

STATE OF OKLAHOMA

1st Session of the 47th Legislature (1999)

COMMITTEE SUBSTITUTE
FOR
SENATE BILL 495

By: Monson

COMMITTEE SUBSTITUTE

An Act relating to poor persons; amending Section 1, Chapter 336, O.S.L. 1993, as amended by Section 1, Chapter 421, O.S.L. 1997, and Section 5, Chapter 336, O.S.L. 1993, as amended by Section 5, Chapter 204, O.S.L. 1995 (56 O.S. Supp. 1998, Sections 1010.1 and 1010.5), which relate to the Oklahoma Medicaid Healthcare Options Act; creating Task Force; providing for membership, vacancy, quorum, compensation and travel reimbursement; allowing solicitation of advice and participation and assistance from specified persons; providing for staffing; providing for duties; allowing review of specified strategies; allowing options be based on sliding fee scale; requiring options consider specified funding source; deleting language relating to establishing cost sharing option for certain health care coverage; and declaring an emergency.

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

SECTION 1. AMENDATORY Section 1, Chapter 336, O.S.L. 1993, as amended by Section 1, Chapter 421, O.S.L. 1997 (56 O.S. Supp. 1998, Section 1010.1), is amended to read as follows:

Section 1010.1 A. Sections 1010.1 through 1010.7 of this title 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, there is hereby established a statewide managed care system of comprehensive health care delivery through the Oklahoma Medicaid Program, which shall include, but not be limited to, prepaid capitated plans and primary case management

plans, and which shall be offered in all geographic areas of the state.

C. Effective December 1, 1997, the Oklahoma Health Care Authority shall provide coverage under the state Medicaid program to children under the age of six (6) years whose family incomes do not exceed one hundred eighty-five percent (185%) of the federal poverty level. The Authority shall further provide coverage under the state Medicaid program to all children age six (6) years or older, whose family incomes do not exceed one hundred eighty-five percent (185%) of the federal poverty level, who are required to be covered at one hundred percent (100%) of the federal poverty level pursuant to federal requirements.

D. 1. There is hereby created, to continue until February 1, 2000, the Joint Legislative Task Force on Expansion of Health Insurance Coverage. The Task Force shall be composed of ten (10) members as follows:

a. five senators appointed by the President Pro Tempore of the Senate, one of whom shall be appointed to serve as chair of the Task Force; and

b. five representatives appointed by the Speaker of the House of Representatives, one of whom shall be appointed to serve as vice-chair of the Task Force.

2. a. Members shall serve at the pleasure of the appointing authority. A vacancy on the Task Force shall be filled by the original appointing authority.

b. The chair of the Task Force shall convene the first meeting on or before July 1, 2000. A majority of the members present at a meeting shall constitute a quorum.

c. Members shall not be compensated for their service but shall be reimbursed by their appointing authorities for necessary expenses incurred in the performance of

their duties, pursuant to the provisions of the State Travel Reimbursement Act.

3. The Task Force may solicit advice and participation from interested parties, including, but not limited to, low-income families and advocates, health care providers, health insurance providers, and representatives of business.

4. The Oklahoma Health Care Authority, the State Department of Health, the Department of Mental Health and Substance Abuse Services and other state agencies shall assist as necessary the work of the Task Force.

5. The Task Force shall be staffed by the legislative staff of the Senate and the House of Representatives.

~~The Authority shall establish a cost-sharing option~~ E. 1. The Task Force shall develop recommendations for providing health insurance coverage under the state Medicaid program to low income families who do not receive cash assistance for uninsured low-income individuals and families who are not currently eligible for the state Medicaid program and whose incomes do not exceed two hundred fifty percent (250%) of the federal poverty level.

~~2. Such option shall incorporate purchase of premiums on the basis of a sliding fee scale, provided that children and pregnant women who are otherwise eligible for Medicaid services shall not be required to purchase such premiums.~~

~~2. The Authority shall promulgate rules for establishing the cost-sharing option and the sliding fee scale pursuant to the provisions of this subsection.~~

~~3. The Authority shall implement such cost-sharing option on or before December 1, 1998.~~

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

~~F. The Authority shall submit to the federal Health Care Financing Administration, on or before October 1, 1997, an application for any waivers required to amend the state Medicaid plan to enact the provisions of this section recommendations shall include options for:~~

- ~~a. providing coverage under the state Medicaid program,~~
- ~~b. operating a private insurance program administered by the Oklahoma Health Care Authority,~~
- ~~c. providing private coverage under private health insurance plans, and~~
- ~~d. other approaches as determined by the Task Force.~~

~~3. In developing such options, the Task Force may review strategies that:~~

- ~~a. utilize monies received by this state pursuant to the provisions of Chapter 2 of Section J of Public Law 105-33, the State Children's Health Insurance Program, to contract with a private health insurer for a program for children up to eighteen (18) years of age in families with income between one hundred eighty-five percent (185%) and two hundred percent (200%) of the federal poverty level, and~~
- ~~b. optimize continuity of children's health care through a contract, if possible, with a private health carrier that participates in SoonerCare and offers eligible children a broad-based, statewide preferred provider network.~~

~~4. Such options may be based on a sliding fee scale for payment of premiums. Options presented by the Task Force shall consider ways to access federal Title XXI funds under the State Children's Health Insurance Program for eligible participants.~~

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.

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