

**Bill Summary**  
1<sup>st</sup> Session of the 59<sup>th</sup> Legislature

<b>Bill No.:</b>	<b>HB 1712</b>
<b>Version:</b>	<b>FS</b>
<b>Request No.:</b>	<b>2136</b>
<b>Author:</b>	<b>Sen. Garvin</b>
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**Bill Analysis**

HB 1712 prohibits any health benefit plan, HMO, PPO, or other provider network from refusing coverage to an insured for durable medical equipment and supplies as prescribed by a health care provider, regardless of whether they are in-network or out-of-network, unless there is an Oklahoma-licensed in-network provider within a fifty-mile radius of the patient's five-digit ZIP code that can provide an in-person evaluation for the prescribed medical equipment or supplies. When covered medical equipment or supplies are not available in network, the covering entity shall reimburse an out-of-network provider at the same rate and benefit level for the provided equipment or supplies as an in-network provider.

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