

Clay Bullard | Chief Executive Officer

J. Kevin Stitt | Governor

OHCA 2025-22

November 25, 2025

RE: Prior Authorization Timeliness - Alignment with CMS Interoperability and Prior Authorization Rule (CMS-0057-F)

Dear Provider,

This letter is to notify you of the planned changes concerning prior authorization timeliness to align with the Centers for Medicare & Medicaid Services (CMS) Interoperability and Prior Authorization Rule (CMS-0057-F) and the SoonerCare program. The Oklahoma Health Care Authority (OHCA) maintains a continued commitment to strengthening access to care while still ensuring the medical care is necessary and appropriate.

For prior authorizations (PA), in accordance with 42 CFR 440.230 Sufficiency of amount, duration and scope:

- (e) For prior authorization requests for items and services (excluding drugs, as defined in 431.60(b)(6) of this chapter), the State Medicaid agency must
  - (1) Beginning Jan. 1, 2026, make prior authorization decisions within the following timeframes:
    - (i) For a standard determination, as expeditiously as a beneficiary's health condition requires, but in no case later than seven calendar days after receiving the request, unless a shorter minimum timeframe is established under state law. The timeframe for standard authorization decisions can be extended by up to 14 calendar days if the beneficiary or provider requests an extension, or if the state agency determines that additional information from the provider is needed to make a decision.
    - (ii) For an expedited determination, as expeditiously as a beneficiary's health condition requires, but in no case later than 72 hours after receiving the request, unless a shorter minimum timeframe is established under state law.







Clay Bullard | Chief Executive Officer

J. Kevin Stitt | Governor

SoonerCare's Operational Plan

Effective Jan. 1, 2026, SoonerCare will be required to meet the following service-level timelines for prior authorization:

- In accordance with 42 CFR 440.230, expedited PAs or urgent PAs in alignment with OHCA policy language will be processed as expeditiously as necessary, no later than 72 hours after obtaining all necessary information to make a PA determination.
  - o If the provider fails to provide the necessary information for the PA request, the PA will be denied and/or canceled.
  - o No extension periods are authorized for expedited PAs.
  - o Types of authorizations considered for expedited review determinations are:
    - Acute inpatient behavioral health hospitalizations.
    - Qualifying clinical trial requests (with the appropriate completed Qualifying Clinical Trial Attestation form).
- Standard PAs in accordance with 42 CFR 440.230, shall be processed within 7 calendar days of obtaining all necessary information to make the PA or adverse determination.
  - o However, for routine authorizations, OHCA has up to 14 calendar days to complete these reviews as needed. Types of authorizations that may require 14 calendar days to complete a review are:
    - Out-of-state prior authorizations.
    - Medical transportation.
    - Commercial air.
    - Acute II/PRTF.
    - Therapeutic foster care/intensive therapeutic foster care.
    - Applied behavior analysis.
  - For authorizations that require a more comprehensive review process, the turnaround time is extended to 21 calendar days total. This includes requesting all necessary documentation, conducting member assessments, and completing a thorough and accurate review. These include:
    - Private duty nursing prior authorizations.







## Clay Bullard | Chief Executive Officer

J. Kevin Stitt | Governor

- Paid family caregiver prior authorizations.
- Assessment-driven authorizations, including UCATs (Uniform Comprehensive Assessment Tool), "Short-Term Nursing Facility-Care Benefit" reviews and long-term care reviews.

If you have any questions regarding this letter, please contact Care Coordination Services by email at <a href="mailto:PopulationCareMgmtAdminAssistants@okhca.org">PopulationCareMgmtAdminAssistants@okhca.org</a>.

Sincerely,

Sherri White, Chief Operating Officer Oklahoma Health Care Authority



