

1 ENGROSSED SENATE AMENDMENT  
TO  
2 ENGROSSED HOUSE  
BILL NO. 2387

By: Griffith, Sherrer and  
Hoskin of the House

and

Griffin of the Senate

[ poor persons - authorizing Oklahoma Health Care  
Authority to seek waiver to expand premium  
assistance program to include certain full-time-  
equivalent employees - effective date ]

14 AMENDMENT NO. 1. Page 1, strike the enacting clause

Passed the Senate the 20th day of April, 2016.

\_\_\_\_\_  
Presiding Officer of the Senate

19 Passed the House of Representatives the \_\_\_\_ day of \_\_\_\_\_,  
20 2016.

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

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10 equivalent employees - effective date ]  
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13 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

14 SECTION 1. AMENDATORY 56 O.S. 2011, Section 1010.1, is  
15 amended to read as follows:

16 Section 1010.1 A. Section 1010.1 et seq. of this title shall  
17 be known and may be cited as the "Oklahoma Medicaid Program Reform  
18 Act of 2003".

19 B. Recognizing that many Oklahomans do not have health care  
20 benefits or health care coverage, that many small businesses cannot  
21 afford to provide health care benefits to their employees, and that,  
22 under federal law, barriers exist to providing Medicaid benefits to  
23 the uninsured, the Oklahoma Legislature hereby establishes  
24 provisions to lower the number of uninsured, assist businesses in

1 their ability to afford health care benefits and coverage for their  
2 employees, and eliminate barriers to providing health coverage to  
3 eligible enrollees under federal law.

4 C. Unless otherwise provided by law, the Oklahoma Health Care  
5 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 poverty level.

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

- 14 a. increase access to health care for Oklahomans,
- 15 b. reform the Oklahoma Medicaid Program to promote  
16 personal responsibility for health care services and  
17 appropriate utilization of health care benefits  
18 through the use of public-private cost sharing,
- 19 c. enable small employers, and/or employed, uninsured  
20 adults with or without children to purchase employer-  
21 sponsored, state-approved private, or state-sponsored  
22 health care coverage through a state premium  
23 assistance payment plan. If by January 1, 2012, the  
24 Employer/Employee Partnership for Insurance Coverage

1 Premium Assistance Program is not consuming more than  
2 seventy-five percent (75%) of its dedicated source of  
3 funding, then the program will be expanded to include  
4 parents of children eligible for Medicaid, and

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

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

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

13 4. a. The Authority is authorized to seek from the Centers  
14 for Medicare and Medicaid Services any waivers or  
15 amendments to existing waivers necessary to accomplish  
16 an expansion of the premium assistance program to:

17 (1) include for-profit employers with two hundred  
18 fifty full-time-equivalent employees or less up  
19 to any level supported by existing funding  
20 resources, and

21 (2) include not-for-profit employers with five  
22 hundred full-time-equivalent employees or less up  
23 to any level supported by existing funding  
24 resources.

1           b. Foster parents employed by employers with greater than  
2           two hundred fifty full-time-equivalent employees shall  
3           be exempt from the qualifying employer requirement  
4           provided for in this paragraph and shall be eligible  
5           to qualify for the premium assistance program provided  
6           for in this section if supported by existing funding.

7           E. For purposes of this paragraph, "for-profit employer" shall  
8           mean an entity which is not exempt from taxation pursuant to the  
9           provisions of Section 501(c)(3) of the Internal Revenue Code and  
10          "not-for-profit employer" shall mean an entity which is exempt from  
11          taxation pursuant to the provisions of Section 501(c)(3) of the  
12          Internal Revenue Code.

13          F. The Authority is authorized to seek from the Centers for  
14          Medicare and Medicaid Services any waivers or amendments to existing  
15          waivers necessary to accomplish an extension of the premium  
16          assistance program to include qualified employees whose family  
17          income does not exceed two hundred fifty percent (250%) of the  
18          federal poverty level, subject to the limit of federal financial  
19          participation.

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

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

4 2. The fund shall be a continuing fund, not subject to fiscal  
5 year limitations, and shall consist of:

- 6 a. all monies received by the Authority pursuant to this  
7 section and otherwise specified or authorized by law,
- 8 b. monies received by the Authority due to federal  
9 financial participation pursuant to Title XIX of the  
10 Social Security Act, and
- 11 c. interest attributable to investment of money in the  
12 fund.

13 3. All monies accruing to the credit of the fund are hereby  
14 appropriated and shall be budgeted and expended by the Authority to  
15 implement a premium assistance plan, unless otherwise provided by  
16 law.

17 I. 1. The Authority shall establish a procedure for verifying  
18 an applicant's individual income by utilizing available Oklahoma Tax  
19 Commission records, new hire report data collected by the Oklahoma  
20 Employment Security Commission, and child support payment data  
21 collected by the Department of Human Services in accordance with  
22 federal and state law.

23 2. The Oklahoma Tax Commission, Oklahoma Employment Security  
24 Commission, and Department of Human Services shall cooperate in

1 accordance with federal and state law with the Authority to  
2 establish procedures for the secure electronic transmission of an  
3 applicant's individual income data to the Authority.

4 SECTION 2. AMENDATORY 56 O.S. 2011, Section 1010.2, is  
5 amended to read as follows:

6 Section 1010.2 ~~A.~~ As used in the Oklahoma Medicaid Program  
7 Reform Act of 2003:

8 1. "Authority" means the Oklahoma Health Care Authority;

9 2. "Board" means the Oklahoma Health Care Authority Board;

10 3. "Administrator" means the chief executive officer of the  
11 Oklahoma Health Care Authority;

12 4. "Eligible person" means any person who meets the minimum  
13 requirements established by:

14 a. rules promulgated by the Oklahoma Health Care  
15 Authority Board pursuant to the requirements of Title  
16 XIX of the federal Social Security Act, 42 U.S.C.,  
17 Section 1396 et seq.,

18 b. a waiver under the provisions of this act, or

19 c. any state law authorizing the purchase of small  
20 employer buy-in coverage;

21 5. "Full-time-equivalent employee" means any officer or  
22 employee of a participating employer, whose employment is not  
23 seasonal or temporary. For purposes of calculation of employer size  
24 in paragraph 4 of subsection D of Section 1010.1 of this title,

1 full-time-equivalent employee shall not include individuals whose  
2 employment requires at least one thousand (1,000) hours of work per  
3 year;

4 6. "Member" means an eligible person who enrolls in the  
5 Oklahoma Medicaid Healthcare Options System;

6 ~~6.~~ 7. "Nonparticipating provider" means a person who provides  
7 hospital or medical care pursuant to the Oklahoma Medicaid Program  
8 but does not have a managed care health services contract or  
9 subcontract within the Oklahoma Medicaid Healthcare Options System;

10 ~~7.~~ 8. "Prepaid capitated" means a mode of payment by which a  
11 health care provider directly delivers health care services for the  
12 duration of a contract to a maximum specified number of members  
13 based on a fixed rate per member, regardless of the actual number of  
14 members who receive care from the provider or the amount of health  
15 care services provided to any member;

16 ~~8.~~ 9. "Participating provider" means any person or organization  
17 who contracts with the Authority for the delivery of  
18 hospitalization, eye care, dental care, medical care and other  
19 medically related services to members or any subcontractor of such  
20 provider delivering services pursuant to the Oklahoma Medicaid  
21 Healthcare Options System; and

22 ~~9.~~ 10. "System" means the Oklahoma Medicaid Healthcare Options  
23 System established by the Oklahoma Medicaid Program Reform Act of  
24 2003.



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SECTION 3. This act shall become effective November 1, 2016.  
Passed the House of Representatives the 8th day of March, 2016.

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Presiding Officer of the House  
of Representatives

Passed the Senate the \_\_\_ day of \_\_\_\_\_, 2016.

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Presiding Officer of the Senate