

1 **SENATE FLOOR VERSION**

2 February 5, 2026

3 SENATE BILL NO. 1343

By: Stanley and Hines of the
Senate

4 and

5 Hilbert of the House
6

7
8 An Act relating to optometric services; creating the
9 Vision Plan Contractual Requirements Act; providing
10 short title; defining terms; prohibiting certain
11 contracts from requiring certain services; requiring
12 certain written approval; prohibiting use of certain
13 agreement to constitute certain approval; prohibiting
14 certain changes without certain written consent;
15 requiring certain payment to be based on actual
16 overpayment or underpayment; requiring certain notice
17 of ownership to certain subscriber; providing for
18 codification; and providing an effective date.

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- 1 1. "Health maintenance organization" means an organization
2 licensed in this state by the Insurance Commissioner pursuant to
3 Section 6902 of Title 36 of the Oklahoma Statutes;
- 4 2. "Insurer" means an insurance company licensed in this state
5 by the Commissioner;
- 6 3. "Nonprofit optometric service and indemnity corporations"
7 means corporations organized pursuant to Sections 2601 through 2667
8 of Title 36 of the Oklahoma Statutes;
- 9 4. "Subscriber" means an individual who is enrolled in an
10 individual or group vision plan as a principal subscriber and
11 dependents who are entitled to vision services and material under
12 the vision service plan solely because of their status as dependents
13 of the principal subscriber;
- 14 5. "Subscribership coverage" means any certificate or contract
15 issued to a subscriber specifying the vision coverage to which the
16 subscriber is entitled;
- 17 6. "Vision plan organization" means any affiliate, subsidiary,
18 agent, contractor, subcontractor, or other designee of a person or
19 entity including, but not limited to, an insurer, health maintenance
20 organization, or nonprofit optometric service and indemnity
21 corporation that markets, sells, offers, issues, underwrites,
22 administers, manages, conducts, operates, establishes fee schedules
23 or reimbursement rates, adjudicates, pays claims for, or provides
24 utilization management or prior authorization for, or exercises

1 control over, one or more prepaid, discount, or reimbursement vision
2 service plans;

3 7. "Vision service plan" means a contractual arrangement where
4 any vision plan organization pays for, reimburses, or discounts the
5 cost of vision services whether offered on a stand-alone basis or as
6 a part of, or as a rider to, any other health, welfare, or insurance
7 coverage and regardless of the form of consideration including, but
8 not limited, to premiums, subscription fees, administrative fees,
9 capitation, or other remuneration; and

10 8. "Vision services" means services or materials including, but
11 not limited to, exams, eyeglasses, or contact lenses.

12 C. No contract between a vision plan organization and an
13 optometrist shall require an optometrist to provide services to
14 subscribers at a fee set by the vision plan organization unless the
15 services are covered vision services under the applicable vision
16 service plan.

17 D. All vision service plans offered by a vision plan
18 organization shall require an optometrist's written approval.

19 E. Vision plan organizations shall not:

20 1. Utilize an optometrist's agreement to the contractual terms
21 of one group agreement for vision services to constitute approval to
22 another agreement to provide vision services;

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1 2. Change the terms, discounts, or reimbursement amounts during
2 the term of the optometrist's agreement without written consent to
3 an amendment of the agreement;

4 3. Require or incentivize an optometrist to use certain vision
5 services;

6 4. Incentivize a subscriber to receive vision care services at
7 an entity owned, in whole or in part, by such vision plan
8 organization; or

9 5. Use extrapolation to complete an audit of an optometrist.

10 F. Any overpayment or underpayment due to an optometrist or any
11 refund to a vision service plan shall be based on actual overpayment
12 or underpayment and shall not be based on extrapolation.

13 G. Any entity providing vision care services that has any
14 ownership, in whole or in part, by a vision plan organization shall
15 notify subscribers of such ownership.

16 SECTION 2. This act shall become effective November 1, 2026.

17 COMMITTEE REPORT BY: COMMITTEE ON BUSINESS AND INSURANCE
18 February 5, 2026 - DO PASS
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