

BILL SUMMARY
2nd Session of the 60th Legislature

Bill No.:	HB4294
Version:	POLPCS1
Request Number:	16370
Author:	Rep. Pae
Date:	2/17/2026
Impact:	HealthChoice Plan: Potential Costs

Research Analysis

The proposed policy committee substitute for HB 4294 requires all individual and group health insurance policies that provide medical and surgical benefits to adopt medical policies that provide coverage for medically necessary neurostimulation devices if prescribed by a licensed physician who is actively treating the enrollee.

HB 4294 requires all individual and group health insurance policies to provide the same coverage benefits to any individual diagnosed with epilepsy as they would to those who have not. No insurer can terminate coverage or refuse to renew based on an epilepsy diagnosis. Additionally, policies must provide coverage for medically necessary neurostimulation devices if prescribed by a licensed physician who is actively treating the enrollee.

Prepared By: Suzie Nahach, House Research Staff

Fiscal Analysis

HB 4294 ensures equal health insurance coverage for individuals with epilepsy and requires plans offering medical and surgical benefits to cover medically necessary neurostimulation devices when prescribed by the physician treating the enrollee.

According to the Oklahoma Health Care Authority (OHCA), the measure may affect the state HealthChoice plan. There is no impact on the state's Medicaid plan. As OHCA provides feedback on potential costs to the HealthChoice plan, this impact will be updated.

Prepared By: Alexandra Ladner, House Fiscal Staff

Other Considerations

None.