SB1323 FA1 McEntireMa-MJ(Untimely Filed) 4/21/2022 4:17:08 pm

FLOOR AMENDMENT

HOUSE OF REPRESENTATIVES State of Oklahoma

SPEAKER:

CHAIR:

I move to amend <u>SB1323</u> Of the printed Bill Page Section Lines Of the Engrossed Bill

By striking the Title, the Enacting Clause, the entire bill, and by inserting in lieu thereof the following language:

AMEND TITLE TO CONFORM TO AMENDMENTS

Amendment submitted by: Marcus McEntire

Adopted: _____

Reading Clerk

1	STATE OF OKLAHOMA
2	2nd Session of the 58th Legislature (2022)
3	FLOOR SUBSTITUTE FOR ENGROSSED
4	SENATE BILL NO. 1323 By: Garvin of the Senate
5	and
6	McEntire of the House
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9	FLOOR SUBSTITUTE
10	An Act relating to the state Medicaid program; authorizing Insurance Department to recognize certain
11	self-funded or self-insured health care plan as health care plan under specified conditions; amending
12	56 O.S. 2021, Section 1010.1, which relates to premium assistance program; allowing certain self-
13	funded or self-insured health care plan to participate in premium assistance program under
14	specified conditions; updating statutory language;
15	updating statutory reference; providing for codification; and providing an effective date.
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18	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
19	SECTION 1. NEW LAW A new section of law to be codified
20	in the Oklahoma Statutes as Section 6012 of Title 36, unless there
21	is created a duplication in numbering, reads as follows:
22	A health care plan recognized by the Insurance Department that
23	participates in the premium assistance program created under Section
24	1010.1 of Title 56 of the Oklahoma Statutes as of the effective date

1 of this act that at a later date becomes a self-funded or self-2 insured health care plan may continue to be recognized by the Insurance Department as a health care plan if such plan meets the 3 requirements under subsection J of Section 1010.1 of Title 56 of the 4 5 Oklahoma Statutes. The health care plan shall only be considered a health care plan for the exclusive purposes of the premium 6 assistance program created under Section 1010.1 of Title 56 of the 7 Oklahoma Statutes. 8

9 SECTION 2. AMENDATORY 56 O.S. 2021, Section 1010.1, is 10 amended to read as follows:

Section 1010.1. A. Section 1010.1 et seq. of this title shall be known and may be cited as the "Oklahoma Medicaid Program Reform Act of 2003".

Recognizing that many Oklahomans do not have health care 14 Β. benefits or health care coverage, that many small businesses cannot 15 afford to provide health care benefits to their employees, and that, 16 17 under federal law, barriers exist to providing Medicaid benefits to the uninsured, the Oklahoma Legislature hereby establishes 18 provisions to lower the number of uninsured, assist businesses in 19 their ability to afford health care benefits and coverage for their 20 employees, and eliminate barriers to providing health coverage to 21 eligible enrollees under federal law. 22

C. Unless otherwise provided by law, the Oklahoma Health CareAuthority shall provide coverage under the state Medicaid program to

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1 children under the age of eighteen (18) years whose family incomes 2 do not exceed one hundred eighty-five percent (185%) of the federal 3 poverty level.

The Authority is directed to apply for a waiver or 4 D. 1. 5 waivers to the Centers for Medicaid Medicare and Medicare Medicaid Services (CMS) that will accomplish the purposes outlined in 6 subsection B of this section. The Authority is further directed to 7 negotiate with CMS to include in the waiver authority provisions to: 8 9 a. increase access to health care for Oklahomans, reform the Oklahoma Medicaid Program to promote 10 b. personal responsibility for health care services and 11 12 appropriate utilization of health care benefits through the use of public-private cost sharing, 13 enable small employers, and/or employed, uninsured с. 14 adults with or without children to purchase employer-15 sponsored, state-approved private, or state-sponsored 16 health care coverage through a state premium 17 assistance payment plan. If by January 1, 2012, the 18 Employer/Employee Partnership for Insurance Coverage 19 Premium Assistance Program is not consuming more than 20 seventy-five percent (75%) of its dedicated source of 21 funding, then the program will be expanded to include 22 parents of children eligible for Medicaid, and 23

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 d. develop flexible health care benefit packages based upon patient need and cost.

3 2. The Authority may phase in any waiver or waivers it receives4 based upon available funding.

3. The Authority is authorized to develop and implement a
premium assistance plan to assist small businesses and/or their
eligible employees to purchase employer-sponsored insurance or "buyin" to a state-sponsored benefit plan.

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 4. a. The Authority is authorized to seek from the Centers
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 10 for Medicare and Medicaid Services any waivers or
 11 amendments to existing waivers necessary to accomplish
 12 an expansion of the premium assistance program to:
 13 (1) include for-profit employers with two hundred
- 14 fifty employees or less up to any level supported 15 by existing funding resources, and
- 16 (2) include not-for-profit employers with five
 17 hundred employees or less up to any level
 18 supported by existing funding resources.
- b. Foster parents employed by employers with greater than
 two hundred fifty employees shall be exempt from the
 qualifying employer requirement provided for in this
 paragraph and shall be eligible to qualify for the
 premium assistance program provided for in this
 section if supported by existing funding.

E. For purposes of this paragraph, "for-profit employer" shall mean an entity which is not exempt from taxation pursuant to the provisions of Section 501(c)(3) of the Internal Revenue Code and "not-for-profit employer" shall mean an entity which is exempt from taxation pursuant to the provisions of Section 501(c)(3) of the Internal Revenue Code.

F. The Authority is authorized to seek from the Centers for
Medicare and Medicaid Services any waivers or amendments to existing
waivers necessary to accomplish an extension of the premium
assistance program to include qualified employees whose family
income does not exceed two hundred fifty percent (250%) of the
federal poverty level, subject to the limit of federal financial
participation.

G. The Authority is authorized to create as part of the premium assistance program an option to purchase a high-deductible health insurance plan that is compatible with a health savings account.

H. 1. There is hereby created in the State Treasury a
revolving fund to be designated the "Health Employee and Economy
Improvement Act (HEEIA) Revolving Fund".

20 2. The fund shall be a continuing fund, not subject to fiscal
 21 year limitations, and shall consist of:

a. all monies received by the Authority pursuant to this
 section and otherwise specified or authorized by law,

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- b. monies received by the Authority due to federal
 financial participation pursuant to Title XIX of the
 Social Security Act, and
- 4 c. interest attributable to investment of money in the5 fund.

3. All monies accruing to the credit of the fund are hereby
appropriated and shall be budgeted and expended by the Authority to
implement a premium assistance plan and to fund the state share for
the Oklahoma Medicaid program on or after the effective date of this
act July 1, 2020, unless otherwise provided by law.

I. 1. The Authority shall establish a procedure for verifying an applicant's individual income by utilizing available Oklahoma Tax Commission records, new hire report data collected by the Oklahoma Employment Security Commission, and child support payment data collected by the Department of Human Services in accordance with federal and state law.

The Oklahoma Tax Commission, Oklahoma Employment Security
 Commission, and Department of Human Services shall cooperate in
 accordance with federal and state law with the Authority to
 establish procedures for the secure electronic transmission of an
 applicant's individual income data to the Authority.

3. The Department of Public Safety shall cooperate inaccordance with federal and state law with the Authority to

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1	establish procedures for the secure electronic transmission of an
2	applicant's individual identification data to the Authority.
3	J. A health care plan participating in the premium assistance
4	program created under this section as of the effective date of this
5	act that at a later date becomes a self-funded or self-insured
6	health care plan may continue to participate in the premium
7	assistance program if:
8	1. The health care plan has continuously participated in the
9	premium assistance program without interruption up to the date it
10	becomes a self-funded or self-insured health care plan;
11	2. The self-funded or self-insured health care plan continues
12	to be recognized as a health care plan by the Insurance Department
13	under Section 1 of this act;
14	3. The self-funded or self-insured health care plan continues
15	to cover all essential health benefits as required by the Centers
16	for Medicare and Medicaid Services; and
17	4. The Authority receives the necessary federal approval for
18	self-funded or self-insured health care plans to participate in the
19	premium assistance program.
20	SECTION 3. This act shall become effective November 1, 2022.
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