

1 ENGROSSED HOUSE AMENDMENT  
TO  
2 ENGROSSED SENATE BILL NO. 1067 By: Rosino of the Senate  
3 and  
4 Stinson of the House  
5  
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7 An Act relating to health insurance; amending Section  
8 3, Chapter 356, O.S.L. 2024 (36 O.S. Supp. 2024,  
9 Section 6050.3), which relates to the Out-of-Network  
10 Ambulance Service Provider Act; authorizing local  
11 governmental entities to submit certain rates to the  
12 Insurance Department; requiring the Department to  
establish and maintain certain database; modifying  
reimbursement rates and criteria for certain  
ambulance services; updating statutory reference;  
updating statutory language; and providing an  
effective date.

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17 AMENDMENT NO. 1. Strike the title, enacting clause, and entire bill  
18 and insert:

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21 "An Act relating to health insurance; amending  
22 Section 3, Chapter 356, O.S.L. 2024 (36 O.S. Supp.  
23 2024, Section 6050.3), which relates to the Out-of-  
24 Network Ambulance Service Provider Act; authorizing  
local governmental entities or ambulance service  
providers to submit certain rates to the Insurance  
Department; requiring the Department to establish and  
maintain certain database; modifying reimbursement  
rates and criteria for certain ambulance services;

1 requiring the Department to submit certain report;  
2 providing for the cessation of certain rates;  
3 providing an exception; and providing an effective  
4 date.  
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6 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

7 SECTION 1. AMENDATORY Section 3, Chapter 356, O.S.L.  
8 2024 (36 O.S. Supp. 2024, Section 6050.3), is amended to read as  
9 follows:

10 Section 6050.3. A. A local governmental entity, or ambulance  
11 service provider operating on its behalf, may annually submit to the  
12 Insurance Department, in the form and manner prescribed by the  
13 Insurance Commissioner, the ambulance service rates set or approved,  
14 whether in contract or ordinance, by the local governmental entity.

15 B. By January 1, 2026, the Department shall establish and  
16 maintain on its public website a database listing all submitted  
17 rates.

18 C. The minimum allowable reimbursement rate under any health  
19 care benefit plan issued by a health care insurer to an out-of-  
20 network ambulance service provider for providing covered ambulance  
21 services shall be ~~at~~ the rates set or approved, whether in contract  
22 or ordinance, on May 1, 2025, submitted by a local governmental  
23 entity in the jurisdiction in which the covered ambulance services  
24 originate.

1 ~~B. In the absence of the rates as provided in subsection A of~~  
2 ~~this section, the rate shall be the lesser of:~~

3 ~~1. Three hundred twenty-five percent (325%), or ambulance~~  
4 ~~service provider operating on its behalf, as provided in subsection~~  
5 ~~A of this section, if the local governmental entity has submitted~~  
6 ~~such rates.~~

7 D. In absence of the rates provided in subsection A of this  
8 section, the rate shall be the lesser of:

9 1. Three hundred twenty-five percent (325%) of the current  
10 published rate for ambulance services as established by the Centers  
11 for Medicare and Medicaid Services under Title XVIII of the Social  
12 Security Act for the same services provided in the same geographic  
13 area; or

14 2. The ambulance service provider's billed charges.

15 ~~C.~~ E. Payment made in compliance with this section shall be  
16 considered payment in full for the covered ambulance services  
17 provided, except for any copayment, coinsurance, deductible, and  
18 other cost-sharing feature amounts required to be paid by the  
19 enrollee. An ambulance service provider is prohibited from billing  
20 the enrollee for any additional amounts for the paid covered  
21 ambulance services in excess of what the health care insurer pays.

22 ~~D.~~ F. All copayments, coinsurance, deductible, and other cost-  
23 sharing feature amounts ~~provided by~~ applicable to amounts calculated  
24 in accordance with subsection A of this section shall not exceed the

1 in-network copayment, coinsurance, deductible, and other cost-  
2 sharing features for the covered ambulance services received by the  
3 enrollee.

4 ~~F.~~ G. In administering and paying claims, a health care insurer  
5 shall comply with Section 1219 of ~~Title 36 of the Oklahoma Statutes~~  
6 this title.

7 H. The Department shall review the data from the database and  
8 submit a report by January 1, 2027, to the Governor, the President  
9 Pro Tempore of the Oklahoma State Senate, and the Speaker of the  
10 Oklahoma House of Representatives. The rates provided for in  
11 subsections C and D of this section shall cease to remain in effect  
12 unless the rates are modified by the Oklahoma Legislature prior to  
13 December 31, 2027.

14 SECTION 2. This act shall become effective January 1, 2026."

15 Passed the House of Representatives the 8th day of May, 2025.

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18 \_\_\_\_\_  
19 Presiding Officer of the House of  
Representatives

20 Passed the Senate the \_\_\_\_ day of \_\_\_\_\_, 2025.

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23 \_\_\_\_\_  
24 Presiding Officer of the Senate

1 ENGROSSED SENATE  
2 BILL NO. 1067

By: Rosino of the Senate

3 and

4 Stinson of the House

5  
6 An Act relating to health insurance; amending Section  
7 3, Chapter 356, O.S.L. 2024 (36 O.S. Supp. 2024,  
8 Section 6050.3), which relates to the Out-of-Network  
9 Ambulance Service Provider Act; authorizing local  
10 governmental entities to submit certain rates to the  
11 Insurance Department; requiring the Department to  
12 establish and maintain certain database; modifying  
13 reimbursement rates and criteria for certain  
14 ambulance services; updating statutory reference;  
15 updating statutory language; and providing an  
16 effective date.

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BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 3. AMENDATORY Section 3, Chapter 356, O.S.L.  
2024 (36 O.S. Supp. 2024, Section 6050.3), is amended to read as  
follows:

Section 6050.3. A. A local governmental entity, or ambulance  
service provider operating on its behalf, may annually submit to the  
Insurance Department, in the form and manner prescribed by the  
Insurance Commissioner, the ambulance service rates set or approved,  
whether in contract or ordinance, by the local governmental entity.

B. The Department shall establish and maintain on its public  
website a database listing all submitted rates.

1        C. The minimum allowable reimbursement rate under any health  
2 care benefit plan issued by a health care insurer to an out-of-  
3 network ambulance service provider for providing covered ambulance  
4 services shall be ~~at~~ the least of:

5        1. The rates ~~set or approved, whether in contract or ordinance,~~  
6 submitted by a local governmental entity ~~in the jurisdiction in~~  
7 ~~which the covered ambulance services originate.~~

8        ~~B. In the absence of the rates as provided in subsection A of~~  
9 ~~this section, the rate shall be the lesser of:~~

10        ~~1. Three hundred twenty-five percent (325%), or ambulance~~  
11 service provider operating on its behalf, as provided in subsection  
12 A of this section, if the local governmental entity has submitted  
13 such rates;

14        2. Two hundred seventy-five percent (275%) of the current  
15 published rate for ambulance services as established by the Centers  
16 for Medicare and Medicaid Services under Title XVIII of the Social  
17 Security Act for the same services provided in the same geographic  
18 area; or

19        ~~2.~~ 3. The ambulance service provider's billed charges.

20        ~~C.~~ D. Payment made in compliance with this section shall be  
21 considered payment in full for the covered ambulance services  
22 provided, except for any copayment, coinsurance, deductible, and  
23 other cost-sharing feature amounts required to be paid by the  
24 enrollee. An ambulance service provider is prohibited from billing

1 the enrollee for any additional amounts for the paid covered  
2 ambulance services in excess of what the health care insurer pays.

3 ~~D.~~ E. All copayments, coinsurance, deductible, and other cost-  
4 sharing feature amounts ~~provided by~~ applicable to amounts calculated  
5 in accordance with subsection A of this section shall not exceed the  
6 in-network copayment, coinsurance, deductible, and other cost-  
7 sharing features for the covered ambulance services received by the  
8 enrollee.

9 ~~E.~~ F. In administering and paying claims, a health care insurer  
10 shall comply with Section 1219 of Title 36 of the Oklahoma Statutes.

11 SECTION 4. This act shall become effective January 1, 2026.

12 Passed the Senate the 26th day of March, 2025.

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14 \_\_\_\_\_  
15 Presiding Officer of the Senate

16 Passed the House of Representatives the \_\_\_\_ day of \_\_\_\_\_,  
17 2025.

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20 Presiding Officer of the House  
21 of Representatives  
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