

COMMITTEE AMENDMENT
HOUSE OF REPRESENTATIVES
State of Oklahoma

SPEAKER:

CHAIR:

I move to amend HB1522 _____
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

Adopted: _____

Amendment submitted by: Lonnie Sims

Reading Clerk

STATE OF OKLAHOMA

2nd Session of the 59th Legislature (2024)

PROPOSED COMMITTEE
SUBSTITUTE
FOR
HOUSE BILL NO. 1522

By: Sims

PROPOSED COMMITTEE SUBSTITUTE

An Act relating to insurance; amending Sections 1, 2, and 3, Chapter 151, O.S.L. 2022 (36 O.S. Supp. 2023, Sections 6060.40, 6060.41, and 6060.42), which relate to short title definitions and shared savings incentive programs; modifying short title; modifying definitions; requiring an insurer to provide a shared savings incentive program; modifying requirements and inclusions within program; and providing an effective date.

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

SECTION 1. AMENDATORY Section 1, Chapter 151, O.S.L. 2022 (36 O.S. Supp. 2023, Section 6060.40), is amended to read as follows:

Section 6060.40 This act shall be known and may be cited as the "~~Oklahoma Right to Shop~~ Consumer Health Choice Empowerment Act".

SECTION 2. AMENDATORY Section 2, Chapter 151, O.S.L. 2022 (36 O.S. Supp. 2023, Section 6060.41), is amended to read as follows:

1 Section 6060.41 As used in the ~~Oklahoma Right to Shop~~ Consumer
2 Health Choice Empowerment Act:

3 1. "Allowed amount" means the contractually agreed-upon amount
4 paid by a carrier to a health care entity participating in the
5 network of the carrier;

6 2. "Average allowed amount" means the mean of all allowed
7 amounts paid for a comparable health care service;

8 3. "Comparable health care service" means any covered
9 nonemergency health care service or bundle of services. ~~The~~
10 ~~Insurance Commissioner may limit what is considered a comparable~~
11 ~~health care service if an insurance carrier can demonstrate allowed~~
12 ~~amount variation among network providers is less than Fifty Dollars~~
13 ~~(\$50.00);~~

14 ~~3.~~ 4. "Health benefit plan" means any plan as defined in
15 subsection C of Section 6060.4 of ~~Title 36 of the Oklahoma Statutes~~
16 this title;

17 ~~4.~~ 5. "Insurance carrier" or "carrier" means an insurance
18 company that issues policies of accident and health insurance and is
19 licensed to sell insurance in this state;

20 ~~5.~~ 6. "Shared savings incentive" means a ~~voluntary and optional~~
21 financial incentive that an insurance carrier ~~may~~ shall provide to
22 an enrollee for choosing certain health care services under a shared
23 savings incentive program; and

1 ~~6.~~ 7. "Shared savings incentive program" means ~~a voluntary and~~
2 ~~optional~~ an incentive program established by an insurance carrier
3 pursuant to ~~this act~~ the Consumer Health Choice Empowerment Act.

4 SECTION 3. AMENDATORY Section 3, Chapter 151, O.S.L.
5 2022 (36 O.S. Supp. 2023, Section 6060.42), is amended to read as
6 follows:

7 Section 6060.42 A. An insurance carrier ~~may~~ shall offer a
8 shared savings incentive program to provide incentives to an
9 enrollee when the enrollee obtains a comparable health care service
10 that is covered by the carrier from providers that charge less than
11 the average allowed amount paid by that carrier to network providers
12 for that, comparable health care service. If the allowed amount of
13 a provider is less than the average allowed amount paid by the
14 carrier, the provider shall not participate in the shared savings
15 incentive program unless the provider agrees to accept an amount
16 less than the allowed amount.

17 B. If an enrollee of a health benefit plan elects to receive a
18 covered comparable health care service from a provider who is not
19 participating in the network of the carrier and agrees to accept an
20 amount less than the average allowed amount, the carrier shall
21 ensure that:

22 1. The financial liability of the enrollee is no greater than
23 the in-network deductible, copay, and coinsurance amounts as
24 dictated in the health benefit plan contract; and

1 2. Calculation of coinsurance liability is based on the amount
2 negotiated by the enrollee and his or her provider, provided that it
3 is an amount less than the average allowed amount.

4 C. Incentives ~~may~~ shall be calculated as a percentage of the
5 difference in allowed amounts to the average, ~~as a flat dollar~~
6 ~~amount, or by any other reasonable methodology approved by the~~
7 ~~Insurance Department~~ allowed amount paid by a carrier for a
8 comparable health care service. If an enrollee elects to receive a
9 covered comparable health care service from a provider who is not
10 participating in the network of the carrier, the incentive shall be
11 calculated as a percentage of the difference in the average allowed
12 amount to the amount agreed upon between the enrollee and provider,
13 provided that the amount is less than the average allowed amount.

14 The carrier shall provide the incentive as a cash payment to the
15 enrollee or credit toward the annual in-network deductible and out-
16 of-pocket limit of the enrollee. Carriers may allow enrollees to
17 select which method the enrollee prefers to receive the incentive.

18 ~~C. D.~~ D. An insurance carrier ~~that offers a shared savings~~
19 ~~incentive program~~ shall:

20 1. Establish the program as a component part of the policy or
21 certificate of insurance provided by the carrier and notify the
22 enrollees and the Insurance Department at least thirty (30) days
23 before program termination;

1 2. File a description of the program on a form prescribed by
2 the Insurance Commissioner. The Insurance Department shall review
3 the filing and determine whether the program complies with the
4 provisions of this section;

5 3. Notify an enrollee, annually or at the time of renewal, of
6 the availability of the shared savings incentive program and the
7 procedures to participate in the program;

8 4. Publish on the website of the insurance carrier, easily
9 accessible to enrollees and applicants for insurance, a list of
10 comparable health care services and health care providers and the
11 shared savings incentive amount applicable for each service. A
12 shared savings incentive shall not be less than twenty-five percent
13 (25%) of the savings generated by the participation of the enrollee
14 in any shared savings incentive program offered by the insurance
15 carrier. The baseline for the savings calculation shall be the
16 average in-network amount paid for that service in the most recent
17 twelve-month period ~~or any other methodology established by the~~
18 ~~insurance carrier and approved by the Insurance Department;~~

19 5. Upon request by an enrollee, provide the average allowed
20 amount for a covered comparable health care service;

21 6. At least quarterly, credit, deposit or make a cash payment
22 to an enrollee of the shared savings incentive amount pursuant to
23 participation in the shared savings incentive program; and
24

1 ~~6.~~ 7. Submit an annual report to the Insurance Department
2 within ninety (90) days after the close of each health benefit plan
3 year. At a minimum, the report shall include the following
4 information:

- 5 a. the number of enrollees who participated in the
6 program during the health benefit plan year and the
7 number of instances of participation,
- 8 b. the total cost of services provided as a part of the
9 program, and
- 10 c. the total value of the shared savings incentive
11 payments made to enrollees participating in the
12 program and the values distributed as cash or credit
13 toward the annual in-network deductible and out-of-
14 pocket limit of an enrollee.

15 ~~D.~~ E. An enrollee shall not be required to participate in a
16 shared savings incentive program.

17 SECTION 3. This act shall become effective November 1, 2024.

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