1	ENGROSSED SENATE BILL NO. 1067 By: Rosino of the Senate
2	and
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4	Stinson of the House
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6	An Agt relating to health ingurance, amending Section
	An Act relating to health insurance; amending Section 3, Chapter 356, O.S.L. 2024 (36 O.S. Supp. 2024,
7	Section 6050.3), which relates to the Out-of-Network Ambulance Service Provider Act; authorizing local
8	governmental entities to submit certain rates to the Insurance Department; requiring the Department to
9	establish and maintain certain database; modifying reimbursement rates and criteria for certain
10	ambulance services; updating statutory reference; updating statutory language; and providing an effective date.
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14	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
15	SECTION 1. AMENDATORY Section 3, Chapter 356, O.S.L.
16	2024 (36 O.S. Supp. 2024, Section 6050.3), is amended to read as
17	follows:
18	Section 6050.3. A. <u>A local governmental entity</u> , or ambulance
19	service provider operating on its behalf, may annually submit to the
20	Insurance Department, in the form and manner prescribed by the
21	Insurance Commissioner, the ambulance service rates set or approved,
22	whether in contract or ordinance, by the local governmental entity.
23	B. The Department shall establish and maintain on its public
24	website a database listing all submitted rates.

- <u>C.</u> The minimum allowable reimbursement rate under any health care benefit plan issued by a health care insurer to an out-of-network ambulance service provider for providing covered ambulance services shall be at the least of:
- 1. The rates set or approved, whether in contract or ordinance, submitted by a local governmental entity in the jurisdiction in which the covered ambulance services originate.
- B. In the absence of the rates as provided in subsection A of this section, the rate shall be the lesser of:
- 1. Three hundred twenty-five percent (325%), or ambulance service provider operating on its behalf, as provided in subsection A of this section, if the local governmental entity has submitted such rates;
- 2. Two hundred seventy-five percent (275%) of the current published rate for ambulance services as established by the Centers for Medicare and Medicaid Services under Title XVIII of the Social Security Act for the same services provided in the same geographic area; or
 - 2. 3. The ambulance service provider's billed charges.
- C. D. Payment made in compliance with this section shall be considered payment in full for the covered ambulance services provided, except for any copayment, coinsurance, deductible, and other cost-sharing feature amounts required to be paid by the enrollee. An ambulance service provider is prohibited from billing

1	the enrollee for any additional amounts for the paid covered
2	ambulance services in excess of what the health care insurer pays.
3	D. E. All copayments, coinsurance, deductible, and other cost-
4	sharing feature amounts provided by applicable to amounts calculated
5	in accordance with subsection A of this section shall not exceed the
6	in-network copayment, coinsurance, deductible, and other cost-
7	sharing features for the covered ambulance services received by the
8	enrollee.
9	$rac{E.}{I}$ In administering and paying claims, a health care insurer
10	shall comply with Section 1219 of Title 36 of the Oklahoma Statutes.
11	SECTION 2. This act shall become effective January 1, 2026.
12	Passed the Senate the 26th day of March, 2025.
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14	Presiding Officer of the Senate
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16	Passed the House of Representatives the day of,
17	2025.
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19	Presiding Officer of the House
20	of Representatives
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