1	SENATE FLOOR VERSION April 11, 2022
2	AS AMENDED
3	ENGROSSED HOUSE BILL NO. 3216 By: Lepak, Sneed, and Roberts
4	(Eric) of the House
5	and
6	Jett, Bullard, and Pemberton of the Senate
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9	<pre>[emergency medical services - unfair method of competition or unfair or deceptive act or practice</pre>
10	for certain purposes - emergency care claims - codification - effective date]
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13	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
14	SECTION 1. NEW LAW A new section of law to be codified
15	in the Oklahoma Statutes as Section 4420 of Title 36, unless there
16	is created a duplication in numbering, reads as follows:
17	A. As used in this section, "emergency care" means health care
18	services provided in an emergency hospital as defined in Section 1-
19	701 of Title 63 of the Oklahoma Statutes that is licensed by the
20	State Department of Health, to evaluate and stabilize medical
21	conditions of a recent and onset severity, including severe pain,
22	regardless of the final diagnosis that is given, that would lead a
23	prudent layperson possessing an average knowledge of medicine and
24	health to believe that the individual's condition, sickness, or

- 1 injury is of such a nature that failure to get immediate medical 2 care could:
 - 1. Place the individual's health in serious jeopardy;
 - 2. Result in serious impairment to bodily function;
 - 3. Result in serious disfunction of a bodily organ or part;
 - 4. Result in serious disfigurement; or
- 5. For pregnant women, result in serious jeopardy to the health of the fetus.
- 9 Emergency care does not include health care services provided by an 10 emergency facility that is not physically connected to inpatient services.
 - B. It shall be an unfair method of competition or an unfair or deceptive act or practice in the business of insurance for an insurer or an individual or entity acting on behalf of an insurer to:
 - 1. Deter enrollees from seeking care consistent with the prudent layperson standard for emergency care; or
 - 2. Engage in a pattern of wrongful denials of claims for emergency care.
- 20 C. If an individual's health insurance coverage includes any
 21 benefits for emergency services, there shall be no distinction made
 22 in regard to network status of an emergency care provider or
 23 facility. An enrollee's cost-sharing amount shall not be greater

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1 than that which would be imposed if the services were provided innetwork for emergency services.

- This section shall not be construed to prohibit an insurer D. from imposing different cost-sharing amounts for out-of-network services so long as the services provided are not related to the evaluation and stabilization of an emergency medical care situation.
- E. Utilization review of an emergency care claim must be performed by a physician board-certified in emergency medicine. A utilization review agent:
- 1. May not make an adverse determination for the emergency care claim based on the final diagnosis that is given, including the classification under a Current Procedural Terminology or International Classification of Diseases code; and
- 2. Must review the enrollee's medical records before making an 14 adverse determination. 15
- F. Nothing in this section may be construed as authorizing 16 utilization review of emergency care when otherwise prohibited by law.
- SECTION 2. This act shall become effective November 1, 2022. 19 COMMITTEE REPORT BY: COMMITTEE ON RETIREMENT AND INSURANCE 20 April 11, 2022 - DO PASS AS AMENDED

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