

1 ENGROSSED SENATE AMENDMENT
TO

2 ENGROSSED HOUSE
3 BILL NO. 1712

By: Marti and McDugle of the
House

4 and

5 Garvin of the Senate

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8 An Act relating to health insurance; defining terms;
9 prohibiting insurers from refusing coverage to an
10 insured under certain circumstances; providing for an
11 insured to seek care from an out-of-network provider
12 under certain circumstances; requiring out-of-network
13 providers to be reimbursed for covered services at
14 the same rate as in-network providers; providing for
15 codification; and declaring an emergency.

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18 AMENDMENT NO. 1. Page 1, strike the title, enacting clause and
19 entire bill and insert

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22 "An Act relating to health insurance; defining terms;
23 prohibiting insurers from refusing coverage to an
24 insured under certain circumstances; providing for an
insured to seek care from an out-of-network provider
under certain circumstances; requiring out-of-network
providers to be reimbursed for covered services at
the same rate as in-network providers; providing for
codification; and declaring an emergency.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

1 SECTION 1. NEW LAW A new section of law to be codified
2 in the Oklahoma Statutes as Section 6981 of Title 36, unless there
3 is created a duplication in numbering, reads as follows:

4 A. As used in this section:

5 1. "Durable medical equipment" means equipment as defined
6 pursuant to Section 375.2 of Title 59 of the Oklahoma Statutes;

7 2. "Health benefit plan" means a health benefit plan as defined
8 pursuant to Section 6060.4 of Title 36 of the Oklahoma Statutes, but
9 shall not include any health benefit plan offered by a contracted
10 entity as defined in Section 4002.2 of Title 56 of the Oklahoma
11 Statutes that provides coverage to members of the state Medicaid
12 program;

13 3. "Health care provider" means a provider as defined pursuant
14 to Section 6571 of Title 36 of the Oklahoma Statutes;

15 4. "Health maintenance organization" or "HMO" means a health
16 maintenance organization as defined pursuant to Section 6902 of
17 Title 36 of the Oklahoma Statutes, but shall not include any health
18 benefit plan offered by a contracted entity as defined in Section
19 4002.2 of Title 56 of the Oklahoma Statutes that provides coverage
20 to members of the state Medicaid program; and

21 5. "Preferred provider organization" or "PPO" means a preferred
22 provider organization as defined pursuant to Section 6054 of Title
23 36 of the Oklahoma Statutes.

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1 B. No health benefit plan, HMO, PPO, or other provider network
2 authorized to administer health care coverage in this state shall
3 refuse coverage to an insured for durable medical equipment and
4 supplies as prescribed by a health care provider, regardless of
5 whether they are in-network or out-of-network, unless there is an
6 Oklahoma-licensed in-network provider within a fifteen-mile radius
7 of the patient's home address that can provide in-person evaluation
8 for durable medical equipment, supplies, and related services.

9 C. If a health care provider deems it necessary that an insured
10 receive covered durable medical equipment or supplies within twenty-
11 four (24) hours, the insured shall not be subject to drop-shipped
12 orders and may seek such equipment and supplies from any health care
13 provider who can provide the necessary services and supplies within
14 the requested time frame.

15 D. When an insured utilizes an out-of-network health care
16 provider, as described in subsection B of this section, the out-of-
17 network provider shall be reimbursed at the same rate and benefit
18 level for the provided services as an in-network provider for the
19 health benefit plan, HMO, PPO, or other provider network authorized
20 to administer health care coverage in this state.

21 SECTION 2. It being immediately necessary for the preservation
22 of the public peace, health or safety, an emergency is hereby
23 declared to exist, by reason whereof this act shall take effect and
24 be in full force from and after its passage and approval."

1 Passed the Senate the 19th day of March, 2024.

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3 _____
4 Presiding Officer of the Senate

5 Passed the House of Representatives the ____ day of _____,
6 2024.

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8 _____
9 Presiding Officer of the House
10 of Representatives

1 ENGROSSED HOUSE
2 BILL NO. 1712

By: Marti and McDugle of the
House

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8 An Act relating to health insurance; defining terms;
9 prohibiting insurers from refusing coverage to an
10 insured under certain circumstances; providing for an
11 insured to seek care from an out-of-network provider
12 under certain circumstances; requiring out-of-network
13 providers to be reimbursed for covered services at
14 the same rate as in-network providers; providing for
15 codification; and declaring an emergency.

16 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

17 SECTION 3. NEW LAW A new section of law to be codified
18 in the Oklahoma Statutes as Section 6971 of Title 36, unless there
19 is created a duplication in numbering, reads as follows:

20 A. As used in this section:

21 1. "Durable medical equipment" means equipment as defined
22 pursuant to paragraph 2 of Section 375.2 of Title 59 of the Oklahoma
23 Statutes;

24 2. "Health benefit plan" means a health benefit plan as defined
pursuant to subsection C of Section 6060.4 of Title 36 of the
Oklahoma Statutes;

1 3. "Health care provider" means a provider as defined pursuant
2 to Section 6571 of Title 36 of the Oklahoma Statutes;

3 4. "Health maintenance organization" or "HMO" means a health
4 maintenance organization as defined pursuant to paragraph 12 of
5 Section 6902 of Title 36 of the Oklahoma Statutes; and

6 5. "Preferred provider organization" or "PPO" means a preferred
7 provider organization as defined pursuant to paragraph 8 of Section
8 6054 of Title 36 of the Oklahoma Statutes.

9 B. No health benefit plan, HMO, PPO, or other provider network
10 authorized to administer health care coverage in this state shall
11 refuse coverage to an insured for durable medical equipment and
12 supplies as prescribed by a health care provider, regardless of
13 whether they are in-network or out-of-network, unless there is an
14 Oklahoma-licensed in-network provider within a fifteen-mile radius
15 of the patient's five-digit ZIP code that can provide in-person
16 evaluation for medical equipment, supplies, and related services.

17 C. If a health care provider deems it necessary that an insured
18 receive covered medical equipment or supplies within twenty-four
19 (24) hours, the insured shall not be subject to drop-shipped orders
20 and may seek such equipment and supplies from any health care
21 provider who can provide the necessary services and supplies within
22 the requested timeframe.

23 D. When an insured utilizes an out-of-network health care
24 provider, as described in subsection B of this section, the out-of-

1 network provider shall be reimbursed at the same rate and benefit
2 level for the provided services as an in-network provider for the
3 health benefit plan, HMO, PPO, or other provider network authorized
4 to administer health care coverage in this state.

5 SECTION 4. It being immediately necessary for the preservation
6 of the public peace, health or safety, an emergency is hereby
7 declared to exist, by reason whereof this act shall take effect and
8 be in full force from and after its passage and approval.

9 Passed the House of Representatives the 20th day of March, 2023.

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11 _____
12 Presiding Officer of the House
13 of Representatives

14 Passed the Senate the ___ day of _____, 2023.

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16 _____
17 Presiding Officer of the Senate
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