

An Act relating to insurance; amending 36 O.S. 2001, Sections 6532, 6534, 6535, 6536, 6538 and 6542, which relate to the Health Insurance High Risk Pool and the Oklahoma Health Care Authority; providing definitions; modifying outline; clarifying language concerning plans; amending reference to Pool plan rate; amending certain eligibility reference; requiring the Board of Directors of the Health Insurance High Risk Pool to adopt alternative health insurance plans; deleting obsolete language; providing discretionary benefit structures; providing time period for request for proposals; clarifying payment of assessment to the Insurance Commissioner; deleting certain provisions concerning cost-containment measures; allowing Board to implement disease management programs; requiring the Board to implement a multi-tier pharmacy benefit design; requiring the Board to make a certain annual report and recommendations concerning cost-containment measures; modifying duties of the administering insurer; requiring the Board to select a case manager or managers; providing for competitive bid of case managers; establishing criteria when evaluating bids; providing term of service for case managers; providing time period for invitations to bid and selection of case managers; providing for termination of service; providing for acceptance of bids upon termination of service of other case managers; providing duties of case managers; providing for payment of direct and indirect expenses of case managers; defining "direct and indirect expenses"; allowing the Board to provide financial incentives to case managers; clarifying language concerning the basic option; amending 74 O.S. 2001, Sections 1321 and 1365, which relate to state and education employee benefits; amending reference; authorizing the Oklahoma State Employees Benefits Council to renegotiate rates in certain circumstances; defining extraordinary circumstance; prohibiting certain unilateral changes to the contract; requiring certain duties of the Oklahoma State Employees Benefits Council and State and Education Employees Group Insurance Board; requiring development of service areas; exempting participating health maintenance organizations from offering enrollment in every service area; exempting participating health maintenance organizations from being mandated to offer a Medicare supplement plan; providing an exception; requiring participating health maintenance organization to meet standardized benefit plan; allowing participating health maintenance organizations to offer certain enhancements; providing maximum time period for payment of premiums; requiring the Oklahoma Health Care Authority to conduct a certain feasibility study and supply a report; requiring the Health Insurance High Risk Pool to assist in the study as needed; providing for noncodification; providing for codification; providing an effective date; and declaring an emergency.