

COMMITTEE AMENDMENT
HOUSE OF REPRESENTATIVES
State of Oklahoma

SPEAKER:

CHAIR:

I move to amend HB1161 _____
Of the printed Bill
Page _____ Section _____ Lines _____
Of the Engrossed Bill

By deleting the content of the entire measure, and by inserting in lieu thereof the following language:

AMEND TITLE TO CONFORM TO AMENDMENTS

Adopted: _____

Amendment submitted by: Mark Tedford _____

Reading Clerk

1 STATE OF OKLAHOMA

2 1st Session of the 60th Legislature (2025)

3 PROPOSED OVERSIGHT
4 COMMITTEE SUBSTITUTE
5 FOR
6 HOUSE BILL NO. 1161

By: Tedford

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8 PROPOSED OVERSIGHT COMMITTEE SUBSTITUTE

9 An Act relating to insurance; providing definitions;
10 directing for bills providing mandates impacting
11 health benefit plans be assigned to certain insurance
12 committees; providing for when an impact analysis
13 shall be required; prohibiting certain bills from
14 being reported out of committee without required
15 impact analysis; directing the Legislative Service
16 Bureau to submit certain bills to Oklahoma Insurance
17 Department; directing Department to return report
18 within time frame; providing required contents of
19 report; permitting contracting with third party;
20 permitting Department to seek input from state
21 agencies; limiting number of submissions; requiring
22 written permission; directing Bureau to provide copy
23 of report; directing report be made publicly
24 available; providing for codification; and providing
an effective date.

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

21 SECTION 1. NEW LAW A new section of law to be codified
22 in the Oklahoma Statutes as Section 8000 of Title 36, unless there
23 is created a duplication in numbering, reads as follows:

24 As used in this act:

1 1. "Bureau" means the Legislative Service Bureau as established
2 in Section 450.1 of Title 74 of the Oklahoma Statutes;

3 2. "Department" means the Oklahoma Insurance Department as
4 established in Section 301 of Title 36 of the Oklahoma Statutes;

5 3. "Health benefit plan" means a health benefit plan as defined
6 pursuant to Section 6060.4 of Title 36 of the Oklahoma Statutes; and

7 4. "Mandate" means any requirement proposed in legislation or
8 regulation that obligates health benefit plans to:

9 a. provide, offer, or expand coverage for specific health
10 care services or providers, treatments, medical
11 supplies, or populations, or

12 b. implement operational or administrative processes such
13 as prior authorization, reporting requirements, or
14 claims procedures.

15 SECTION 2. NEW LAW A new section of law to be codified
16 in the Oklahoma Statutes as Section 8001 of Title 36, unless there
17 is created a duplication in numbering, reads as follows:

18 No bill providing for a mandate impacting the health plans in
19 the state may be considered or adopted by the House of
20 Representatives or the Senate unless there is an impact analysis of
21 the bill.

22 SECTION 3. NEW LAW A new section of law to be codified
23 in the Oklahoma Statutes as Section 8002 of Title 36, unless there
24 is created a duplication in numbering, reads as follows:

1 A. When the Speaker of the House or Pro Tempore of the Senate
2 or their delegates decides a bill contains a mandate impacting
3 health benefit plans as provided for in section 2 of this act, they
4 shall direct the Legislative Services Bureau to submit such bill to
5 the Oklahoma Insurance Department for the purpose of conducting an
6 impact analysis.

7 B. When conducting such analysis, the Department shall:

8 1. Analyze the proposed mandate and prepare a written report to
9 be returned to the Legislative Service Bureau within sixty (60) days
10 from referral; and

11 2. Such report shall include, but not be limited to:

12 a. social impact:

- 13 (1) the extent to which the mandate addresses a
14 significant public health issue,
- 15 (2) the number of individuals and demographics
16 affected by the proposed mandate, and
- 17 (3) any anticipated impact on access to health care
18 services,

19 b. medical efficacy:

- 20 (1) a review of peer-reviewed studies, clinical
21 guidelines, and other scientific evidence
22 evaluating the effectiveness of the treatment or
23 service, and

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1 (2) input from medical experts and professional
2 organizations as appropriate,

3 c. financial impact:

4 (1) the estimated effect on insurance premiums for
5 consumers and employers,

6 (2) the potential cost implications for insurers,
7 health care providers, and state-funded programs
8 that provide payment for covered services, and

9 (3) any anticipated impact on the stability of the
10 state's insurance market.

11 C. The Department may contract with a third-party vendor who
12 specializes in actuarial services, insurance mandate reviews, or
13 other services which the Department deems necessary to carry out the
14 provisions of this act; and

15 D. The Department may seek the input and expertise of any
16 agency of this state to evaluate the potential impact to state-
17 funded programs that provide payment for covered services.

18 E. The Bureau shall not submit more than five referrals for
19 analysis to the Department per fiscal year. Any additional referral
20 for analysis must be approved by the Department in writing at the
21 discretion of the Insurance Commissioner before submission by the
22 Bureau.

23 F. Upon return of the analysis by the Department to the Bureau,
24 the Bureau shall provide a copy, by either written or electronic

1 means, to the author of the legislative measure, the chairman of the
2 legislative committee(s) to which the measure was referred, and make
3 such report available on the legislative website, which is
4 accessible to the general public.

5 SECTION 4. This act shall become effective November 1, 2025.

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7 60-1-12800 MJ 02/20/25

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