

Senate Fiscal Summary
2nd Session of the 60th Legislature



Senate Bill 1343

Version:	Floor
Agency:	Oklahoma Health Care Authority
Senate Author:	Stanley
House Author:	
FY'27 Impact:	\$0
Full Year Impact:	\$0

**Bill Summary and
Fiscal Analysis:**

SB 1343 prohibits contracts between a vision plan organization (VPO) and an optometrist from requiring an optometrist to provide services to subscribers at a fee set by the VPO unless the services are covered vision services under the applicable vision service plan. All vision service plans offered by a VPO must require an optometrist's written approval. VPOs are prohibited from taking certain actions towards an agreement with an optometrist and requiring or incentivizing optometrists and subscribers to use or receive certain services, and from using extrapolation to complete and audit of an optometrist. Over- or -underpayments due to an optometrist or any refund to a vision service plan shall be based on actual over- or -underpayment and shall not be based on extrapolation. Entities providing vision care services that have any ownership by a VPO must notify subscribers of such ownership.

The Oklahoma Health Care Authority shares that there is no fiscal impact to Medicaid and no budget impact to EGID. The Oklahoma Insurance Department, a non-appropriated agency, shares there is no impact to their budget.

Fiscal impact provided by the Oklahoma Health Care Authority, Oklahoma Insurance Department, and Senate Fiscal Staff.