

STATE OF OKLAHOMA

2nd Session of the 48th Legislature (2002)

HOUSE BILL HB2340

By: Sullivan (John)

AS INTRODUCED

An Act relating to public health and safety; requiring a minimum copayment or no copayment for medical visits covered by the Soonercare Program; requiring promulgation of rules by the Oklahoma Health Care Authority that require prior authorization for certain brand-name legend drugs; setting time periods and contents; requiring certain reimbursement levels; providing for codification; and declaring an emergency.

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 1010.11 of Title 56, unless there is created a duplication in numbering, reads as follows:

A. All medical visits for preventative services covered by the Oklahoma Health Care Authority Soonercare Program shall not require a copayment.

B. All medical visits, other than emergency room visits or medical visits for preventative services covered by the Oklahoma Health Care Authority Soonercare Program, shall require a copayment of Five Dollars (\$5.00) for each medical visit. The five-dollar copayment required by this subsection may be retained by the attending physician.

C. All emergency room visits for medical services covered by the Oklahoma Health Care Authority Soonercare Program shall require a copayment of Twenty-five Dollars (\$25.00) for each emergency room visit.

D. Any savings to the Authority from the copayment shall be used for program administration.

E. The Authority shall expedite the acquisition of any federal waivers necessary to implement the provisions of this section.

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 5030.6 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. 1. For prescriptions subject to the Soonercare Program written on and after July 1, 2002, the Oklahoma Health Care Authority shall promulgate rules that require prescribers to obtain prior authorization for any brand-name legend drug pursuant to Sections 5030.1 through 5030.5 of Title 63 of the Oklahoma Statutes if such brand-name legend drug has a generic equivalent;

2. The rules shall provide for:

- a. limited emergency situations, and
- b. guidelines for obtaining refills remaining on a prescription for brand-name legend drugs that were written before July 1, 2002.

B. On and after July 1, 2002, the Oklahoma Health Care Authority shall restrict payment or reimbursements for nonlegend or over-the-counter drugs unless written certification is made by the attending physician that the drug is necessary for the life and safety of a Soonercare Program recipient.

C. The Authority shall expedite the acquisition of any federal waivers necessary to implement the provisions of this section.

SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 5009.5 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. Beginning July 1, 2002, the Oklahoma Health Care Authority shall provide that any medical provider of services to participants of the Soonercare Program shall be reimbursed for such services at a

rate equal to or more than the Medicaid reimbursement rate for the services provided.

B. The Authority shall expedite the acquisition of any federal waivers necessary to implement the provisions of this section.

SECTION 4. 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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