1 ENGROSSED HOUSE BILL NO. 2144 By: Kannady, Deck, Pae, 2 Schreiber, Rosecrants, Provenzano, Moore, Harris, 3 Miller, Roe, Humphrey, Ranson, Townley, Pfeiffer, Caldwell (Chad), Cantrell, 4 Turner, Marti, George, and 5 Manger of the House 6 and 7 Weaver of the Senate 8 9 10 An Act relating to insurance; creating the Insurance Consumers Protection Act; providing definitions; creating a statutory cause of action; clarifying 11 determination of reasonableness and necessity; providing who may bring action; declaring certain 12 policy, contract, or plan provisions void; clarifying 1.3 there is no requirement to exhaust administrative remedies; directing that claimants are entitled to 14 trial by jury; clarifying issues of bad faith are question of fact; creating a statutory cause of 15 action against certain bad faith insurers; clarifying duty of good faith and fair dealing is nondelegable; 16 providing when a cause of action for bad faith shall lie; providing for damages; permitting punitive 17 damages; providing categories; directing jury to base award on certain factors; limiting certain punitive 18 damages; clarifying considerations and defenses; clarifying that causes of actions in act do not limit 19 other actions; providing for codification; and providing an effective date. 20 21 22 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA: 23

ENGR. H. B. NO. 2144

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SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1119 of Title 12, unless there

3 | is created a duplication in numbering, reads as follows:

This act shall be known and may be cited as the "Insurance Consumers Protection Act".

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1119.1 of Title 12, unless there is created a duplication in numbering, reads as follows:

As used in the Insurance Consumers Protection Act:

- 1. "Bad faith" means conduct of an insurer that violates its duty or duties of good faith and fair dealing to a first-party claimant or third-party beneficiary by acts including but not limited to unreasonably or untimely refusing to pay or tender the proper benefits for a valid claim under the insurance policy. This duty of good faith and fair dealing is contained in every insurance contract and is a nondelegable duty;
- 2. "First-party claimant" means an individual corporation, association, partnership, or other legal entity asserting an entitlement to benefits owed directly to or on behalf of an insured under an insurance policy. First-party claimants include a public entity that has paid a claim for benefits dues to an insurer's unreasonable delay or denial of the claim;

- 3. "Insurance" is a contract whereby one undertakes to indemnify another or to pay a specified amount upon determinable contingencies;
- 4. "Insurer" means every person engaged in the business of making, selling, or binding contracts of insurance or indemnity in Oklahoma, except for independent insurance agents and captive insurance agents that market for only one insurer. A nonprofit hospital service and medical indemnity corporation is an insurer within the meaning of this act. The term insurer does not include burial associations;
- 5. "Insured" means a person for whom the insurance policy is written to protect;
- 6. "Issued in this state" refers to every health and disability policy, insurance contract, insurance certificate, and insurance agreement existing, offered, issued, delivered, or renewed in the State of Oklahoma or providing health or disability benefits to a resident or domiciliary of the State of Oklahoma and every employee benefit plan covering a resident or domiciliary of the State of Oklahoma, whether or not on behalf of an employer located or domiciled in Oklahoma, on or after January 1, 2005, notwithstanding any contractual or statutory choice-of-law provision to the contrary;

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- 7. "Person" means an individual, entity, company, insurer, association, organization, society, reciprocal or inter-insurance exchange, partnership, syndicate, business trust, or corporation;
- 8. "Prior authorization" or "pre-authorization" means the review and approval by the insurer of treatment recommendations from a health insurance policyholder's physician or the review by the insured's agent experienced in remedying the type of casualty or damage at issue; and
- 9. "Third-party beneficiary" means a person that receives benefits from a contract between two other parties, one of which is an insurer, even though they are not a party to the contract.
- SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1119.2 of Title 12, unless there is created a duplication in numbering, reads as follows:
- A. There is hereby created a statutory cause of action for an insured under an insurance policy, as a first-party claimant, and any third-party beneficiary to the contract of insurance between the insurer and insured, to maintain an action in district court or any court of competent jurisdiction for the bad faith refusal of or untimely pre-authorization of benefits, and for payment of such benefits.
- B. Provided, however, the recommended treatment for which preauthorization or payment of benefits is sought shall be reasonable and necessary for the person covered by the insurance policy. The

- reasonableness and necessity of the recommended treatment shall be determined by a jury.
 - C. Either the first-party claimant or third-party beneficiary may prosecute a claim for bad faith created by this act.
 - D. An insurance policy, insurance contract, or plan that is issued in this state shall not contain a provision purporting to reserve discretion to the insurer, plan administrator, or claim administrator to interpret the terms of the policy, contract, or plan or to determine eligibility for benefits. If an insurance policy, contract, or plan contains such a provision, the provision is void.
 - E. There is no requirement to exhaust any administrative remedies with the Oklahoma Insurance Department before filing an action asserting a cause of action for bad faith in a district court.
 - F. A claimant under this section is entitled to a trial by jury.
- G. The issue of bad faith is always a question of fact which must be submitted to a jury pursuant to Section 6 of Article 2 of the Oklahoma Constitution.
- SECTION 4. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1119.3 of Title 12, unless there is created a duplication in numbering, reads as follows:

- A. There is hereby created a statutory cause of action against an insurer, except pursuant to an insurance policy providing for statutory workers' compensation benefits under the Administrative Workers' Compensation Act in Title 85A of the Oklahoma Statutes or the Workers' Compensation Code in Title 85 of the Oklahoma Statutes, if the action or actions of the insurer is in bad faith as defined by this act.
 - B. There is no requirement to exhaust any administrative remedies with the Oklahoma Insurance Department before filing an action asserting a cause of action for bad faith in a district court.
- C. A claimant under this section is entitled to a trial by jury.
 - D. The issue of bad faith is always a question of fact which must be submitted to a jury.
 - E. The duty of good faith and fair dealing is contained in every insurance contract and is a nondelegable duty.
- SECTION 5. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1119.4 of Title 12, unless there is created a duplication in numbering, reads as follows:
- A cause of action for bad faith created by this act shall lie if:
- 1. The insurer was required under the insurance policy to pay
 the insured's claim;

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- 2. The insurer's refusal to pay the claim was unreasonable or untimely under the circumstances related to the claim;
- 3. The insurer had no reasonable basis for the refusal, or the amount it offered to satisfy the claim was unreasonably low; or
- 4. The violation by the insurer of its duty of good faith and fair dealing was the direct cause of the injury sustained by the insured.
- SECTION 6. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1119.5 of Title 12, unless there is created a duplication in numbering, reads as follows:
- A. If the insurer violates its duty or duties of good faith and fair dealing, the amount of damages shall be fixed as the amount of money that will compensate a first-party claimant or third-party beneficiary for any loss suffered as a result of the breach of the duty of good faith and fair dealing.
- B. In fixing the amount of damages, the jury may consider financial losses, emotional distress, embarrassment, loss of reputation, and mental pain and suffering.
- C. The jury may award punitive damages for the sake of example and by way of punishing the insurer based upon the following factors, in accordance with Section 9.1 of Title 23 of the Oklahoma Statutes:
 - 1. The profitability of the misconduct to the insurer;
 - 2. The duration of the misconduct and any concealment of it;

- 1 3. The attitude and conduct of the insurer upon discovery of the bad faith action; and
 - 4. The financial condition of the insurer.
 - D. Category I. Where the jury finds by clear and convincing evidence that an insurer has recklessly disregarded its duty to deal fairly and act in good faith with its insured; the jury, in a separate proceeding conducted after the jury has made such finding and awarded actual damages, may award punitive damages in an amount not to exceed the greater of:
 - 1. One Hundred Thousand Dollars (\$100,000.00); or
 - 2. The amount of the actual damages awarded.
- E. Category II. Where the jury finds by clear and convincing evidence that:
 - 1. An insurer has acted intentionally and with malice towards others; or
 - 2. An insurer has intentionally and with malice breached its duty to deal fairly and act in good faith with its insured.

The jury, in a separate proceeding conducted after the jury has made such finding and awarded actual damages, may award punitive damages in an amount not to exceed the greatest of:

- a. Five Hundred Thousand Dollars (\$500,000.00),
- b. twice the amount of actual damages awarded, or

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- c. the increased financial benefit derived by the insurer as a direct result of the conduct causing the injury to the plaintiff and other persons or entities.
- F. Category III. Where the jury finds by clear and convincing evidence that:
- 1. An insurer has acted intentionally and with malice towards others; or
- 2. An insurer has intentionally and with malice breached its duty to deal fairly and act in good faith with its insured, and the court finds, on the record and out of the presence of the jury, that there is evidence beyond a reasonable doubt that the insurer acted intentionally and with malice and engaged in conduct life—threatening to humans, the jury, in a separate proceeding conducted after the jury has made such finding and awarded actual damages, may award punitive damages in any amount the jury deems appropriate, without regard to the limitations set forth in subsections B and C of this section. Any award of punitive damages under this subsection awarded in any manner other than as required in this subsection shall be void and reversible error.
- G. In determining the amount, if any, of punitive damages to be awarded under either subsection B, C, or D of this section, the jury shall make the award based upon the factors set forth in subsection A of this section.

H. Any award of punitive damages under this section awarded in any manner other than as required in this section shall be void and reversible error.

SECTION 7. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1119.6 of Title 12, unless there is created a duplication in numbering, reads as follows:

A cause of action for bad faith as provided for by this act requires analysis of the insurer's action and not the interpretation of any health insurance plan or how a health insurance plan relates to the claim. Any insurance contract issued in this state that offers health insurance benefits shall not contain a provision purporting to reserve discretion to the insurer to interpret the terms of the contract. If an insurance contract contains such a provision, the provision is void. The interpretation of a health insurance plan shall not be a defense to a bad faith cause of action.

SECTION 8. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1119.7 of Title 12, unless there is created a duplication in numbering, reads as follows:

The causes of actions authorized in this act are in addition to, and do not limit or affect, other actions available by statute or common law, now or in the future. The statutory causes of action created by this act are in addition to the common law bad faith causes of action and in no way limit remedies or rights established

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1	by common law for the cause of action for breach of the duty of good
2	faith and fair dealing under Oklahoma law.
3	SECTION 9. This act shall become effective November 1, 2025.
4	Passed the House of Representatives the 13th day of March, 2025.
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6	Presiding Officer of the House
7	of Representatives
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9	Passed the Senate the day of, 2025.
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11	Presiding Officer of the Senate
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