

SB 2114

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23

THE STATE SENATE
Wednesday, February 20, 2008

Senate Bill No. 2114
As Amended

SENATE BILL NO. 2114 - By: WILSON, GUMM and RICE of the Senate and MORGAN of the House.

[insurance - codification - 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 6060.19 of Title 36, unless there is created a duplication in numbering, reads as follows:

A. Any health benefit plan that is offered, issued or renewed in this state on or after January 1, 2009, shall fully cover any health care services of the insured that is deemed by a health care professional to be medically necessary in order to treat a health condition, illness, injury or disease.

B. As used in this section:

1. "Health benefit plan" means individual or group hospital or medical insurance coverage, a not-for-profit hospital or medical service or indemnity plan, a prepaid health plan, a health maintenance organization plan, a prepared provider organization plan, the State and Education Employees Group Health Insurance Plan, and coverage provided by a Multiple Employer Welfare Arrangement

1 (MEWA) or employee self-insured plan except as exempt under federal
2 ERISA provisions;

3 2. "Health care professional" means a physician or other health
4 care practitioner providing health care services;

5 3. "Health care services" means services for the diagnosis,
6 prevention or treatment of a health condition, illness, injury or
7 disease; and

8 4. "Medically necessary" means health care services that a
9 health care professional, exercising prudent clinical judgment,
10 would provide to a patient for the purpose of evaluating, diagnosing
11 or treating a health condition, illness, injury or its symptoms, and
12 that are:

- 13 a. in accordance with generally accepted standards of
14 medical practice,
- 15 b. clinically appropriate in terms of type, frequency,
16 extent, site and duration and considered effective for
17 the patient's health condition, illness, injury or
18 disease,
- 19 c. not primarily for the convenience of the patient or
20 health care professional, and
- 21 d. not more costly than an alternative service or
22 sequence of services at least as likely to produce
23 equivalent therapeutic or diagnostic results as to the

1 diagnosis or treatment of that patient's health
2 condition, illness, injury or disease;

3 C. The Insurance Commissioner shall promulgate rules necessary
4 to implement the provisions of this section.

5 SECTION 2. This act shall become effective November 1, 2008.

6 COMMITTEE REPORT BY: COMMITTEE ON VETERANS & MILITARY AFFAIRS, dated
7 2-20-08 - DO PASS, As Amended and Coauthored.