

SHORT TITLE: Insurance; coverage for mental illness; codification;
effective date.

STATE OF OKLAHOMA

1st Session of the 46th Legislature (1997)

SENATE BILL NO. 274

By: Monson

AS INTRODUCED

An Act relating to insurance; requiring individual and group health insurance and health benefit plans to include coverage for severe mental illness equal to coverage for other physical diseases and disorders; making certain exceptions; clarifying application of requirement to agreement, contract or policy provisions; defining term; providing for five-year phase-in of certain benefits; providing for codification; and providing an effective date.

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

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 6060.10 of Title 36, unless there is created a duplication in numbering, reads as follows:

A. 1. Any individual or group health insurance or health-benefit-plan agreement, contract or policy, including any indemnity plan, not-for-profit hospital or medical service or indemnity contract, prepaid or managed care plan or provider arrangement, and Multiple Employer Welfare Arrangement (MEWA) or employer self-insured plan, except as exempt under federal ERISA provisions, that is offered, issued, or renewed on or after the effective date of this act shall provide benefits for treatment of:

a. adults with severe mental illness, and

- b. all Diagnostic and Statistical Manual (DSM) -IV diagnoses for child or adolescent dependents.

2. Such benefits shall be equal to benefits for treatment of all other physical diseases and disorders.

3. This requirement shall not apply to agreements, contracts or policies that provide coverage for a specified disease or other limited benefit coverage or groups with twenty-five (25) or fewer employees.

B. 1. The nondiscrimination requirement set forth in subsection A of this section shall pertain to all aspects of any health insurance or health benefit plan agreement, contract or policy that is offered, issued, or renewed in this state including, but not limited to:

- a. coverage of inpatient hospital services for at least twenty-six (26) days,
- b. coverage of outpatient services,
- c. coverage of medication,
- d. maximum lifetime benefits,
- e. copayments,
- f. coverage of home health visits,
- g. individual and family deductibles, and
- h. coinsurance.

2. For purposes of this section, "severe mental illness" means:

- a. schizophrenia,
- b. bipolar disorder (manic-depressive illness),
- c. major depression,
- d. panic disorder,
- e. obsessive-compulsive disorder, and
- f. schizoaffective disorder.

C. All other disorders identified currently or in the future as severe, biologically-based mental illness and Axis I Diagnoses, or

"the walking wounded," shall be phased in to such agreements, contracts or policies over a five (5) year period.

SECTION 2. This act shall become effective November 1, 1997.

46-1-0957

CJ