



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 June 18, 2025, Humana Healthy Horizons of Oklahoma 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:

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PROCEDURE CODE(S) IMPACTED	OHCA'S CURRENT CLAIMS PROCESSING PROTOCOL	PROPOSED MODIFICATION TO CLAIMS PROCESSING PROTOCOL	ANTICIPATED IMPACT	OHCA DECISION
T1001	OHCA currently requires prior authorization for procedure code T1001.	Humana will not require prior authorization for procedure code T1001.	Humana reports over 50% of the claims for this code are from the Oklahoma Health Department who does not request a PA for this service. Humana is requesting to remove prior authorization requirements for this code to ensure parity across provider types.	APPROVED for dates of service on or after 6/23/2025.