



Frequently Asked Questions (FAQs)

Oklahoma Insurance Department's Transition to a State-Based Exchange

Below are FAQs for more information regarding Oklahoma Insurance Department's transition from the Federally-facilitated Exchange (FFE) to a State-based Exchange (SBE).

1. Why is the State transitioning from the Federally-facilitated Exchange to a State-based Exchange?

Oklahoma's launch of a State-based Exchange (SBE) is a part of an effort to retain Oklahoma dollars, enhance the consumer experience, and drive local market growth. The State intends to reinvest proceeds generated from the SBE to strengthen market stability, reduce premiums, and support consumer choice and the unique needs of Oklahomans.

2. When is Oklahoma transitioning to a State-based Exchange?

First, Oklahoma will function as a State-based Exchange on the Federal Platform (SBE-FP), with a target transition date set for May 1, 2026. Oklahoma will operate as an SBE-FP for the remainder of the 2026 plan year and the full 2027 plan year. Then, Oklahoma is scheduled to go live with a State-based Exchange (SBE) on November 1, 2027, for the 2028 Open Enrollment Period.

3. What is the difference between operating on the Federally-facilitated Exchange, a State-based Exchange on the Federal Platform, and a State-based Exchange?

As part of the Federally-facilitated Exchange (FFE), consumers enroll in qualified health plans on HealthCare.gov. The federal government conducts all program activities and has oversight over the health plans offered to consumers.

As a State-based Exchange on the Federal Platform (SBE-FP), consumers continue to enroll in coverage through the federal platform (HealthCare.gov). Oklahoma will manage public engagement and awareness, community assister programs, health plan management, and a hotline to help consumers.

As a State-based Exchange (SBE), Oklahoma will manage all Exchange operations, including the eligibility and enrollment system, contact center, and agent certification program, while continuing the functions it performs as an SBE-FP.

4. How can Oklahomans get health coverage for Open Enrollment 2027?

Oklahomans can continue to shop for and enroll in available coverage through the federal platform (HealthCare.gov) for 2026 and 2027 coverage.

5. What is changing for the rest of Plan Year 2026 and for Plan Year 2027?

There are no immediate changes in how Oklahomans shop for or enroll in coverage. Behind the scenes, ownership of various program activities is transitioning from the Centers for Medicare and Medicaid Services (CMS) to the Oklahoma Insurance Department, including user fee collection, health plan management, community assister programs, marketing, and hotline support. Beginning in Spring 2026, consumers will be able to use a tool on OID's website that allows them to look for local help navigating the enrollment process.

6. What is a Section 1332 State Innovation Waiver?

A Section 1332 State Innovation Waiver is a federal option that allows a state to waive certain Affordable Care Act (ACA) Exchange provisions to better meet local needs, while still ensuring people have access to comprehensive, affordable coverage. Oklahoma House Bill 1512 permits OID to submit a Section 1332 Waiver application to the federal government. These efforts aim to lower premium costs and offer more insurance options for Oklahomans.