

STATE OF OKLAHOMA

2nd Session of the 57th Legislature (2020)

COMMITTEE SUBSTITUTE  
FOR  
SENATE BILL NO. 1907

By: Pugh

COMMITTEE SUBSTITUTE

An Act relating to the state Medicaid program;  
requiring the Oklahoma Health Care Authority to  
transition certain Medicaid population to certain  
voucher program; providing allowable expenses;  
providing for termination of benefit; providing  
benefit calculation methodology; directing the  
Authority to submit certain waiver; providing for  
codification; and providing an 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 1011.16 of Title 56, unless  
there is created a duplication in numbering, reads as follows:

A. The Oklahoma Health Care Authority shall, upon approval of  
the waiver described in subsection D of this section, transition the  
Parent/Caretaker population of the state Medicaid program from the  
current fee-for-service model to a health voucher program in which a  
monthly pecuniary benefit shall be distributed to each member of the  
population in an amount as provided by subsection C of this section.

B. Allowable expenses of the benefit shall include:

1        1. The purchase of commercial health insurance and costs  
2 associated with health insurance including premiums, copayments,  
3 deductibles and coinsurance;

4        2. The purchase of food eligible to be purchased under the  
5 Supplemental Nutrition Assistance Program;

6        3. Membership dues at a fitness center;

7        4. Qualifying job skills programs including career technology  
8 centers; and

9        5. Any other expense related to health or wellness approved by  
10 the Oklahoma Health Care Authority Board.

11       C. The benefit shall be available to the member for a total of  
12 sixty (60) months. Upon sixty (60) cumulative months of enrollment  
13 in the health voucher program, the benefit shall terminate and the  
14 member shall be disenrolled from the state Medicaid program. The  
15 amount of the benefit shall be:

16       1. For the first forty-eight (48) cumulative months the member  
17 is enrolled in the health voucher program, an amount equal to Five  
18 Hundred Dollars (\$500.00) per month multiplied by the percentage by  
19 which the Consumer Price Index for medical care services on January  
20 1 of the current calendar year varies from the Consumer Price Index  
21 for medical care services on January 1 of the previous calendar  
22 year; and

23       2. After forty-eight (48) cumulative months and until sixty  
24 (60) cumulative months of enrollment in the health voucher program,

1 an amount equal to Two Hundred Fifty Dollars (\$250.00) per month  
2 multiplied by the percentage by which the Consumer Price Index for  
3 medical care services on January 1 of the current calendar year  
4 varies from the Consumer Price Index for medical care services on  
5 January 1 of the previous calendar year.

6 D. The Authority shall apply for a waiver from the Centers for  
7 Medicare and Medicaid Services and seek any additional federal  
8 approval necessary to implement the provisions of this section.

9 SECTION 2. This act shall become effective November 1, 2020.

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