Spotlight on State: Oklahoma

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Oklahoma operates a volunteer all-payer claims database. Approximately 1 million people's claims are in this database, accounting for about 25% of Oklahoma's total population. The legislature also introduced legislation to promote price transparency and cost containment in recent terms, including protection against surprise billing and a Right to Shop program that would require insurance carriers to establish for all health care plans a program in which enrollees are directly incentivized to shop for lower-cost participating health care providers or health care entities for comparable health care services. Incentives may include cash payments, gift cards or credits or reductions of premiums, copayments, cost-sharing or deductibles.

In the insurance market, Oklahoma uses the federally facilitated marketplace. Blue Cross Blue Shield of Oklahoma was the only carrier offering plans on the state's exchange until 2018. Since then, more plans have joined the exchange, effectively decreasing the rates of BCBS. To provide additional insurance alternatives in Oklahoma, the legislature also enacted the Health Care Choice Act to allow the state to enter into compacts with other states so that health plans domiciled in those states could be sold to Oklahoma residents without having to obtain an Oklahoma certificate of authority.

Oklahoma was awarded a CMS State Innovation Model grant in 2014, which authorized the Oklahoma State Department of Health's Center for Health Innovation and Effectiveness to

utilize multi-payer value-based payment models to improve healthcare quality and bend the cost curve. In recent terms, the state legislature also proposed a public option bill that would authorize the Oklahoma Health Care Authority to implement a Medicaid Buy-In program in the state.