25-28A&B](#): Developmental Disabilities Services Revisions — This policy revision seeks to update Developmental Disabilities Services (DDS) policy related to skilled nursing, assistive technology, transportation, employment, and self-directed service provisions. Revisions clarify that Oklahoma Human Services DDS registered nurses may participate in waiver skilled nursing services. Additional updates add a new section on assistive and enabling technology, increase annual transportation limits, and clarify service definitions and rate structures for employment and self-directed services. Overall, the revisions improve alignment with current practice, strengthen consistency across DDS program rules, and expand flexibility for members receiving Home and Community-Based Services (HCBS) waivers.

Amended sections of OAC Title 317: 30-5-391; 40-5-100; 40-7-2; 40-9-1.

The proposed policy changes are being promulgated as Permanent Rules.

BB) [APA WF# 26-01](#): Removal of Physician Limit Caps — The Oklahoma Health Care Authority proposes revising policy to eliminate existing limits on physician visits for adults, allowing members to receive medically necessary services. This change is intended to improve access to primary and preventive care and ensure members can receive timely outpatient treatment. In addition, the rule includes non-substantive clean-up to align existing abortion-related language with other sections of policy and ensure consistency with state law. These edits do not change coverage requirements.

Amended sections of OAC Title 317: 30-3-57; 30-5-59; 30-5-2; 30-5-9; 30-5-10; 30-5-11; 30-5-15; 30-5-42.4; 30-5-261; 30-5-431; 30-5-356; 30-5-361; 30-5-664.3.

The proposed policy changes are being promulgated as Emergency and Permanent Rules.

CC) [APA WF# 26-02: Telehealth Originating Site Reimbursement](#) — The proposed revision adds a facility fee for originating sites when a member receives services via telehealth. The fee is payable to the physical site hosting the member, separate from the distant-site provider's professional claim. Eligible sites include hospitals, outpatient departments, physician and practitioner offices, RHCs, FQHCs, I/T/U clinics, and public health clinics. The fee is only allowed when the site provides staff or facility resources to support the encounter. It is not reimbursable when the member is at home or when no resources are used. Equipment and transmission costs remain non-covered.

Amended sections of OAC Title 317: 30-3-27; 30-3-27.1.

The proposed policy changes are being promulgated as Emergency and Permanent Rules.