

BILL SUMMARY

1st Session of the 60th Legislature

Bill No.:	HB1853
Version:	POLPCS1
Request Number:	12268
Author:	Rep. Schreiber
Date:	2/20/2025
Impact:	\$0

Research Analysis

The first proposed policy committee substitute for HB 1853 adds a definition of *health benefit plan* to the measure. The polpcs also specifies that the provisions of the measure cover an enrollee who may choose to pay for a health care service out-of-pocket from a licensed health care provider. The measure also removes putting the average payments made in the documentation.

HB 1853 provides that an enrollee may choose to pay for a health care service out-of-pocket from a licensed health care provider. If an enrollee negotiates a lower costs than the average allowed amount paid by the carrier to a network provider for a comparable service, and the enrollee pays out-of-pocket, the enrollee may send documentation that provides the information specified in the measure. A carrier that receives this documentation must count the full amount that the enrollee paid out-of-pocket towards their deductible, coinsurance, copayment, or other costs-sharing amount if the service is included in their health plan, they negotiated for a lower costs, and the amount doesn't exceed the total amount that a covered person is required to pay out-of-pocket.

Prepared By: Suzie Nahach

Fiscal Analysis

The proposed committee substitute to HB 1853 authorizes an enrollee to pay for health care services out-of-pocket from an out-of-network licensed provider and for insurance providers to count certain payments towards their cost share. A definition of a *health benefit plan* is provided, as it applies within the measure.

According to officials from the Oklahoma Health Care Authority, they do not expect the HealthChoice plan to incur additional claims if the member makes a direct payment to the provider. However, they did state, an item of concern is the potential for additional administration or confusion for the health plan to receive claims from the enrollees versus the providers.

In its current form, HB 1853 is not anticipated to have a direct fiscal impact on the state budget or appropriations.

Prepared By: Alexandra Ladner, House Fiscal Staff

Other Considerations

None.

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