

**BILL SUMMARY**  
1<sup>st</sup> Session of the 60<sup>th</sup> Legislature

<b>Bill No.:</b>	<b>HB1683</b>
<b>Version:</b>	<b>INT</b>
<b>Request Number:</b>	<b>10924</b>
<b>Author:</b>	<b>Rep. Roe</b>
<b>Date:</b>	<b>2/20/2025</b>
<b>Impact:</b>	<b>OHCA:</b>
	<b>HealthChoice \$250,000</b>
	<b>Medicaid: \$260,000</b>

**Research Analysis**

HB 1683 provides that any health benefit plan offered, issued, or renewed on or after the effective date that covers contraceptives must provide coverage for an enrollee to obtain a three-month supply of a contraceptive the first time and then a twelve month supply at once each subsequent time. An enrollee may only obtain a 12 month supply once a year. Nothing in the measure prohibits an individual from obtaining a smaller supply of contraceptives as well as nothing in the measure requires coverage for a contraceptive not intended for regular or routine use.

Prepared By: Suzie Nahach

**Fiscal Analysis**

HB 1683 requires health benefit plans to offer coverage allowing enrollees to obtain a three-month supply of contraceptive drugs at once followed by a twelve-month supply of the same drug each time thereafter; regardless of whether the participant changes their health plan or remains within the same plan.

Officials with the Oklahoma Health Care Authority (OHCA) estimate a fiscal impact of Two Hundred Fifty Thousand Dollars (\$250,000) annually to the HealthChoice plan based on current utilization, disenrollment rates, and percentage of contraceptive users. Two Hundred Thousand Dollars (\$200,000) is estimated for medication costs and Fifty Thousand Dollars (\$50,000) for prior authorization and administrative costs. According to OHCA, the cost estimate varies because of the following:

"Per the bill, requirements require the supply of contraceptives be extended beyond one month.

1. Today, contraceptives are dispensed under ACA rules at \$0 cost-share, meaning the plan and insured will not experience a change in contributions if they receive one month or 12 months. Some brand contraceptives to have a copay and will have minor added impact;
2. The cost to the plan would come from the insured leaving the plan part-way through the benefit period. An insured may receive 12 months of contraceptives in January, leave the plan in May, and there would be no more payroll premiums collected on that insured person."

Additionally, OHCA expects that two of the managed care plans will not be affected by the provisions of HB 1683 but expects one of the Medicaid managed care plans to have an impact of Two Hundred Sixty Thousand Dollars (\$260,000).

Therefore, the total estimated fiscal impact for the state due to the passing of this measure is Five Hundred Ten Thousand Dollars (\$510,000) annually.

Prepared By: Alexandra Ladner, House Fiscal Staff

**Other Considerations**

None.