

**BILL SUMMARY**  
2<sup>nd</sup> Session of the 59<sup>th</sup> Legislature

<b>Bill No.:</b>	<b>HB 1522</b>
<b>Version:</b>	<b>CCS</b>
<b>Request Number:</b>	<b>11119</b>
<b>Author:</b>	<b>Rep. Sims</b>
<b>Date:</b>	<b>5/23/2024</b>
<b>Impact:</b>	<b>\$0</b>

**Research Analysis**

The conference committee substitute for HB 1522 requires insurance carriers to offer shared savings incentives to policyholders who choose healthcare providers in counties smaller than 500,000 people that charge less than the average allowed amount of the carriers' network providers for the same service. If the allowed amount of a provider is less than the average allowed amount paid by the carrier, the provider cannot participate in the incentive program unless the provider agrees to accept less than the allowed amount. If a policyholder chooses a provider outside of the carrier's network and agrees to pay less than the average amount, the carrier must ensure that the policyholder's financial responsibility is no greater than what they would pay for an in-network provider. The measure outlines how incentives will be calculated.

Prepared By: Autumn Mathews

**Fiscal Analysis**

HB 1522 requires that all health insurers offer a shared savings incentive program under the Consumer Health Choice Empowerment Act. According to officials with OMES-EGID, "HealthChoice does not fall within the bill's written scope and the bill's substance does not fall within the enumerated categories listed under 36 O.S. §6011, so HealthChoice is not compelled to comply with the mandates of this bill," therefore no anticipated impact on HealthChoice rates.

The conference committee substitute restores title and the enacting clause and further specifies who the provisions of the measure pertain to. Therefore, in its current form, HB 1522 has no direct fiscal considerations for the state.

Prepared By: Alexandra Ladner, House Fiscal Staff

**Other Considerations**

None.