

1 ENGROSSED SENATE  
2 BILL NO. 1918

By: Bullard and Jett of the  
Senate

3 and

4 Sneed of the House  
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7 An Act relating to health insurance claims; defining  
8 terms; prohibiting health benefit plans from  
9 disallowing direct payment for covered services;  
10 requiring certain discounted prices to be deemed full  
11 payment; providing direct payment be applied to  
12 deductible and out-of-pocket expense subject to  
13 certain procedures; directing publication of certain  
14 procedures on certain website; prohibiting certain  
15 contract terms; providing for codification; and  
16 providing an effective date.

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

20 SECTION 1. NEW LAW A new section of law to be codified  
21 in the Oklahoma Statutes as Section 6060.50 of Title 36, unless  
22 there is created a duplication in numbering, reads as follows:

23 A. As used in this section:

24 1. "Health benefit plan" means a health benefit plan as defined  
pursuant to Section 6060.4 of Title 36 of the Oklahoma Statutes; and

2. "Health care provider" means any physician, dentist,  
pharmacist, optometrist, psychologist, registered optician, licensed  
professional counselor, physical therapist, chiropractor, hospital,

1 or other entity or person that is licensed or otherwise authorized  
2 in this state to furnish health care services.

3 B. 1. No health benefit plan may prohibit a health care  
4 provider from accepting directly from an enrollee full payment for a  
5 health care service in lieu of submitting a claim to the enrollee's  
6 health benefit plan.

7 2. For purposes of this subsection, the discounted cash price  
8 for services rendered from a health care provider is considered full  
9 payment.

10 C. Payment for a health care service made pursuant to  
11 subsection B of this section shall be applied toward the enrollee's  
12 deductible and annual maximum out-of-pocket expense if the service  
13 is a medically necessary covered service under the health plan.

14 D. 1. A health benefit plan that is offered, issued, or  
15 renewed in this state shall establish a procedure for enrollees to  
16 claim credit for any direct payment made for a covered health care  
17 service under this section and identify any necessary documentation  
18 to be submitted with a claim for credit.

19 2. Information about the procedure and necessary documentation  
20 described in paragraph 1 of this subsection shall be readily  
21 available to the enrollee on the health benefit plan's website.

22 E. No requirement of this section may be waived, voided, or  
23 nullified by contract.

24 SECTION 2. This act shall become effective November 1, 2024.

1 Passed the Senate the 4th day of March, 2024.

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3 \_\_\_\_\_  
4 Presiding Officer of the Senate

5 Passed the House of Representatives the \_\_\_\_ day of \_\_\_\_\_,  
6 2024.

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9 Presiding Officer of the House  
10 of Representatives