

STATE OF OKLAHOMA

1st Session of the 46th Legislature (1997)

COMMITTEE SUBSTITUTE
FOR
SENATE BILL NO. 650

By: Hendrick

COMMITTEE SUBSTITUTE

(poor persons - Oklahoma Medicaid Healthcare Options Act -
emergency)

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

SECTION 1. AMENDATORY Section 1, Chapter 336, O.S.L.
1993 (56 O.S. Supp. 1996, Section 1010.1), is amended to read as
follows:

Section 1010.1 A. ~~Sections 1 through 7 of this~~ This act shall
be known and may be cited as the "Oklahoma Medicaid Healthcare
Options Act".

B. In order to establish a coordinated approach to delivering
and monitoring health care services and to ensure an efficient and
appropriate level of quality health care services to eligible
persons requiring such services, ~~it there is the purpose of the~~
~~Oklahoma Medicaid Healthcare Options Act to establish hereby~~
established a statewide managed care system of comprehensive health
care delivery through the Oklahoma Medicaid Program ~~including~~ which
shall include, but not be limited to, prepaid capitated plans and
primary case management plans, and which shall be offered ~~to~~ in all
geographic areas of the state.

C. 1. In designing the state Medicaid plan, the Oklahoma
Health Care Authority shall include a buy-in option for covering low

income families who do not receive cash assistance and whose incomes do not exceed two hundred percent (200%) of the federal poverty level, which incorporates purchase of premiums on the basis of a sliding fee scale, provided that children who are otherwise eligible for Medicaid services shall not be required to purchase such premiums.

2. The Authority shall promulgate rules for establishing and administering the sliding fee scale. Such rules shall provide that a family, who is not receiving payments under the Temporary Assistance for Needy Families (TANF) program or who is not otherwise covered by Medicaid, and whose income resources are:

- a. less than or equal to one hundred fifty percent (150%) of the federal poverty level, shall be allowed to purchase coverage under the state Medicaid plan by paying a premium amount that is equal to thirty percent (30%) of the cost of Medicaid, or
- b. greater than one hundred fifty percent (150%) of the federal poverty level, but less than or equal to two hundred percent (200%) of the federal poverty level, shall be allowed to purchase coverage under the state Medicaid plan by paying a premium amount that is equal to seventy percent (70%) of the cost of Medicaid.

3. The Authority shall promulgate rules establishing the amount of premium to be paid in areas of the state where services are provided on a fee-for-service basis.

4. The Authority shall submit an application for a waiver to amend the state Medicaid plan to the federal Health Care Financing Administration in order to enact the provisions of this subsection not later than November 1, 1997.

SECTION 2. It being immediately necessary for the preservation of the public peace, health and safety, an emergency is hereby

declared to exist, by reason whereof this act shall take effect and be in full force from and after its passage and approval.

46-1-1168

CJ