OKLAHOMA STATE SENATE GENERAL CONFERENCE COMMITTEE ON APPROPRIATIONS COMMITTEE REPORT

May 19, 2025

Mr. President:

Mr. Speaker:

The Conference Committee, to which was referred

<u>SB202</u>

By: Daniels of the Senate and Hills of the House

Title: Medicaid; modifying eligibility requirements for self-funded or self-insured health care plan to participate in certain premium assistance program. Emergency.

together with Engrossed House Amendments thereto, beg leave to report that we have had the same under consideration and herewith return the same with the following recommendations:

1. Advise that the conferees have been unable to agree.

Senate Action	Date	House Action	Date
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SB JOH

Respectfully submitted,

SENATE CONFEREES Hall Pederson Prie Brooks Pugh Dossett Rader Goll Reinhardt Good Rosino Green Sacchieri Haste UN 11 Seifried Hicks E C Howard stanle C Jech ewa Thompson Kirt nell Ce in Murdoek Weaver

Woods

HOUSE CONFEREES:

Conference Committee on Commerce and Economic Development Oversight

1	ENGROSSED HOUSE AMENDMENT TO
2	ENGROSSED SENATE BILL NO. 202 By: Daniels of the Senate
3	and
4	Hill of the House
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7	An Act relating to the state Medicaid program;
8	amending 56 O.S. 2021, Section 1010.1, as last amended by Section 2, Chapter 133, O.S.L. 2024 (56
9	O.S. Supp. 2024, Section 1010.1), which relates to premium assistance program; modifying eligibility
10	requirements for self-funded or self-insured health care plan to participate in premium assistance
11	program; conforming language; updating statutory language; updating statutory references; and
12	declaring an emergency.
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15	AMENDMENT NO. 1. Page 1, lines 6 through 10 1/2, strike the title
16	to read:
17	"[state Medicaid program - premium assistance
18	program - eligibility requirements - self-funded or
19	self-insured health care plan -
20	emergency]"
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1	Passed the House of Representatives the 1st day of May, 2025.
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4	Presiding Officer of the House of
5	Representatives
6	Passed the Senate the day of, 2025.
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9	Presiding Officer of the Senate
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1	ENGROSSED SENATE
2	BILL NO. 202 By: Daniels of the Senate
Z	and
3	Hill of the House
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6	An Act relating to the state Medicaid program; amending 56 O.S. 2021, Section 1010.1, as last
7	amended by Section 2, Chapter 133, O.S.L. 2024 (56 O.S. Supp. 2024, Section 1010.1), which relates to
8	premium assistance program; modifying eligibility requirements for self-funded or self-insured health
9	care plan to participate in premium assistance program; conforming language; updating statutory
10	language; updating statutory references; and declaring an emergency.
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13	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
14	SECTION 1. AMENDATORY 56 O.S. 2021, Section 1010.1, as
15	last amended by Section 2, Chapter 133, O.S.L. 2024 (56 O.S. Supp.
16	2024, Section 1010.1), is amended to read as follows:
17	Section 1010.1. A. Section 1010.1 et seq. of this title shall
18	be known and may be cited as the "Oklahoma Medicaid Program Reform
19	Act of 2003".
20	B. Recognizing that many Oklahomans do not have health care
21	benefits or health care coverage, that many small businesses cannot
22	afford to provide health care benefits to their employees, and that,
23	under federal law, barriers exist to providing Medicaid benefits to
24	the uninsured, the Legislature hereby establishes provisions to

1 lower the number of uninsured, assist businesses in their ability to afford health care benefits and coverage for their employees, and 2 eliminate barriers to providing health coverage to eligible 3 enrollees under federal law. 4

5 C. Unless otherwise provided by law, the Oklahoma Health Care Authority shall provide coverage under the state Medicaid program to 6 children under the age of eighteen (18) years whose family incomes 7 do not exceed one hundred eighty-five percent (185%) of the federal 8 9 poverty level.

The Authority is directed to apply for a waiver or 10 D. 1. waivers to the Centers for Medicare and Medicaid Services (CMS) that 11 12 will accomplish the purposes outlined in subsection B of this section. The Authority is further directed to negotiate with CMS to 13 include in the waiver authority provisions to: 14

increase access to health care for Oklahomans, reform the Oklahoma state Medicaid Program program to 16 b. promote personal responsibility for health care 17 services and appropriate utilization of health care 18 benefits through the use of public-private cost 19 sharing, 20

с. enable small employers, and/or employed, uninsured 21 adults with or without children to purchase employer-22 sponsored, state-approved private, or state-sponsored 23 health care coverage through a state premium 24

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1assistance payment plan. If by January 1, 2012, the2Oklahoma Employer/Employee Partnership for Insurance3Coverage premium assistance program is not consuming4more than seventy-five percent (75%) of its dedicated5source of funding, then the program will be expanded6to include parents of children eligible for Medicaid,7and

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d. develop flexible health care benefit packages based
 upon patient need and cost.

The Authority may phase in any waiver or waivers it receives
 based upon available funding.

3. The Authority is authorized to develop and implement a premium assistance plan to assist small businesses and/or their eligible employees to purchase employer-sponsored insurance or "buyin" to a state-sponsored benefit plan.

4. The Authority is authorized to seek from the Centers 16 а. for Medicare and Medicaid Services any waivers or 17 amendments to existing waivers necessary to accomplish 18 an expansion of the premium assistance program to: 19 include for-profit employers with two hundred 20 (1)fifty employees or less up to any level supported 21 by existing funding resources, and 22 23

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1 (2) include not-for-profit employers with five hundred employees or less up to any level 2 supported by existing funding resources. 3 Foster parents employed by employers with greater than 4 b. 5 two hundred fifty employees shall be exempt from the qualifying employer requirement provided for in this 6 paragraph and shall be eligible to qualify for the 7 premium assistance program provided for in this 8 9 section if supported by existing funding. For purposes of this paragraph, "for-profit employer" shall 10 Ε. mean an entity which is not exempt from taxation pursuant to the 11 provisions of Section 501(c)(3) of the Internal Revenue Code of 12 13 1986, as amended, and "not-for-profit employer" shall mean an entity which is exempt from taxation pursuant to the provisions of Section 14 501(c)(3) of the Internal Revenue Code of 1986, as amended. 15 The Authority is authorized to seek from the Centers for 16 F. Medicare and Medicaid Services any waivers or amendments to existing 17 waivers necessary to accomplish an extension of the premium 18 assistance program to include qualified employees whose family 19 income does not exceed two hundred fifty percent (250%) of the 20 federal poverty level, subject to the limit of federal financial 21 participation. 22 23 24

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G. The Authority is authorized to create as part of the premium
 assistance program an option to purchase a high-deductible health
 insurance plan that is compatible with a health savings account.

H. 1. There is hereby created in the State Treasury a
revolving fund to be designated the "Health Employee and Economy
Improvement Act (HEEIA) Revolving Fund".

7 2. The fund shall be a continuing fund, not subject to fiscal8 year limitations, and shall consist of:

9 a. all monies received by the Authority pursuant to this
10 section and otherwise specified or authorized by law,
11 b. monies received by the Authority due to federal
12 financial participation pursuant to Title XIX of the
13 Social Security Act, and

14 c. interest attributable to investment of money in the 15 fund.

3. All monies accruing to the credit of the fund are hereby appropriated and shall be budgeted and expended by the Authority to implement a premium assistance plan and to fund the state share for the Oklahoma <u>state</u> Medicaid Program <u>program</u> on or after July 1, 2020, unless otherwise provided by law.

I. 1. The Authority shall establish a procedure for verifying
an applicant's individual income by utilizing available Oklahoma Tax
Commission records, new hire report data collected by the Oklahoma
Employment Security Commission, and child support payment data

collected by the Department of Human Services in accordance with
 federal and state law.

2. The Oklahoma Tax Commission, Oklahoma Employment Security
Commission, and Department of Human Services shall cooperate in
accordance with federal and state law with the Authority to
establish procedures for the secure electronic transmission of an
applicant's individual income data to the Authority.

3. The Department of Public Safety shall cooperate in
accordance with federal and state law with the Authority to
establish procedures for the secure electronic transmission of an
applicant's individual identification data to the Authority.

J. An employer participating in the premium assistance program ereated under this section as of May 1, 2024, may utilize a <u>A</u> selffunded or self-insured health care plan as a participating health care plan shall be eligible to participate in the premium assistance program created under this section if:

- The self-funded or self-insured health care plan meets at
 least one of the following conditions:
- 19a.the plan is utilized by an employer that was20participating in the premium assistance program as of21May 1, 2024, or
- 22 <u>b.</u> the plan is owned and operated by an interlocal self 23 <u>funded public trust formed under the Oklahoma Statutes</u>
 24 <u>and comprised of local government employers;</u>

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1 The self-funded or self-insured health care plan is: 2. recognized by the Insurance Department under Section 2 a. 6012 of Title 36 of the Oklahoma Statutes, if the plan 3 4 meets the conditions of subparagraph a of paragraph 1 of this subsection, or 5 under the oversight of the Office of the Attorney 6 b. General, if the plan meets the conditions of 7 subparagraph b of paragraph 1 of this subsection; 8 9 2. 3. The self-funded or self-insured health care plan covers all essential health benefits as required by the Authority and all 10 other health benefits required under applicable federal laws; 11 12 3. 4. The self-funded or self-insured health care plan otherwise complies with all applicable federal laws including, but 13 not limited to, the Employee Retirement Income Security Act of 1974 14 15 (ERISA); 4. 5. The self-funded or self-insured health care plan assesses 16 a monthly premium on members and maintains a rate schedule for 17 provider employer reimbursement; 18 5. 6. The self-funded or self-insured health care plan meets 19 actuarial standards for the premium assistance program as determined 20 by the Authority and the employer submits an attestation to the 21 Insurance Department or the Office of the Attorney General, as 22 applicable, that the self-funded or self-insured health care plan 23 meets such actuarial standards; and 24

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1	$\frac{6}{1}$ The Authority receives the necessary federal approval for
2	self-funded or self-insured health care plans to participate in the
3	premium assistance program.
4	SECTION 2. It being immediately necessary for the preservation
5	of the public peace, health or safety, an emergency is hereby
6	declared to exist, by reason whereof this act shall take effect and
7	be in full force from and after its passage and approval.
8	Passed the Senate the 12th day of March, 2025.
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10	Presiding Officer of the Senate
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12	Passed the House of Representatives the day of,
13	2025.
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15	Presiding Officer of the House
16	of Representatives
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