

1 STATE OF OKLAHOMA

2 2nd Session of the 53rd Legislature (2012)

3 COMMITTEE SUBSTITUTE
4 FOR
5 HOUSE CONCURRENT
6 RESOLUTION NO. 1021

By: Banz

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8 COMMITTEE SUBSTITUTE

9 A Concurrent Resolution relating to insurance;
10 creating the Oklahoma Cancer Treatment Parity Task
11 Force; stating purpose; providing for membership,
12 appointment, designation of first meeting, election
13 of chair, quorum and staff support; providing no
14 compensation; and requiring report of findings and
15 recommendations by certain deadline.

16 BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF THE 2ND SESSION OF
17 THE 53RD OKLAHOMA LEGISLATURE, THE SENATE CONCURRING THEREIN:

18 THAT there is hereby created until November 15, 2012, the
19 Oklahoma Cancer Treatment Parity Task Force. The purpose of the
20 Task Force shall be to conduct research concerning the disparity of
21 health insurance coverage between oral anticancer medications and
22 intravenously administered chemotherapy medications. The research
23 shall include data provided to the Insurance Department by the seven
24 largest health insurance providers in the state. Such data shall
include the scope of cancer policies, the difference in policy

1 coverage between oral anticancer medications and intravenously
2 administered chemotherapy medications, and the number of individuals
3 in the state who subscribe to such policies.

4 THAT the Task Force shall consist of the following eleven (11)
5 members:

6 1. An individual representing the health care provider
7 industry, appointed by the Governor;

8 2. An individual representing the health insurance industry,
9 appointed by the Governor;

10 3. A licensed physician currently practicing oncology in this
11 state, appointed by the Governor;

12 4. An individual representing the health care provider
13 industry, appointed by the Speaker of the House of Representatives;

14 5. An individual representing the health insurance industry,
15 appointed by the Speaker of the House of Representatives;

16 6. A licensed physician currently practicing oncology in this
17 state, appointed by the Speaker of the House of Representatives;

18 7. A member of the public, appointed by the Speaker of the
19 House of Representatives;

20 8. An individual representing the health care provider
21 industry, appointed by the President Pro Tempore of the State
22 Senate;

23 9. An individual representing the health insurance industry,
24 appointed by the President Pro Tempore of the State Senate;

1 10. A licensed physician currently practicing oncology in this
2 state, appointed by the President Pro Tempore of the State Senate;
3 and

4 11. A member of the public, appointed by the President Pro
5 Tempore of the State Senate.

6 THAT appointments to the Task Force shall be made by August 1,
7 2012. The first meeting of the Task Force shall be called by House
8 of Representatives staff and held by August 15, 2012. The members
9 of the Task Force shall elect a chair at the first meeting of the
10 Task Force. Additional meetings of the Task Force shall be held at
11 the call of the chair of the Task Force. Members shall serve at the
12 pleasure of their appointing authorities. A majority of the members
13 of the Task Force shall constitute a quorum to transact business,
14 but no vacancy shall impair the right of the remaining members to
15 exercise all of the powers of the Task Force. A vacancy on the Task
16 Force shall be filled by the original appointing authority. Staff
17 support for the Task Force shall be provided by the staff of the
18 House of Representatives and State Senate. The Insurance Department
19 shall provide support and information as requested by the Task
20 Force.

21 THAT members of the Task Force shall receive no compensation or
22 travel reimbursement for serving on the Task Force.

23 THAT the Task Force shall submit a report by November 15, 2012,
24 to the Governor, the President Pro Tempore of the Senate, and the

1 Speaker of the House of Representatives. The report shall include
2 findings for any statutory or regulatory changes necessary to
3 implement the recommendations of the Task Force.

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