

1 STATE OF OKLAHOMA

2 1st Session of the 54th Legislature (2013)

3 COMMITTEE SUBSTITUTE

4 FOR

HOUSE BILL NO. 2226

By: Derby

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7 COMMITTEE SUBSTITUTE

8 An Act relating to public health and safety; defining
9 terms; requiring health insurance issuer to use
10 certain form for obtaining prior authorization for
11 prescription drug benefits; requiring health
12 insurance issuer to submit certain forms and
13 replacements to Insurance Department; providing for
14 codification; providing an effective date; and
15 declaring an emergency.

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

17 SECTION 1. NEW LAW A new section of law to be codified
18 in the Oklahoma Statutes as Section 313A of Title 63, unless there
19 is created a duplication in numbering, reads as follows:

20 A. As used in this section:

21 1. "Health insurance issuer" means any entity that offers
22 health insurance coverage through a plan, policy, or certificate of
23 insurance subject to state law that regulates the business of
24 insurance. It shall also include a health maintenance organization;

1 2. "Health benefit plan", "plan", "benefit", or "health
2 insurance coverage" means services consisting of medical care,
3 provided directly, through insurance or reimbursement, or otherwise,
4 and including items and services paid for as medical care under any
5 hospital or medical service policy or certificate, hospital or
6 medical service plan contract, preferred provider organization, or
7 health maintenance organization contract offered by a health
8 insurance issuer. However, excepted benefits are not included as a
9 "health benefit plan"; and

10 3. "Prior authorization" means a utilization management
11 criterion utilized to seek permission or waiver of a drug to be
12 covered under a health prior authorization.

13 B. Notwithstanding any other provision of law to the contrary,
14 in order to establish uniformity in the submission of prior
15 authorization forms, on or after January 1, 2014, a health insurance
16 issuer shall utilize only a single, standardized prior authorization
17 form for obtaining any prior authorization for prescription drug
18 benefits. The form shall not exceed two pages in length, excluding
19 any instructions or guiding documentation. A health insurance
20 issuer may make the form accessible through multiple computer
21 operating systems. Additionally, the health insurance issuer shall
22 submit its prior authorization forms to the Insurance Department to
23 be kept on file on or after January 1, 2014. A copy of any
24 subsequent replacements or modification of a health insurance

1 issuer's prior authorization form shall be filed with the Insurance
2 Department within fifteen (15) days prior to use or implementation
3 of such replacements or modifications.

4 SECTION 2. This act shall become effective July 1, 2013.

5 SECTION 3. It being immediately necessary for the preservation
6 of the public peace, health and safety, an emergency is hereby
7 declared to exist, by reason whereof this act shall take effect and
8 be in full force from and after its passage and approval.

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10 54-1-7402 AM 02/27/13

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