

**BILL SUMMARY**  
1<sup>st</sup> Session of the 60<sup>th</sup> Legislature

<b>Bill No.:</b>	<b>SB109</b>
<b>Version:</b>	<b>CCR A</b>
<b>Request Number:</b>	
<b>Author:</b>	<b>Rep. Miller</b>
<b>Date:</b>	<b>5/20/2025</b>
<b>Impact:</b>	<b>See Analysis Below</b>

**Research Analysis**

The CCR A for SB109 restores the title and enacting clause.

SB 109 requires any health benefit plan offered, issued, or renewed in this state on or after the act's effective date to provide coverage for clinical genetic testing for an inherited gene mutation in individuals with a person or family history of cancer and evidence-based cancer imaging for individuals with an increased risk of cancer. Coverage under this will not be subject to any annual deductibles, copayments, or coinsurance limits as established for all covered benefits under the health benefit plan. If application of this would result in health savings account ineligibility, the provisions will only apply to a high deductible plan after the enrollee has satisfied the minimum deductible.

Prepared By: Suzie Nahach, House Research Staff

**Fiscal Analysis**

According to the Oklahoma Health Care Authority (OHCA), the fiscal impact of this measure is \$150,000.00. OHCA believes that impact to HealthChoice is negligible given the overall total that is spent on claims each year. Therefore, this measure creates no real fiscal impact to the state budget.

The CCR restores title and enacting clause. There is still a fiscal impact of \$150,000.00 from the measure to OHCA. OHCA does believe it could absorb the impact within its operational budget.

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**Other Considerations**

None.