Oklahoma

Sources of Insurance Coverage
*Source: KFF, Health Insurance Coverage of the Total Population, 2022

Medicare
In Oklahoma, **591,800** residents are enrolled in Medicare, 15.2% of the population (2022 data). Of those, **40%** are enrolled in Medicare Advantage. For Oklahomans in the traditional Medicare program, the Oklahoma Insurance Department regulates Medicare Supplemental insurance policies and provides consumer-facing information about plan options.

Medicaid and the Children’s Health Insurance Program (CHIP)
In Oklahoma, approximately **850,100** people are enrolled in Medicaid or CHIP, 21.9% of the state population. In Oklahoma, the Children’s Health Insurance Program and Medicaid are collectively called SoonerCare. In 2021, Oklahoma adopted Medicaid expansion under the Affordable Care Act, which covers **335,000 low-income adults**.

In **Oklahoma**, children up to 222% of the federal poverty level (FPL), pregnant individuals with incomes up to 205% FPL, disabled individuals, adults, with or without children, up to 205% FPL, and women who have no insurance and need treatment for breast or cervical cancer are...
eligible to enroll in Medicaid. The Oklahoma Health Care Authority oversees the Medicaid Program. Oklahoma is in the process of transitioning Medicaid enrollees to receive benefits via private managed care organizations (MCOs).

**Employer-sponsored Insurance (ESI)**
In Oklahoma, approximately 1.67 million people are covered by employer-sponsored insurance (ESI), or 43.2% of Oklahoma’s population. In 2022, approximately 52.4% of Oklahoma’s private employers offer ESI. However, offer rates vary significantly by size of firm. In Oklahoma, 98.7% of large firms (50 or more employees) offer ESI, while only 37% of small employers offer ESI.

In Oklahoma, approximately 35.4% of private sector businesses that offer health insurance self-fund at least one health plan. For large private firms (50 or more employees) that offer health insurance, 57.1% self-fund at least one health plan.

**Individual Market Insurance**
Approximately 5.7% of Oklahoma residents are enrolled in the individual market (2022 data). In 2023, 203,157 Oklahomans selected a plan through the Affordable Care Act Marketplace, which in Oklahoma is run by the federal government. It is more challenging to ascertain enrollment numbers for off-Marketplace individual market enrollment.

Individual market health insurance (both on- and off-Marketplace) is regulated in Oklahoma by the Oklahoma Insurance Department, which conducts oversight to ensure compliance with state health insurance laws.

**Military Coverage**
Some Oklahoma residents are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers 2%, or 77,000 residents.

**The Uninsured**
Approximately 11.9%, or 463,300 Oklahoma residents are uninsured (2022 data). Oklahoma has the 15th highest uninsured rate in the country. Among non-elderly populations, people of color in Oklahoma generally are more likely to be uninsured than White Oklahomans. Hispanic Oklahomans have the highest uninsured rates (24.4%), followed by American Indians/Alaska Native Oklahomans (23.5%), Mixed race Oklahomans (14.2%), and Black Oklahomans (13.4%). White Oklahomans have an uninsured rate of 10.8%.

Lack of insurance is also highly correlated with income. Of the nonelderly population, approximately 20% of people under 100% FPL are uninsured, while only 6.6% of people at or above 400% are uninsured.
State Regulators: Oklahoma

CMS is responsible for the oversight of Medicare Advantage plans. The CMS Regional Office for Oklahoma is based in Dallas, TX. Media inquiries may be submitted here.

Oklahoma Insurance Department (OID)
The Oklahoma Department of Insurance (OID) regulates the business of insurance in the state. However, OID has informed the federal government that it cannot or will not enforce either the Affordable Care Act (ACA) or No Surprises Act (NSA) and only partially enforces the Mental Health Parity and Addiction Equity Act (MHPAEA). CMS therefore enforces the ACA’s insurance reform provisions and the NSA’s balance billing protections in Oklahoma, and has a collaborative enforcement agreement with the state to enforce MHPAEA.

Under state insurance laws, the OID is responsible for:

- **Licensure:** Insurers operating in the state must demonstrate that they are financially solvent and capable of paying claims. After initial licensure, companies must file financial information with the Licensing and Education Division. A list of licensed insurance companies is available here.

- **Form review:** The OID reviews health insurers’ contracts and covered benefits to ensure that they comport with state standards.

- **Rate review:** Oklahoma is one of two states that federal regulators have found does not have an “effective rate review” program. Information about how CMS determines whether a state has an effective program is available here.

- **Marketing:** The Oklahoma Insurance Department is responsible for oversight of insurers’ marketing tactics and discouraging unfair or deceptive tactics. The agency also licenses and conducts oversight of insurance agents and brokers. A searchable database of licensed agents and brokers is available here.

- **Enforcement:** The Oklahoma Insurance Department has authority to enforce state insurance laws. Enforcement tools can range from requesting a corrective action, issuing a cease-and-desist order, imposing fines, or seeking an injunction. OID releases statements on market conduct examinations here.

- **Appeals:** Under the Affordable Care Act, health insurers must provide enrollees with an internal review of adverse benefit determination, and enrollees have the right to an external and independent appeal. OID operates the state’s external review system and consumers can request an external review with this form.
Oklahoma Health Care Authority (OHCA)
Oklahoma’s Department of Health (OHCA) runs the state’s Medicaid and CHIP programs, and manages the contracts with the managed care organizations (MCOs) that deliver Medicaid and CHIP benefits via SoonerSelect. A list of participating MCOs is available [here](#) and enrollment reports by county are available [here](#).

OHCA can conduct an enforcement action against an MCO if it fails to meet its contract obligations. Enforcement actions can include requiring the MCO to pay damages or to implement a corrective action plan. The agency can also suspend all or part of new member enrollments or suspend or terminate the MCO’s contract.

Oklahoma Attorney General’s Office
The Oklahoma Attorney General represents the state in court when there is an action against an insurance company, entity, or individuals engaged in potentially fraudulent activity. The Attorney General’s office accepts complaints from consumers about deceptive or unlawful business practices. Information on agency contacts for consumer complaints can be found [here](#).

Other Sources of Information
Health Insurance Navigators, Agents and Brokers (collectively, “consumer assisters”)
Although Oklahoma’s health insurance Marketplace is run by the federal government, CMS provides grants to local organizations called “Navigators” that are tasked with assisting consumers determine eligibility for subsidized coverage programs and helping them with post-enrollment questions. Oklahoma-based health insurance agents and brokers perform similar consumer assistance functions, and are generally paid on a commission basis. These consumer assisters can be helpful sources of information about health insurance and the challenges consumers face. They can be located through the “Find Local Help” search portal on HealthCare.gov.

The Oklahoma Insurance Department also provides an [FAQ](#) document for Oklahomans searching for consumer assistance.