



SoonerSelect Contracted Entity (CE) Requests to Change Service Provisions

SoonerSelect contracts¹ state that CEs may not impose prior authorization guidelines, criteria or utilization management practices that are more restrictive than OHCA without OHCA prior approval. OHCA implemented a 'Request to Change Service Provision Process' wherein CEs may submit requests for review that deviate from current fee-for-service prior authorization guidelines, criteria or utilization management practices. These requests are reviewed by OHCA subject matter experts (SMEs), 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's decision(s) is noted below:

- **Requesting CE(s):**
 - Oklahoma Complete Health, Oklahoma Complete Health Children's Specialty Program
- **Date Modification Requested:** 4/8/2026
- **Procedure Code(s):**
 - Evaluation and Management (E/M) service codes except 99281 – 99285 for services in an emergency room setting
- **Proposed Modification:** Implement an automated pre-payment (after services are rendered, but prior to claims payment) claims review process for determining and ensuring payment reflects the correct level of evaluation and management service. The coding algorithm will evaluate each diagnosis code billed in the claim header, along with historical claims and other claims information (including additional testing/procedures) and determine if the level of E/M service billed is appropriate for the services rendered. E/M services will not be denied as a result of this policy, but E/M services will be reviewed and may be reduced based on the level of service performed.
- **Reason for Proposed Modification:** Studies and audits have historically shown a high error rate in claims for E/M services, resulting in overpayment for these services. This change will allow the CE to evaluate and adjust claims payment, if appropriate, based on diagnoses, treatment history, etc., helping to decrease the number of overpayments made for these services.
- **Impact:**
 - **Member:** No impact as change will not require any delay of services being rendered.

¹ **Medical & Children's Specialty Program Contract Section References:** 1.7: Covered Benefits; 1.8: Medical Management; **Dental Contract Section References:** 1.7: Covered Benefits; 1.8: Dental Services Utilization Management

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- **Provider:** Providers will experience increased coding accuracy and reduction in overpayments.
- **Financial:** This change is expected result in savings for between \$250,000 – \$1,000,000 annually.
- **OHCA Decision:** Approved
 - Requesting CE(s) may implement on or after 6/1/2026.