1 ENGROSSED HOUSE AMENDMENT ТΟ 2 ENGROSSED SENATE BILL NO. 804 By: Standridge of the Senate 3 and 4 Coody (Jeff) of the House 5 6 7 An Act relating to vision plans; amending 74 O.S 2011, Section 1374, as amended by Section 982, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2014, Section 8 1374), which relates to visions plans; updating 9 vision plan year; modifying certain responsibility required of Office of Management and Enterprise 10 Services; requiring certain plan providers to provide requested information; modifying criteria of eligible plans; conforming language; modifying certain 11 certification or licensing requirements; requiring vision plan of certain vendors be offered; defining 12 term; authorizing selection of out-of-state vendors 1.3 under certain circumstances; providing an effective date; and declaring an emergency. 14 15 16 NOTE: Emergency failed 17 AMENDMENT NO. 1. Strike the title, enacting clause and entire bill and insert 18 19 "An Act relating to vision plans; amending 74 O.S. 2011, Section 1374, as amended by Section 982, 20 Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2014, Section 1374), which relates to the Oklahoma State 21 Employees Benefits Act; updating vision plan year; modifying responsibility of the Office of Management 22 and Enterprise Services to offer vision plans; requiring providers of plan to submit requested 23 information; modifying criteria of eligible companies; specifying administrative fees imposed by 24 the Office of Management and Enterprise Services be

1 applied to certain plans; directing certain number of Oklahoma-based and out-of-state vision care 2 benefits companies be offered for enrollment; and defining term. 3 4 5 6 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA: 7 SECTION 1. 74 O.S. 2011, Section 1374, as AMENDATORY amended by Section 982, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 8 9 2014, Section 1374), is amended to read as follows: 10 Section 1374. A. For the plan year beginning January 1, 2005 11 2017, and for each year thereafter, it shall be the fiduciary 12 responsibility of the Office of Management and Enterprise Services 13 to ensure that participants have the option to choose which vision 14 plan best meets their individual needs by offering every vision plan 15 that notifies the Office of its desire to participate offer vision 16 plans to participants during the open enrollment period. Providers 17 of plans eligible for selection shall submit information requested 18 by the Office of Management and Enterprise Services no later than 19 July 1 of each year and meets or exceeds. Plans eligible for 20 selection shall meet or exceed the following criteria: 21 1. Has in place a statewide network of at least one hundred 22 fifty providers. "Providers", for purposes of this section, means

Optometrists (OD), Ophthalmologists (MD), and Ophthalmologists (DO)

which shall be counted once regardless of the number of locations

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where they may practice. Optical shops and retail optical locations shall not be listed as providers. The company offering the vision plan must have a direct relationship with each provider on its panel, and may not lease, borrow, or otherwise obtain use of a provider panel from another company. This would not prevent a company from offering their its plan through one corporate entity and administering the plan or provider panel through another legal entity of the same organization so long as the entity receiving premiums remains legally responsible for the payment of benefits. Providers must be actively engaged in providing the services offered under the vision plan they represent;

- 2. Has operated in Oklahoma for at least five (5) years;

  provided, that an immediately prior operation in Oklahoma of a

  nonsurviving corporation that merges into an affiliated corporation

  shall be counted in determining whether the surviving corporation

  has operated a plan in Oklahoma for five (5) years;
- 3. Is properly licensed, registered, certified or authorized to operate its business in this state by the Insurance Department, certified by the State Department of Health, or licensed as a third-party administrator by the Insurance Department. Vision plans must be offered by the company administering the plan, not by an agent or third party. A company shall offer only one vision plan and rate schedule for each plan year;

- 4. Presents accurate product information in a reproducible format not to exceed two pages; and
- 5. Vision plans must provide an examination, frames and lenses, and/or contact lenses and some form of indemnified payment to the contracted providers for each component of the benefits, i.e., the exam, frames and lenses and/or contact lenses. This does not eliminate discounted supplementary benefits under a qualified plan, so long as such benefits pertain to vision care.
- B. Any administrative fees imposed by the Oklahoma Employees

  Insurance and Benefits Board Office of Management and Enterprise

  Services shall be applied equally to all qualified vision plans.

  There shall be no additional requirements imposed on a vision plan other than the proper licensing or, certification or authorization to operate its business by the appropriate state agency Oklahoma

  Insurance Department.
- C. No more than two Oklahoma-based vision care benefits

  companies that meet the criteria as specified in subsection A of

  this section and no more than two out-of-state vision care benefits

  companies that meet the criteria as specified in subsection A of

  this section shall be offered as vendors for enrollment in any state

  employee benefit offering. For purposes of this subsection, an

  "Oklahoma-based vision care benefits company" shall be defined as

  follows:

1	1. A vision care benefits company that has a home office,
2	customer service and administration located within the State of
3	Oklahoma and is subject to Oklahoma state income taxes; or
4	2. A vision care benefits company that has a majority of
5	ownership interest held either directly or indirectly by residents
6	of the State of Oklahoma and is subject to Oklahoma state income
7	taxes."
8	Passed the House of Representatives the 21st day of April, 2016.
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11	Presiding Officer of the House of Representatives
12	Representatives
13	Passed the Senate the day of, 2016.
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16	Presiding Officer of the Senate
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1 ENGROSSED SENATE BILL NO. 804 By: Standridge of the Senate 2 and 3 Coody (Jeff) of the House 4 5 6 An Act relating to vision plans; amending 74 O.S 2011, Section 1374, as amended by Section 982, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2014, Section 7 1374), which relates to visions plans; updating vision plan year; modifying certain responsibility 8 required of Office of Management and Enterprise 9 Services; requiring certain plan providers to provide requested information; modifying criteria of eligible plans; conforming language; modifying certain 10 certification or licensing requirements; requiring vision plan of certain vendors be offered; defining 11 term; authorizing selection of out-of-state vendors 12 under certain circumstances; providing an effective date; and declaring an emergency. 13 14 15 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA: SECTION 2. 74 O.S. 2011, Section 1374, as 16 AMENDATORY amended by Section 982, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 17 2014, Section 1374), is amended to read as follows: 18 Section 1374. For the plan year beginning January 1, 2005 2016, 19 and for each year thereafter, it shall be the fiduciary 20 responsibility of the Office of Management and Enterprise Services 21 to ensure that participants have the option to choose which vision 22 plan best meets their individual needs by offering every vision plan 23 that notifies the Office of its desire to participate offer a vision 24

- plan or plans to state employees and retirees during the open
  enrollment period. Providers of plans eligible for selection shall
  submit information requested by the Office of Management and
  Enterprise Services no later than July 1 of each year and meets or
  exceeds. Plans eligible for selection shall meet or exceed the
  following criteria:
  - 1. Has in place a statewide network of at least one hundred fifty providers. "Providers", for purposes of this section, means Optometrists (OD), Ophthalmologists (MD), and Ophthalmologists (DO) which shall be counted once regardless of the number of locations where they may practice. Optical shops and retail optical locations shall not be listed as providers. The company offering the vision plan must have a direct relationship with each provider on its panel, and may not lease, borrow, or otherwise obtain use of a provider panel from another company. This would not prevent a company from offering their its plan through one corporate entity and administering the plan or provider panel through another legal entity of the same organization so long as the entity receiving premiums remains legally responsible for the payment of benefits. Providers must be actively engaged in providing the services offered under the vision plan they represent;
    - 2. Has operated in Oklahoma for at least five (5) years;
  - 3. Is properly licensed, registered, certified or authorized to operate its business in this state by the Insurance Department,

- certified by the State Department of Health, or licensed as a thirdparty administrator by the Insurance Department. Vision plans must
  be offered by the company administering the plan, not by an agent or
  third party. A company shall offer only one vision plan and rate
  schedule for each plan year;
  - 4. Presents accurate product information in a reproducible format not to exceed two pages; and
  - 5. Vision plans must provide an examination, frames and lenses, and/or contact lenses and some form of indemnified payment to the contracted providers for each component of the benefits, i.e., the exam, frames and lenses and/or contact lenses. This does not eliminate discounted supplementary benefits under a qualified plan, so long as such benefits pertain to vision care.

Any administrative fees imposed by the Oklahoma Employees

Insurance and Benefits Board shall be applied equally to all

qualified vision plans. There shall be no additional requirements

imposed on a vision plan other than the proper licensing, er

certification or authorization to operate its business by the

appropriate state agency Oklahoma Insurance Department. Any

Oklahoma-based vendor who meets the criteria as specified herein

shall be offered for enrollment in any state employee benefit

offering. For purposes of this paragraph, an "Oklahoma-based

vendor" shall be defined as a vision care benefit company whose home

office, customer service, and administration are located within this

1	state and is subject to Oklahoma state income taxes. The Office of
2	Management and Enterprise Services may at its discretion select up
3	to one out-of-state vision care benefits company as an offered
4	vendor, provided it meets the criteria specified herein.
5	SECTION 3. This act shall become effective July 1, 2015.
6	SECTION 4. It being immediately necessary for the preservation
7	of the public peace, health and safety, an emergency is hereby
8	declared to exist, by reason whereof this act shall take effect and
9	be in full force from and after its passage and approval.
LO	Passed the Senate the 3rd day of March, 2015.
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L2	Presiding Officer of the Senate
13	riesiding Officer of the Senate
L 4	Passed the House of Representatives the day of,
15	2015.
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L7	Presiding Officer of the House
18	of Representatives
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