



STATE OF OKLAHOMA  
OKLAHOMA HEALTH CARE AUTHORITY

**MEDICAL ADVISORY COMMITTEE MEETING  
AGENDA**

**July 18, 2013**

**1:00 p.m. – Ponca Conference Room  
2401 NW 23<sup>rd</sup> St., Suite 1A  
Oklahoma City, OK 73107**

- I. Welcome, Roll Call, and Public Comment Instructions
- II. Approval of minutes of the March 13, 2013 Medical Advisory Committee Meeting
- III. MAC Member Comments/Discussion
- IV. Legislative Update: Carter Kimble, Governmental Affairs
- V. Financial Report: Gloria Hudson, Director of General Accounting
  - A. April Financial Summary
  - B. April Financial Detail Report
- VI. SoonerCare Operations Update: Della Gregg, Manager, Health Management Program
  - A. SoonerCare Programs Report
  - B. HMP Update
- VII. Disaster Relief Efforts for Members: Ed Long and Marlene Asmussen
- VIII. Living Choice Update: Erin Jackson
- IX. Leavitt Report: Buffy Heater
  - A. Recommendations
  - B. Insure Oklahoma Update
- X. Informational Items: Joseph Fairbanks
- XI. New Business
- X. Adjourn

Next Meeting: Thursday, September 19, 2013



STATE OF OKLAHOMA  
OKLAHOMA HEALTH CARE AUTHORITY

**MEDICAL ADVISORY COMMITTEE MEETING  
MINUTES  
March 13, 2013**

Members present: Ms. Bellah, Ms. Sara Baker for Ms. Bierig, Mr. Wade Hamil for Dr. Bourdeau (pending confirmation from org. that is their appointed alternate), Ms. Case, Dr. Crawford, Mr. Rick Snyder for Ms. Patti Davis, Ms. Felty, Ms. Fritz, Mr. Goforth, Ms. Holiman-James, Mr. Jones, Ms. Mays, Dr. McNeill, Dr. Ogle, Dr. Rhoades, Ms. Russell, Ms. Slatton-Hodges, Mr. Tallent, Dr. Wells, Ms. Wheaton, Dr. Wright

Members absent: Ms. Brinkley, Dr. Cavallaro, Dr. Grogg, DME Rep., Mr. Patterson, Mr. Pilgrim (Ms. Kasie McCoy was here, but is not the alternate), Dr. Post, Dr. Rhynes (Ms. Sandra Naifeh was here but is not an O.D.), Dr. Simon, Dr. Woodward

I. Welcome, Roll Call, and Public Comment Instructions

Mr. Gomez announced that Action Item 12-36 is pulled from the agenda.

There was public comment. Ms. Deborah Spaeth discussed behavioral health services being discontinued for children ages 0-3 years old, and stated there are evidence-based benefits. Ms. Spaeth suggested making changes, increase level of credentialing and have services if providers use evidence-based practices and licensed practitioners.

Mr. Alan Jackson with Oak Tree Counseling made public comment that changes were made quickly, there has to be oversight and standards maintained, and he requested consideration that services not be restricted and consider what can benefit. Mr. Jackson states they have some clinicians without license, but with experience and other credentials.

Mr. David Peters of Family Services, Tulsa made public comment and states behavioral health specialists will have to have Bachelors degrees in July, and has a concern that a degree in another field will not qualify.

II. Approval of minutes of the January 17, 2013 Medical Advisory Committee Meeting

Motion by Ms. Holiman-James, ??? seconded. Approved with amendment that Dr. Wright stated he did arrive, however, was late.

III. MAC Member Comments/Discussion

Dr. Crawford spoke to the MAC about questions from Leavitt Partners, and OHCA will e-mail the questions for MAC members to respond to Leavitt Partners by the end of March.

IV. Legislative Update: Ed Long, Acting Governmental Affairs Liaison

Mr. Long addressed the MAC and informed them that we are watching: The number of days legislature has to review our Rules; and meet certain criteria to be emergency. HB1552 Managed Care bill, contract out fully capitated. Dr. Crawford asked – How is it different from 1990? Mr. Long responded it is not different, and providers did not care for that system. It passed out of House. Other items we are watching - HB2086 kept in-house; HB2151 Pilot Studies; HB1031 SHOPP, until 2017; SB231 Disbursing Fund; SB 272.

V. Financial Report: Gloria Hudson, Director of General Accounting

- A. December Financial Summary
- B. December Financial Detail Report

Ms. Hudson reviewed the financial reports. There were no questions.

VI. SoonerCare Operations Update: Casey Dunham

- A. SoonerCare Programs Report
- B. MMIS enhancements impacting operations – Lynn Puckett, Casey Dunham, Diana Capps
- C. SFY 2012 SoonerCare Choice CAHPS Results – Ryan Morlock
- D. Social Service Coordinators – Maria Ordonez

Mr. Dunham reviewed the SoonerCare Programs Report. Dr. Crawford asked for a national per member per month averages comparison. Mr. Dunham will get the information to the MAC.

MMIS was discussed. Upgrades allow faster processing and fewer backloads of claims. E-mail communication is improving. We are working with postal service files and updated 10,331 records with only 2,000 whose addresses are unknown. Provider Portal supports ICD-10, and allows electronic referrals; enhanced notification system. More information to be on website. We will be ready in advance and as of October 2013 providers can contact [icd10project@okhca.org](mailto:icd10project@okhca.org).

Ms. Capps discussed Program Integrity and the Case Tracker and System Utilization. Enhancement requires CMS certification, upon collecting six months of claims data, and we hope to have the certification review done in July. The Health Information Exchange (HIE) is now named the Oklahoma Patient Information Exchange, and we hope this enhancement will be in operation early 2014. It is SoonerCare specific health information exchange available to SoonerCare providers to securely access members clinical data. We have a suite of software that will provide a clinical data repository where the data will reside in readiness for display and a clinical viewer. The source is our MMIS system and MedAi, a health modeling program. SoonerCare providers will be able to access members clinical data via the web portal, and be able to download a clinical health document directly to an EHR system.

A question was asked by the MAC how this will interface with SmartNet. It will not at this time, it is SoonerCare only.

Mr. Morlock presented the CAHPS handout.

Ms. Ordonez recognized National Social Workers Month, introducing those individuals on the OHCA staff.

VII. Action Items: Joseph Fairbanks

**ADMINISTRATIVE**

**12-03 Rural Health Clinics Update**— Rural Health Clinics policy is revised to allow RHCs to bill lab services separately, as they can under Medicare. RHC policy is also updated to eliminate obsolete language.

**Budget Impact:** Budget neutral

**12-13 ICD-9 Removal**— Agency policy is revised to remove references to the ICD-9 International Classification of Diseases diagnosis coding, which is being replaced by a new system of coding, ICD-10.

**Budget Impact:** Budget neutral

**12-20 Telemedicine** - OHCA rules for Telemedicine are being revised to include specific provider responsibilities to assure compliance with HIPAA guidelines. Current policy is silent to the appropriate HIPAA compliant applications, guidelines, devices, and/or safeguards concerning telemedicine services. The proposed revisions include additional conditions that apply to services rendered via telemedicine, provider responsibilities, and additional network standards as they relate to assuring HIPAA compliance during telemedicine related transmissions.

**Budget Impact:** Budget neutral

A question was asked about the access area for telemedicine. OHCA staff responded that this rule is to provide more telemedicine services, not less telemedicine services. Further clarification can be provided in a Dear Provider letter.

### **12-34 State Plan Personal Care**

Rules for State Plan Personal Care are revised to clarify compliance with the Long Term Care Security Act regarding background checks for providers of direct patient access for long term care services. The Long Term Care Security Act includes a listing of mandatory registry checks and requirements for background investigations and fingerprinting. The Act also requires that all background checks are to be administered through the Oklahoma State Department of Health (OSDH).

**Budget Impact:** Budget neutral

**12-38 Electronic Health Records Updates**— Policy on the Oklahoma Electronic Health Records Incentive Program will be updated to account for changes in federal rules on the program. Changes include adding additional options for patient volume calculation, expanding the definition of a Children's Hospital, adding an exception to the hospital-based eligible professional criteria, and allowing CMS to take over administrative appeals for cases in which they are the auditor on meaningful use provisions.

**Budget Impact:** Budget neutral

Extracted 12-20 and 12-34. 12-20 1 Nay, 12-34 1 Nay. Motion carried.

All in favor of 12-03, 12-13, 12-38; 12-20, 1 Nay; 12-34, 1 Nay. Mr. Tallent approved, Ms. Holiman-James seconded. Motion carried.

## **BEHAVIORAL HEALTH**

### **12-19 Outpatient Behavioral Health –**

- (1) Effective July 1, 2013, require that in order to qualify as a new Behavioral Health Rehabilitation Specialist (BHRS), individuals must be either an LBHP, CADC or certified as a Case Manager II by ODMHSAS. Individuals designated as BHRS prior to July 1, 2013 will have until July 1, 2014 to meet the new requirements;
- (2) Remove provisions allowing for grandfathering of BHRS and certified case managers who may have met certification requirements prior to the changes made over the years;
- (3) Enhance supervision requirements for BHRS by a LBHP;
- (4) Remove language that, as of July 1, 2013, will no longer be needed since the sunset provisions regarding specific dates when certain services will no longer be reimbursable when provided by Certified Alcohol and Drug Counselors (CADCs) will have passed;

- (5) Increase the number of available units of Medication Training and Support that are available for members from 1 unit per month to 2 units per month;
- (6) Add the ODMHSAS certification option for OPBH Agencies providing case management in lieu of national accreditation as well as to make minor "cleanup" changes to bring policy in line with current practices;
- (7) Align OHCA Behavioral Health Case Management (CM) policy with the certified behavioral health case manager certification policy proposed by ODMHSAS in Title 450 of the Administrative Code. There will now be more distinction within the levels of CM to better align education and training requirements for quality service provision and improve efficiency of the certification process by allowing Licensed Behavioral Health Professionals (LBHPs) and Certified Alcohol and Drug Counselors (CADCs) to provide case management services pursuant to the scope of their licensure/certification rather than requiring these individuals to go through the ODMHSAS certification process; and
- (8) Ensure compliance with laws related to confidentiality, including provisions requiring that services be provided in settings that assure and protect confidentiality.

**Budget Impact:** \$1.2 million in state savings (ODMHSAS), \$4 million in federal savings

Clarification on (1) – Prior authorization is required for over 4-5 year olds. The OHCA and ODMHSAS maintain that psychosocial rehabilitation services are not appropriate in the 0-3 years old age range, based on extensive review of studies and literature. Ms. Bella mentioned there are evidence-based practices designed for the 0-3 population, none of which behavioral health rehabilitation specialists can provide, it takes extra training. There are providers in the state who can provide the needed services to these children, and it is reimbursable. MAC members requested OHCA/Behavioral Health Advisory Committee to look at reimbursement to providers for parent education.

MAC moved to vote on this item separately - All in favor. Motion to approve. Ms. Fritz approved, Ms Bellah seconded. Motion carried.

#### **12-40 Inpatient Behavioral Health –**

- (1) Agency Inpatient Psychiatric Hospital rules are being revised to clarify the medical necessity criteria required for admission and continued stays in psychiatric residential treatment facility (PRTF) and acute levels of care;
- (2) Changes are also being proposed to the rules regarding Individual Plans of Care to ensure early parent/guardian involvement in the treatment of children under the age of 18 receiving inpatient psychiatric services as well as;
- (3) Revise the "active treatment" requirements for individuals 18-21 years of age receiving services in an acute psychiatric hospital by making the requirements less proscriptive for this age group since they typically do not receive services in children's psychiatric units, so providers should not be held to the same requirements;
- (4) Active treatment requirements for children under 18 are further revised to provide more clarity in areas that have been identified as causing provider confusion; and
- (5) Proposed revisions will also revise Inspection of Care (IOC) rules to provide the pro-rating timeline used when reviewing clinical documentation for compliance with active treatment

requirements as well as to clarify that certain "critical documents" cannot be substituted with other evaluations/assessments.

**Budget Impact:** Budget neutral

All in favor. Motion to approve. Dr. McNeill approved, Ms. Fritz seconded. Motion carried.

## DENTAL

**12-25 Dental clarification changes** – SoonerCare dental rules are revised to update pulp cap language to align with current practice and language contained in OAC 317:30-5-699. In addition, OAC 317:30-5-700 (C) Orthodontic rules are revised to align OHCA current verification of continuing education policy with the Oklahoma Board of Dentistry prerequisite licensing requirement. The amendment change to OHCA policy will require all General and Pediatric dentists providing orthodontic care to complete 60 hours of continuing education hours and at least 20 hours of continuing education in the field of orthodontics every (3) three year cycle.

**Budget Impact:** Budget neutral

This was the summary posted for comment in January 2013. Ms. Cox reminded the MAC that in January it was introduced to the MAC, to give them the opportunity to talk with their respective organizations, get comment back to the OHCA. This is the new process which was started, to give the organizations information on the items OHCA is looking at internally, prior to developing the rules. Previously OHCA gave summaries, and informed the MAC that OHCA was in the process of working and developing the rules. We gave a link to the public website, identified when the rule changes would be available, to give the MAC the opportunity to take it back to their respective organizations, get comment, get it back to OHCA. We have received comment on items, we do take those into consideration, make adjustments as we can, and work with the provider community and the member community. We introduced the new process because we thought it would be beneficial. Ms. Cox asked that this not be delayed, as we have given ample time for comment on this item.

MAC motioned to deny approval of 12-25. All in favor of not approving.

The MAC noted that as an advisory committee, although they recommended non-approval of this item, the Board could approve it.

## ELIGIBILITY

**12-41 A and B Kinship Guardianship Assistance Recipients** - Eligibility rules are amended to add the mandatory eligibility group of children receiving Kinship Guardianship Assistance. Once the State has established a kinship guardianship assistance program, SoonerCare eligibility is mandated by federal laws and regulations. These amendments will provide eligibility coverage whether the child receives the assistance through the program established by OKDHS or through kinship guardianship programs that may be established by tribes in the future.

**Budget Impact:** \$1.4 million state share, \$6.3 million federal share

**12-41 A and B Compliance with ACA Eligibility Rules** - Eligibility rules are amended to provide that eligibility for children, pregnant women, and parents and caretaker relatives is determined using the Modified Adjusted Gross Income (MAGI) methodology, as mandated by federal law. Rules are amended to add two eligibility groups mandated by federal law: Former foster care children aged 19-26, and CHIP children who would lose eligibility as a result of the MAGI method. Rules regarding eligibility determination procedures are amended to establish the passive renewal process mandated by federal law, as well as the federal rule that medical verification of pregnancy can only be required when the individual's declaration that she is pregnant is not reasonably compatible with other information available to the agency.

**Budget Impact:** \$1.4 million state share, \$6.3 million federal share

**12-41 A and B Elimination of Presumptive Eligibility for Pregnant Women** - Eligibility rules are amended to eliminate presumptive eligibility (PE) for pregnant women. Under the PE program, certain qualified SoonerCare providers used to determine pregnant women presumptively eligible for SoonerCare; the women then had 30 days to apply and be fully determined eligible or ineligible. The purpose of PE was to give pregnant women access to care quickly. PE is no longer used because pregnant women can now have their eligibility fully determined in real-time through Online Enrollment.

**Budget Impact:** \$1.4 million state share, \$6.3 million federal share

Motion to approve. 1 Nay. Mr. Tallent approved, Dr. Wright seconded. Motion carried.

## **GENETIC TESTING AND COUNSELING**

**12-37 Genetic Counseling**—Policy is amended to expand genetic counseling services to all members that are eligible for medically necessary genetic testing. Currently, we only cover genetic counseling for members with a pregnancy at high risk of genetic abnormalities.

**Budget Impact:** \$42,500 state share, \$82,500 federal share

**12-39 Genetic Testing** — Policy will be amended to define the circumstances under which genetic testing will be covered by OHCA. Both the volume and cost of genetic testing are growing, and the growth rates are expected to rise significantly going forward. Currently, OHCA has no written policy addressing the medical necessity of genetic testing, although claims are being paid through nonspecific laboratory codes.

Policy will set medical necessity criteria similar to other Medicaid states and private insurance, which requires the member to undergo a genetic risk assessment or display clinical evidence indicating a chance of a genetic abnormality and that those results change treatment, change health monitoring, provide prognosis, or provide information needed for genetic counseling for the patient.

**Budget Impact:** Budget neutral

Dr. McNeill motioned to approve, Ms. Fritz seconded. Motion carried.

## **HOSPITALS**

**12-33 SHOPP overpayment and recoupment procedures** - SHOPP rules are revised to clarify overpayment and recoupment procedures, if it is determined due to appeal, penalty, or other reason that additional allocation/recoupment is necessary.

**Budget Impact:** Budget neutral

Ms. Case motioned to approve, Ms. Bellah seconded. Motion carried.

## **INSURE OKLAHOMA**

**12-24 Insure Oklahoma** – OHCA rules are revised to align adult outpatient behavioral health services with children outpatient behavioral health services in the Individual Plan, which allows 48 visits per year.

**Budget Impact:** \$35,889 state savings, \$63,803 federal savings

Mr. Jones motioned to approve, Ms. Fritz seconded. Motion carried.

## **NURSING FACILITIES AND LONG TERM CARE**

### **12-42 – Long Term Care Sub-Acute Hospital Reimbursement Methodology**

OHCA proposes to amend Long Term Care (LTC) Sub-Acute Hospital policy to update reimbursement language from a prospective per diem methodology to a cost based methodology. This proposed change is to bring policy in alignment with the approved State Plan LTC reimbursement methodology.

**Budget Impact:** \$97,785 state share, \$173,000 federal share

**12-43 Nursing Facility Policy Clean-up**

The proposed rule change adds language clarifying that all program requirements set out in State Statute and Oklahoma Health Care Authority policy regarding wage enhancements for certain nursing facility employees have been met. The proposed rule change also clarifies that the Quality of Care fee assessed by the Oklahoma Health Care Authority is authorized through the Medicaid State Plan and clarifies that part of the fee structure is based on a waiver of uniformity as approved by the Centers for Medicare and Medicaid Services (CMS). Finally, proposed revisions include the removal of language incorrectly stating that rates for public ICF's/MR are set through a public rate setting process rather than the current practice of reimbursement based on cost reports. Other minor policy clarifications are also included as a part of the proposed rule change.

**Budget Impact:** Budget neutral

Mr. Tallent motioned to approve, Ms. Holiman-James seconded. Motion carried.

**PREGNANCY-RELATED**

**12-14 Certified Nurse Midwife-** OHCA rules for Nurse Midwives and Birthing Center services are being revised to align with current obstetric policy. Proposed changes include clarification concerning the type of nurse midwife approved to provide SoonerCare services, and the services the nurse midwife can provide to eligible members. Additionally, proposed revisions include clean-up to remove language that references outdated practices concerning enrollment, and format changes for consistency and clarity purposes.

**Budget Impact:** Budget neutral

Ms. Holiman-James motioned to approve, Ms. Fritz seconded. Motion carried.



## **PRIVATE DUTY NURSING PULLED**

~~**12-36 Private Duty Nursing Eligible Providers** — Policy will be amended to define eligible private duty nursing providers and require physicians to submit orders in addition to the treatment plan to verify medical need of treatments. OHCA will require a non-custodial caregiver to be the paid employee taking care of the child. Further, policy will be amended to allow for consideration of extenuating circumstances when action to reduce authorized private duty nursing services hours is being taken.~~

~~**Budget Impact:** Budget neutral~~

## **TRANSPORTATION**

**12-23 SoonerRide-** OHCA rules are revised to move meal and lodging related services to general provider policies as these services are not considered SoonerRide services. Additional revisions include clean-up to outdated Code of Federal Regulation references, and clarification concerning approved escorts.

**Budget Impact:** Budget neutral

**12-22 Transportation** – OHCA rules are revised define emergency and urgent as it relates to ambulance transports; rules are also to revised to clarify that out of state transports require a prior authorization. Additional revisions include clean-up to remove obsolete language to align with current practices.

**Budget Impact:** Budget neutral

Mr. Tallent motioned to approve, Ms. Bellah seconded. Motion carried.

## **VACCINES**

**12-35 Vaccine Administration** — Agency policy is amended with respect to vaccine administration as follows: For adults, the change will allow for reimbursement of a separately payable administration fee for vaccines given to adults. For children, the policy clarifies Vaccine for Children Program administration fee rules to state VFC providers may not charge multiple administration fees per shot.

**Budget Impact:** \$60,000 state share, \$110,000 federal share

Ms. Case motioned to approve, Ms. Fritz seconded. Motion carried.

## **WAIVER SERVICES**

**12-04 ADvantage Waiver Services** - Rules are revised to (1) establish a maximum annual reimbursement cap for hospice services for members who exceed the waiver cost limit (2) disallow an active Power of attorney from being a paid caregiver for members self-directing their services (3) increase the maximum hours of Adult Day Health services to six hours (4) clarify the member/provider dispute resolution process.

**Budget Impact:** \$193,539 state share, \$344,404 federal share

**12-05 Living Choice Demonstration Services** - Living Choice demonstration program rules are revised to include clarification for billing of Institutional Case Management Transition services and the inclusion of additional services for persons with physical disabilities and long term illnesses.

**Budget Impact:** \$5,800 state share, \$26,320 federal share

**12-27 Agency Companion and Foster Care Responsibilities** – Rules for SoonerCare Home and Community Based Waiver Services (HCBS) programs for persons with intellectual disabilities are amended to clarify responsibilities for Agency Companion providers and Specialized Foster Care providers regarding reporting requirements when there are allegations of member maltreatment. The rules clarify that the Office of Client Advocacy must be contacted in the event of allegations of maltreatment involving an adult and an abuse hotline must be utilized in the event that the maltreatment involves a child. Rules are also amended to clarify that the Agency Companion must obtain prior approval from the member's representative payee before making purchases over \$50 on behalf of the member.

**12-29 Community Spouse Allowance** – Rules are amended to clarify that a member receiving Home and Community Based Services (HCBS) (such as ADvantage) is considered a community spouse for the purpose of calculating the community spouse allowance when his/her spouse is in a nursing facility. This amendment brings the rules into compliance with Federal law and regulation and the State Plan. It allows the spouse in the nursing facility to deem income to the spouse who remains at home, regardless of whether that spouse is receiving HCBS, before the vendor payment owed to the nursing facility is calculated.

**Budget Impact:** \$500,000 state share, \$800,000 federal share

**12-30 Medically Fragile Waiver Services** - Rules are revised to add Institutional Transition Services and Self-Directed Goods and Services to the Medically Fragile Waiver Program. Additional revisions include removing language that does not align with program practices, for consistency and clarity purposes.

**Budget Impact:** Budget neutral

**12-31 My Life; My Choice Waiver Services** - Rules are revised to add Institutional Transition Services, Assisted Living Services and Self-Directed Goods and Services to the My Life; My Choice Waiver Program. (If a member is approved for the Assisted Living Services bundle, the member is responsible for payment of room and board charges.) Additional revisions include removing language that does not align with program practices, for consistency and clarity purposes.

**Budget Impact:** Budget neutral

**12-32 Sooner Seniors Waiver Services** - Rules are revised to add Institutional Transition Services, Assisted Living Services and Self-Directed Goods and Services to the Sooner Seniors Waiver Program. (If a member is approved for the Assisted Living Services bundle, the member is responsible for payment of room and board charges.) Additional revisions include removing language that does not align with program practices, for consistency and clarity purposes.

**Budget Impact:** Budget neutral

Dr. Wright motioned to approve, Ms. Bellah seconded. Motion carried.

#### VIII. New Business

Going Green – MAC packets

The OHCA will continue to send the MAC the packets via electronic mail, and the MAC members may bring paper copies with them if they choose to do so.

#### IX. Adjourn

Next Meeting: Thursday, May 16, 2013.



## 2013 OHCA LEGISLATIVE SUMMARY FOR MEDICAL ADVISORY COMMITTEE MEETING

July 18, 2013

The First Session of the 54<sup>th</sup> Oklahoma Legislature adjourned a week early on May 24, 2013. With a newly elected Speaker of the House of Representatives, T.W. Shannon, Governor Mary Fallin and Senate Pro Tempore Brian Bingman faced an Oklahoma economy that continued to perform relatively well in State Fiscal Year FY-2013.

As a result, the Legislature had a moderate increase in revenues to consider while crafting the FY-2014 budget. An additional \$285 million, a 4.2 percent increase over last year, was appropriated in the budget, much of which was directed at education, health and mental health, human services and maintenance and repair of state buildings.

As a recognized priority of this leadership, the Oklahoma Health Care Authority budget was treated very well this year. Our agency received \$953,701,274 for FY-2014 appropriations.

### Appropriations

#### *HB2301 and HB2305*

Authors: Representative Scott Martin (Norman), Senator Clark Jolley (Edmond)

**HB 2301** housed the general appropriation in which OHCA was appropriated \$904,196,008 from general revenue, \$12,130,266 from the Special Cash Fund, \$21,375,000 from Tobacco Settlement Funds, \$3,000,000 from the HEEIA fund and \$13,000,000 in other money for a total appropriation of \$953,701,274. This met the OHCA's budget request of just under \$40 million in new money. Governor Signed 5-20-13.

**HB 2305** was the companion budget limits bill for OHCA which allows the agency to pay for professional expenses for employed agency physicians and the agency administrator in addition to provisions for cash management for federal grants and the transfers of monies by Office of Management and Enterprise Services between various funds. Status: Signed by the Governor 5-24-13.

### OHCA Request Bill

#### *SB 254*

Authors: Senator Kim David (Porter), Representative Dr. Doug Cox (Grove)

**SB 254** was an OHCA Request bill to use IRS data for determining income for Medicaid eligibility. Status: Passed through Senate and House was unable to receive necessary committee signatures to be advanced.

## **Insure Oklahoma**

### ***SB 640***

Authors: Senator Brian Crain (Tulsa), Representative Dr. Doug Cox (Grove)

**SB 640** was a proposal to use Insure Oklahoma as a platform to use newly available Medicaid dollars to expand the Insure Oklahoma program to cover all adults under 133 percent of the federal poverty level. The proposal included various requirements dealing with cost sharing and work requirements.

Status: Passed Senate and House as Insure Oklahoma sliding scale proposal and then never was signed out of conference committee once amended expansion language was added.

### ***SB 700***

Authors: Senator Kim David (Porter), Representative Glen Mulready (Tulsa)

**SB 700** gave OHCA the authority to continue to use tobacco tax revenue for a state funds only Insure Oklahoma program. It allowed for the existing program to operate for currently enrolled Insure Oklahoma members up until the threshold where they became eligible for federal tax credits for qualified plans on the federal marketplace.

Status: Pass through Senate and House as a bill requiring insurance companies to provide certain notice but was unable to receive necessary committee signatures to be advanced once language dealing with Insure Oklahoma was added.

### ***HCR 1023***

Authors: Representative Glen Mulready (Tulsa), Senator Patrick Anderson (Enid)

House concurrent resolution **1023** directed OHCA to continue to run Insure Oklahoma independent of federal funds and prohibited OHCA from expanding any eligibility criteria for Insure Oklahoma or successor program.

Status: Passed out of the House after Senate had already adjourned for the year.

## **Managed Care**

### ***HB 1552***

Authors: Representative Mark McCullough (Sapulpa), Senator A.J. Griffin (Guthrie)

This bill directed OHCA to apply for and implement a state plan amendment and a 1915(b) waiver to establish a statewide, integrated managed care program. OHCA would enter into contracts with private managed care companies to manage the care of all SoonerCare members including those receiving long-term care services.

Status: Passed out of House, never heard in Senate committee.

### ***SB 272***

Authors: Senator Kim David (Porter), Representative Dr. Doug Cox (Grove)

**SB 272** instructs OHCA to conduct a feasibility study of current and potential care coordination models for individuals with Medicare and Medicaid. The study will contain analysis and recommendations for current and potential models and will be delivered to Appropriations subcommittee chairs by December 31, 2013.

Status: Signed by the Governor on 4-22-13.

## Rules

### **HB 2055**

Authors: Representative Mike Jackson (Enid), Senator Greg Treat (Oklahoma City)

**HB 2055** changes the process for how state agencies and the legislature promulgate permanent rules. This bill changes a rules approval from being passive to active. In order for the legislature to now approve an agency rule, it must be a part of an omnibus bill with all agency rules in it. If no such bill is passed, then the governor may approve rules. The emergency promulgation process stays similar with added criteria for what agencies have to demonstrate to the Governor's office in order to gain approval.

Status: Signed by the Governor 5-29-13.

## Other significant OHCA legislation:

**SB27** amends the Medicaid False Claims Act to include language to require providers to display information about how to report providers suspected fraudulent activity relating to SoonerCare. It provides requirements for anonymous reporting and includes the information that must be displayed. Governor Signed 4-22-13.

**SB292** states that the county treasurers will provide OHCA with a list of properties that will be sold at tax resales in their respective counties. OHCA will produce a list of properties from each county with OHCA liens to be made available to potential buyers at tax resales and we will file a lien release on properties in blighted areas. The measure does not allow the filing of the lien release to extinguish debt owed to OHCA. Governor Signed 4-24-13.

**HB1031** amends the Supplementary Hospital Offset Payment Program (SHOPP) by extending the program to 2017 as well as clarifying cost reporting requirements to determine fee calculations. Governor Signed 4-24-13.

**HB1021, HB2073, SB93, and SB203** all contained language that made it illegal to implement any portion of the ACA. HB1021 was passed off the house floor with no criminal penalty in the bill and was never heard in Senate committee. The rest never received committee hearings in their original chambers. **SB777**, a bill to expand Medicaid authored by Democratic leadership, also was never heard in committee.



## JULY 18, 2013 OHCA MEDICAL ADVISORY COMMITTEE MEETING

### 2013 GOVERNOR SIGNED/VETOED

#### *Bill Portfolio*

#### 34 Bills On Report

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#### **HB1002**



**Short Title:** An Act relating to state government; creating the Cost Reduction and Savings Act of 2013; amending 62 O.S. 2011, Section 34.36, as amended by Section 368, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.36), which relates to the Oklahoma State Finance Act; modifying the publishing of financial services cost-performance assessment; authorizing Office of Management and Enterprise Services to evaluate the agencies with the lowest rankings; clarifying contracting requirement for certain low ranking state agencies; authorizing discontinuation of shared services for certain agencies; amending 74 O.S. 2011, Section 840-2.10, as amended by Section 873, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 840-2.10), which relates to the State Employee Assistance Program; authorizing Office of Management and Enterprise Services to enter into certain contracts; amending 74 O.S. 2011, Sections 840-3.4 and 840-3.5, as amended by Sections 894 and 895, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Sections 840-3.4 and 840-3.5), which relate to the Carl Albert Public Internship Program; modifying internship program; including certain degrees and certifications; modifying eligibility requirements; providing that certain employees count against limitation of full-time-equivalent positions; providing for codification; providing for noncodification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** HB1002, by Rep. Jason Murphey, R-Guthrie and Sen. David Fuller Holt, R-Oklahoma City, creates the Cost Reduction and Savings Act of 2013 and requires the Office of Management and Enterprise Services to evaluate the ten agencies with the lowest rankings of cost-performance assessment. The bill requires the 10 lowest ranking agencies to contract with the Office of Management and Enterprise Services for the provision of shared financial services. The substitute also permits OMES to enter into contracts to carry out the purposes and functions of the State Employee Assistance Program and established standards to be met by entities eligible to contract with OMES. The bill permits students working toward an undergraduate degree including associates degrees or Career and Technology certifications to participate in an undergraduate degree internship program. It also eliminates language that converts an internship position into classified service. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Murphey, Jason (H); Holt, David Fuller (S)

**Status:** Governor Action - Signed **Status Date:** 05/13/2013

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**HB1031**

**Short Title:** An Act relating to public health and safety; amending 63 O.S. 2011, Sections 3241.2, 3241.3 and 3241.4, which relate to the Supplemental Hospital Offset Payment Program Act; modifying certain definitions; determining net hospital patient revenue for certain years in order to determine assessment rate; providing monies in certain fund to be used only for certain transfers; and providing an effective date. (Amended by House, Amended by Senate)

**Paraphrase:** HB1031, by Rep. Doug Cox, R-Grove and Sen. Kimberley David, R-Wagoner, modifies the method of calculating net hospital patient revenue for certain years in order to determine an assessment rate under the Supplemental Hospital Offset Payment Program Act. The bill also extends the membership of the Hospital Advisory Committee until Dec. 31, 2017, for those members serving as of Dec. 31, 2014. The bill clarifies uses of the Supplemental Hospital Offset Payment Program Fund. It also modifies statutory references. (Amended by House, Amended by Senate) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Cox, Doug (H); David, Kimberley (S)

**Status:** Governor Action - Signed **Status Date:** 04/24/2013

**HB1107**

**Short Title:** An Act relating to state employee benefits; amending 68 O.S. 2011, Section 205.2, as last amended by Section 80 of Enrolled Senate Bill No. 977 of the 1st Session of the 54th Oklahoma Legislature, which relates to claims against state income tax refunds; modifying what claims are exempt; amending 74 O.S. 2011, Sections 1304.1, as amended by Section 14, Chapter 303, O.S.L. 2012 and 1308.3, as amended by Section 1, Chapter 352, O.S.L. 2012 (74 O.S. Supp. 2012, Sections 1304.1 and 1308.3), which relate to the Oklahoma Employees Insurance and Benefits Act; authorizing the Office of Management and Enterprise Services to intercept certain monies; modifying what benefits an employee may opt out of; amending 74 O.S. 2011, Section 1370, as amended by Section 18, Chapter 303, O.S.L. 2012 (74 O.S. Supp. 2012, Section 1370), which relates to the Oklahoma State Employees Benefits Act; modifying certain flexible benefit allowance credit disbursement schedules; modifying certain deduction schedules; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** HB1107, by Rep. Glen Mulready, R-Tulsa and Sen. Josh Brecheen, R-Coalgate, exempts from claims against individual income tax refunds claims for health care or medical services rendered, induced, or otherwise obtained as a result of fraud, breach of contract, error, ineligibility or any illegal or unauthorized means. It also permits the Office of Management and Enterprise Services to intercept monies owing to the state's flexible benefits plan participants from other state agencies, when those participants owe money to the office and to ensure that the participants are afforded due process of law. It permits an active state employee to opt out of the health and dental basic plan options only and retain the life and disability plan benefits. It provides that the disbursement of the flexible benefit allowance for participants on a biweekly payroll system will be credited over 24 pay periods resulting in two pay periods that do not reflect a credit. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No



**Principal Authors:** Mulready, Glen (H); Brecheen, Josh (S)

**Status:** Governor Action - Signed **Status Date:** 05/14/2013

**HB1264**



**Short Title:** An Act relating to schools; amending Section 2, Chapter 322, O.S.L. 2012, which relates to the Rethinking Special Education, Competency and Transition Task Force; extending termination date of the Task Force; extending final report filing date; amending 70 O.S. 2011, Sections 13-121, 13-123.1, 13-124, 13-124.1, as amended by Section 605, Chapter 304, O.S.L. 2012, 13-126, 13-127, 13-128 and 13-129 (70 O.S. Supp. 2012, Section 13-124.1), which relate to the Oklahoma Early Intervention Act; updating statutory citations and language; modifying statutory citations; changing administrator of the Interagency Coordinating Council for Early Childhood Intervention; and declaring an emergency. (Amended by House, Amended by Senate, Emergency Measure)

**Paraphrase:** HB1264, by Rep. Jason Nelson, R-Oklahoma City and Sen. Clark Jolley, R-Edmond, extends the Rethinking Special Education, Competency and Transition Task Force until May 31, 2014 and transfers oversight from the Oklahoma Commission on Children and Youth to the State Department of Education to administer the Interagency Coordinating Council for Early Childhood Intervention. (Amended by House, Amended by Senate, Emergency Measure) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 05/20/2013 **Emergency:** Yes

**Principal Authors:** Nelson, Jason (H); Jolley, Clark (S)

**Status:** Governor Action - Signed **Status Date:** 05/20/2013

**HB1325**



**Short Title:** An Act relating to the Oklahoma Public Employees Retirement System; amending 74 O.S. 2011, Sections 902, 914, 915, 916.1 and 917, which relate to administration of the retirement system; modifying definition; imposing reporting requirements on participating employers; prescribing required information; providing for disqualification of retirement eligibility; imposing requirement on employer for failure to report or for inaccurate reports; modifying provisions related to payment of employee contributions in the event of death; modifying amount eligible for payment without probate requirements; modifying content of certain information reported to the System in the event of death of a member; modifying provisions related to payment of benefits in the event of death of retired member; providing an effective date; and declaring an emergency. (Amended by Senate, Emergency Measure)

**Paraphrase:** HB1325, by Rep. Randy McDaniel, R-Edmond and Sen. Rick Brinkley, R-Owasso, clarifies the definition of "final average compensation" in language related the Oklahoma Public Employees Retirement System. The measure requires participating employers to provide the System with information relaying the last day physically on the job, the last day on payroll, and the final unused sick leave balance for a retiring member no later than the fifteenth day of the month of retirement and finds that failure to submit this information by the deadline, or errors in submitted information that result in a disqualification of retirement eligibility to be the responsibility of the participating employer and that in cases where the error results in disqualification of retirement eligibility, it is the participating employer's responsibility to reemploy the member, or retain the



member on the payroll, for time period required to reach eligibility, not exceeding two months. The measure allows the System to pay any applicable death benefit, unpaid contributions, or unpaid benefit which may be subject to probate, in an amount of \$25,000 or less, without the intervention of the probate court or probate procedure upon the death of a member who dies leaving no living beneficiary or having designated his estate as beneficiary. The bill removes language requiring a statement that the value of the deceased member's entire estate is subject to probate, and that the estate wherever located, less liens and encumbrances, does not exceed \$10,000 be included be given to the system before any applicable probate procedure may be waived. (Amended by Senate, Emergency Measure) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 07/01/2013 **Emergency:** Yes

**Principal Authors:** McDaniel, Randy (H); Brinkley, Rick (S)

**Status:** Governor Action - Signed **Status Date:** 04/26/2013

#### HB1414



**Short Title:** An Act relating to state government; repealing 74 O.S. 2011, Section 840-2.1, as amended by Section 11, Chapter 303, O.S.L. 2012 (74 O.S. Supp. 2012, Section 840-2.1), which relates to submission of affirmative action plan; repealing 74 O.S. 2011, Section 840-2.2, which relates to supervision of affirmative action officer; repealing 74 O.S. 2011, Section 840-2.3, as amended by Section 870, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 840-2.3), which relates to responsibilities of appointing authority; repealing 74 O.S. 2011, Section 840-2.4, as amended by Section 871, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 840-2.4), which relates to promulgation of rules and standards by the Director of the Office of Management and Enterprise Services; and providing an effective date.

**Paraphrase:** HB1414, by Rep. Elise Hall, R-Oklahoma City and Sen. David Fuller Holt, R-Oklahoma City, repeals statutory language related to the submission of affirmative action plan, the supervision of affirmative action officer, responsibilities of appointing authority and the promulgation of rules and standards for defining progress. - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Hall, Elise (H); Holt, David Fuller (S)

**Status:** Governor Action - Signed **Status Date:** 04/22/2013

#### HB1464



**Short Title:** An Act relating to state government; creating the Innovation, Efficiency and Reform Act of 2013; amending 74 O.S. 2011, Sections 85.7, as last amended by Section 4 of Enrolled Senate Bill No. 461 of the 1st Session of the 54th Oklahoma Legislature and 85.33, as amended by Section 752, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 85.33), which relate to The Oklahoma Central Purchasing Act; authorizing State Purchasing Director to exempt procurement of certain items; defining term; requiring acquisitions be publically posted; providing for description of acquisition; prohibiting Director from certain action prior to publication; authorizing Office of Management and Enterprise Services to collect certain fee; amending 74 O.S. 2011, Section 500.9, as amended by Section 855, Chapter 304, O.S.L. 2012 (74 O.S. Supp.

2012, Section 500.9), which relates to the State Travel Reimbursement Act; allowing Director of the Office of Management and Enterprise Services to authorize certain reimbursement for overnight lodging; requiring certification of certain efforts to obtain lodging; providing for noncodification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** HB1464, by Rep. Jason Murphey, R-Guthrie and Sen. Josh Brecheen, R-Coalgate, creates the Innovation, Efficiency and Reform Act of 2013. The bill states, except as otherwise provide by the Oklahoma Central Purchasing Act, that no state agency will make an acquisition for an amount exceeding \$50,000 or the limit determined by the State Purchasing Director pursuant to Oklahoma statutes not to exceed \$100,000, without the submission of a requisition to the State Purchasing Director and submission of suppliers' competitive bids or proposals to the State Purchasing Director. The bill details rules for any acquisition a state agency makes pursuant to the Oklahoma Central Purchasing Act and for the State Purchasing Director. The bill requires a state agency to submit a requisition to the State Purchasing Direction to send to the Governor, and other legislators with a written analysis. The bill exempts most items considered "emergency," highlighting qualifications in the bill. The bill requires most agencies and state entities to provide and make policies relating to requesting acquisitions. The bill exempts from competitive bidding acquisitions a state agency makes pursuant to a contract the State Purchasing Director enters into or awards and designates for use by state agencies. The bill allows the State Purchasing Director to exempt a procurement of a pre-owned item from the requirements of the bill when in the State Purchasing Director's discretion unusual, time-sensitive or unique circumstances exist which make such exemption in the best interest of the state. The bill creates in the State Treasury a revolving fund for the Office of Management and Enterprise Services to be designated the "Registration of State Vendors Revolving Fund". The bill allows the bill to consist of monies received from fees collected in accordance to the bill and the fund will be used to defray the costs of the Purchasing Division for commodity research, classification, and analysis and expenses the Office incurs to support Purchasing Division operations. The bill allows the Office of Management and Enterprise Services to collect a fee of \$25 to register suppliers. The bill amends reimbursement for overnight lodging, stating that the Director of the Office of Management and Enterprise Services may authorize reimbursement for overnight lodging while in official travel status within the state of a rate up to 150 percent of the amount authorized and claims may be submitted to the Director of the Office of Management and Enterprise Services after meeting guidelines defined in the bill. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Murphey, Jason (H); Brecheen, Josh (S)

**Status:** Governor Action - Signed **Status Date:** 05/13/2013

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**HB1467**



**Short Title:** An Act relating to health; amending 10A O.S. 2011, Section 1-9-102, which relates to the Oklahoma Children's Code; transferring duties from the Child Abuse Training and Coordination Council to the Oklahoma Commission on Children and Youth; amending 47 O.S. 2011, Section 1135.3, which relates to special license plates; requiring organ, eye and tissue license plate to be

designed in consultation with the State Department of Health; transferring powers, duties, property, and rules related to certain acts to the State Board of Examiners of Licensed Counselors; creating the State Board of Examiners of Licensed Counselors; providing appointing authority; providing standards for meetings; authorizing the Governor to appoint Board members; providing procedures related to recommendations of the Board; providing jurisdictional area of the Board; requiring compliance with certain acts; providing for reimbursement of certain expenses by Board members; providing authorization of certain acts by Board; amending 59 O.S. 2011, Sections 1902, 1905, 1906, 1907, 1908, 1909, 1911, 1912, 1913.1, 1916.1, 1917, 1918, as amended by Section 288, Chapter 304, O.S.L. 2012, and 1919 (59 O.S. Supp. 2012, Section 1918), which relate to the Licensed Professional Counselors Act; modifying definitions; clarifying language; transferring certain powers and duties from the State Board and State Commissioner of Health, respectively, to the State Board of Examiners of Licensed Counselors and the Executive Director of the State Board of Examiners of Licensed Counselors, respectively; amending 59 O.S. 2011, Sections 1925.2, 1925.5, 1925.6, 1925.7, 1925.8, 1925.9, 1925.15, 1925.17, as amended by Section 289, Chapter 304, O.S.L. 2012, and 1925.18 (59 O.S. Supp. 2012, Section 1925.17), which relate to the Marital and Family Therapist Licensure Act; modifying definitions; clarifying language; transferring certain powers and duties from the State Board and State Commissioner of Health, respectively, to the State Board of Examiners of Licensed Counselors and the Executive Director of the State Board of Examiners of Licensed Counselors, respectively; amending 59 O.S. 2011, Sections 1931, 1934, 1935, 1936, 1937, 1938, 1940, 1941, 1942, 1944, 1945, 1946, as amended by Section 290, Chapter 304, O.S.L. 2012, 1947, 1948, and 1949 (59 O.S. Supp. 2012, Section 1946), which relate to the Licensed Behavioral Practitioner Act; modifying definitions; clarifying language; transferring certain powers and duties from the State Board and State Commissioner of Health, respectively, to the State Board of Examiners of Licensed Counselors and the Executive Director of the State Board of Examiners of Licensed Counselors, respectively; amending 62 O.S. 2011, Section 155, as amended by Section 446, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 155), which relates to revolving funds; deleting revolving fund for the State Barber Advisory Board; creating the Oklahoma Public Health Advisory Council Modernization Act; establishing five advisory councils to assist and advise the State Department of Health; providing for meetings; providing for appointments to each advisory council; providing for jurisdictional areas of each advisory council; providing for powers and duties of advisory councils; providing for reimbursement expenses; amending 63 O.S. 2011, Section 1-114.1, which relates to the Comprehensive Childhood Lead Poisoning Prevention Program; directing consideration of recommendations by the Infant and Children's Health Advisory Council; eliminating Childhood Lead Poisoning Prevention Advisory Council; amending 63 O.S. 2011, Sections 1-227.1, 1-227.2 and 1-227.4, which relate to the Child Abuse Prevention Act; deleting terms; directing consideration of recommendations by the Infant and Children's Health Advisory Council; eliminating the interagency child abuse prevention task force; transferring certain duty of task force to the State Department of Health; deleting certain requirement of Commissioner; amending 63 O.S. 2011, Sections 1-229.2, 1-229.5 and 1-229.6, which relate to the Oklahoma Tobacco Use Prevention and Cessation Act; deleting and modifying terms; directing consideration of recommendations by the Advancement of Wellness Advisory Council; eliminating the Tobacco Use Prevention and Cessation Committee; transferring certain duties to the State Department of Health; deleting certain requirements of the state plan; deleting certain requirements concerning invitations to bid; amending 63 O.S. 2011, Section 1-1923.1, which relates to the Residents and

Family State Council; directing consideration of recommendations by the Long-Term Care Facility Advisory Board; amending 63 O.S. 2011, Sections 1-260.2 and 1-260.4, which relate to the Osteoporosis Prevention and Treatment Education Act; directing consideration of recommendations by the Advancement of Wellness Council; eliminating Interagency Council on Osteoporosis; amending 63 O.S. 2011, Sections 1-556 and 1-557, as amended by Section 480, Chapter 304, O.S.L. 2012 (63 O.S. Supp. 2012, Section 1-557), which relate to breast cancer; eliminating the Oklahoma Breast and Cervical Cancer Prevention and Treatment Advisory Committee; transferring certain duties to the State Department of Health; directing consideration of recommendations by the Advancement of Wellness Council; amending 63 O.S. 2011, Section 1-860.14, which relates to the Hospice Advisory Board; transferring certain authority of Board to State Department of Health; amending 63 O.S. 2011, Sections 1-564, 1-567 and 1-569, which relate to genetic counselors; directing consideration of recommendations by the Counseling Advisory Council; deleting references to the Genetics Counseling Advisory Committee; providing that State Board of Health rules shall include requirements for maintaining and renewal of genetic counselor license; amending 63 O.S. 2011, Section 1-706.12, which relates to the Emergency Medical Services for Children Resource Center; removing requirement that certain items be submitted to State Department of Health Emergency Medical Services Advisory Council prior to Department action; amending 63 O.S. 2011, Sections 1-1453 and 1-1455, which relate to the Oklahoma Medical Micropigmentation Regulation Act; directing consideration of recommendations by the Consumer Protection Licensing Advisory Council; deleting reference to the Medical Micropigmentation Advisory Committee; amending 63 O.S. 2011, Section 1-1505, which relates to the Diagnostic X-Ray Facility Act; directing consideration of recommendations by the Consumer Protection Licensing Advisory Council; amending 63 O.S. 2011, Sections 1-2503, as amended by Section 1 of Enrolled House Bill No. 1083 of the 1st Session of the 54th Oklahoma Legislature, 1-2506, 1-2511, as amended by Section 7 of Enrolled House Bill No. 1083 of the 1st Session of the 54th Oklahoma Legislature, 1-2512, 1-2530.2, 1-2530.3, 1-2530.5 and 1-2530.8, which relate to the Oklahoma Emergency Response Systems Development Act and the Oklahoma Trauma Systems Improvement and Development Act; modifying definition; directing consideration of recommendations by the Trauma and Emergency Response Advisory Council; deleting references to the Oklahoma Emergency Response Systems Development Advisory Council; removing power of State Commissioner of Health to create Medical Direction Subcommittee; modifying term; amending 63 O.S. 2011, Section 2060, which relates to the Oklahoma Certified Healthy Communities Act; eliminating the Oklahoma Healthy Communities Advisory Committee; directing consideration of recommendations by the Advancement of Wellness Advisory Council; amending 63 O.S. 2011, Section 2061, which relates to the Oklahoma Certified Healthy Schools Act; eliminating the Oklahoma Healthy Schools Advisory Committee; directing consideration of recommendations by the Advancement of Wellness Advisory Council; amending 63 O.S. 2011, Sections 2220.2, 2220.3, as amended by Section 511, Chapter 304, O.S.L. 2012, 2220.5 and 2220.6 (63 O.S. Supp. 2012, Section 2220.3), which relate to organ donations; eliminating the Organ Donor Education and Awareness Program Advisory Council; authorizing State Department of Health and State Department of Education to take certain actions regarding organ donations; amending 70 O.S. 2011, Section 1210.284, as amended by Section 1 of Enrolled House Bill No. 1117 of the 1st Session of the 54th Oklahoma Legislature, which relates to vision screening; eliminating advisory committee concerning vision screening; directing consideration of recommendation by the Health Care Advisory Council; transferring powers, duties, property, and

rules related to certain acts from the State Department of Health, State Board of Health, and State Commissioner of Health, respectively, to the State Board of Cosmetology and Barbering; amending 59 O.S. 2011, Sections 61.1, 61.2 and 61.3, which relate to authorities, powers, and duties of the State Board of Health; transferring certain duties to State Board of Cosmetology and Barbering; amending 59 O.S. 2011, Sections 199, 199.1, 199.2, 199.3, 199.4, 199.5, 199.6, 199.7, 199.8, 199.9, 199.10, 199.11, 199.13, 199.14 and 199.15, as amended by Section 262, Chapter 304, O.S.L. 2012 (59 O.S. Supp. 2012, Section 199.15), which relate to the Oklahoma Cosmetology and Barbering Act; creating the State Board of Cosmetology and Barbering; modifying definitions; clarifying language; modifying composition of Board; authorizing Board to promulgate rules for examination and licensure of certain professions; repealing 59 O.S. 2011, Sections 61.4, 1904, 1925.4 and 1933, which relate to the State Barber Advisory Board, the Oklahoma Licensed Professional Counselors Advisory Board, the Oklahoma Licensed Marital and Family Therapist Advisory Board, and the Oklahoma Licensed Behavioral Practitioners Advisory Board; repealing 63 O.S. 2011, Sections 1-229.4, 1-232.2, 1-260.4, 1-555, 1-860.13, 1-860.14, 1-1456, 1-1504.1, 1-1753, 1-1970, 1-2516, as amended by Section 1, Chapter 74, O.S.L. 2012, 1-2530.4, 1-2530.6 and 1-2530.7 (63 O.S. Supp. 2012, Section 1-2516), which relate to the Tobacco Use Prevention and Cessation Advisory Committee, the Shaken Baby Prevention Education Initiative Task Force, the Interagency Council on Osteoporosis, the Oklahoma Breast and Cervical Cancer Prevention Advisory Committee, the Hospice Advisory Board, the Medical Micropigmentation Advisory Committee, the Radiation Advisory Committee, the Hearing Aid Advisory Council, the Home Health Advisory Board, the Oklahoma Emergency Response Systems Development Advisory Council, and the Oklahoma Trauma Systems Improvement and Development Advisory Council; providing for codification; providing for noncodification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** HB1467, by Rep. Jason Murphey, R-Guthrie and Sen. A J Griffin, R-Guthrie, replaces references to the Child Abuse Training and Coordination Council with the Oklahoma Commission on Children and Youth. The bill requires all powers, duties, responsibilities, equipment and records of the State Board of Health, the State Department of Health, and the State Commissioner of Health relating exclusively to the regulation of Licensed Professional Counselors, Licensed Marital and Family Therapists and Licensed Behavioral Practitioners are hereby transferred and to be placed under the authority of the State Board of Behavioral Health Licensure. The measure requires all unexpended funds, property, furnishings, equipment, supplies, records, and outstanding financial obligations and encumbrances relating to the designated transfer of the Licensed Professional Counselors Act, the Marital and Family Therapist Licensure Act and the Licensed Behavioral Practitioner Act are hereby transferred to the State Board of Behavioral Health Licensure for the continuing performance of duties relating to the Licensed Professional Counselors Act, the Marital and Family Therapist Licensure Act and the Licensed Behavioral Practitioner Act. The measure requires the State Board of Health, the State Department of Health, and the State Commissioner of Health to not enter into any contract or agreement relating to the regulation of Licensed Professional Counselors, Licensed Marital and Family Therapists and Licensed Behavioral Practitioners extending beyond the effective date of the transfer without approval by the Executive Director of the State Board of Behavioral Health Licensure and the Office of Management and Enterprise Services. The bill requires all licenses, registrations, certifications and accreditations subject to the transfer provided in subsection A of this section to remain in full force and effect upon transfer to the State Board of Behavioral Health

Licensure. The measure directs the Director of the Office of Management and Enterprise Services to coordinate the transfer of funds, allotments, purchase orders, and outstanding financial obligations and encumbrances relating to the Licensed Professional Counselors Act, the Marital and Family Therapist Licensure Act, and the Licensed Behavioral Practitioner Act subject to transfer pursuant to the provisions of this act. The bill requires, upon the effective date of this act, all administrative rules promulgated by the State Board of Health relating to the Licensed Professional Counselors Act, the Marital and Family Therapist Licensure Act and the Licensed Behavioral Practitioner Act to be transferred to and become a part of the administrative rules of the State Board of Behavioral Health Licensure. HB1467 requires the Office of Administrative Rules in the Secretary of State's office shall provide adequate notice in the Oklahoma Register of the transfer of such rules, and to place the transferred rules under the Administrative Code section of the State Board of Behavioral Health Licensure, and such rules to continue in full force and effect as rules of the State Board of Behavioral Health Licensure from and after the effective date of this act, and any amendment, repeal or addition to the transferred rules shall be under the jurisdiction of the State Board of Behavioral Health Licensure. The bill requires there is hereby created the State Board of Behavioral Health Licensure to continue until July 1, 2019, in accordance with the provisions of the Oklahoma Sunset Law and establishes the duties and powers of the members. The measure also outlines the authority of the Board. The measure authorizes The State Board of Cosmetology and Barbering to promulgate rules for governing the examination and licensure of cosmetologists, manicurists, nail technicians, estheticians, cosmeticians, hair braiding technicians, master instructors, manicurist instructors, esthetics instructors, barbers, and barber instructors and to govern the sanitary operation of cosmetology and barbering establishments and to administer fines not to exceed \$50 for those licensed and not to exceed \$500 for those not licensed. The bill requires the State Board of Cosmetology and Barbering to have the power and duty to implement rules of the Board, to issue and renew licenses, to inspect cosmetology and barbering establishments and schools, and to inspect the sanitary operating practices of cosmetology and barbering licensees, including sanitary conditions of cosmetology and barbering establishments and schools. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Murphey, Jason (H); Griffin, A J (S)

**Status:** Governor Action - Signed **Status Date:** 05/10/2013

#### HB1717



**Short Title:** An Act relating to state government; amending 74 O.S. 2011, Section 3601.2, as last amended by Section 35 of Enrolled House Bill No. 2201 of the 1st Session of the 54th Oklahoma Legislature, which relates to salaries for chief executive officers; modifying provisions related to salary amounts; requiring salaries to be set between certain minimum and maximum amounts; providing for reference to annual compensation reports; requiring recommendations by Office of Management and Enterprise Services; amending 74 O.S. 2011, Section 150.6a, which relates to salaries for certain positions with the Oklahoma State Bureau of Investigation; modifying provision related to salary of the Director; providing an effective date; and declaring an emergency. (Amended by House, Amended by Senate, Emergency Measure, Committee Substitute)

**Paraphrase:** HB1717, by Rep. Leslie Osborn, R-Mustang and Sen. Clark Jolley, R-Edmond, the bill removes the salary bands executive director salaries for a number of other agencies, boards and commission from statutes and provides that the agency, board or commission will establish the director's salary in accordance with the state's annual compensation report. The bill also provides that the Office of Management and Enterprise Services will make report on the proposed salary ranges every three years beginning with fiscal year 2013, instead of two years. (Amended by House, Amended by Senate, Emergency Measure, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 07/01/2013 **Emergency:** Yes

**Principal Authors:** Osborn, Leslie (H); Jolley, Clark (S)

**Status:** Governor Action - Signed **Status Date:** 05/29/2013

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#### HB1908



**Short Title:** An Act relating to social services; creating a public service announcement campaign to promote marriage as a tool against poverty; providing for codification; and providing an effective date. (Amended by Senate, Committee Substitute)

**Paraphrase:** HB1908, by Rep. T.W. Shannon, R-Lawton and Sen. David Fuller Holt, R-Oklahoma City, creates a statewide public service announcement campaign, under the Oklahoma Marriage Initiative, promoting marriage as a tool against poverty and targeting all members of the public. The bill permits the campaign be paid with funds allocated to the Temporary Assistance for Needy Families Program. (Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Shannon, T.W. (H); Holt, David Fuller (S)

**Status:** Governor Action - Signed **Status Date:** 05/10/2013

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#### HB1917



**Short Title:** An Act relating to public finance; imposing duty on certain state government entities with respect to reduction of federal appropriations or federal block grant or other funds; requiring information to be provided to the Director of the Office of Management and Enterprise Services, the Governor, the Speaker of the Oklahoma House of Representatives and the President Pro Tempore of the Oklahoma State Senate; imposing requirements for disclosure of federal funds and analysis regarding reliance and costs for compliance; and providing for codification. (Amended by House, Amended by Senate)

**Paraphrase:** HB1917, by Rep. T.W. Shannon, R-Lawton and Sen. Brian Bingman, R-Sapulpa, relates to public finance and imposing certain state government entities with respect to reduction of federal appropriations. The bill requires each agency subject to provisions of the Office of State Finance Act to develop a contingency plan and corresponding budget to be prepared for reduction in any applicable federal money of up to 25 percent. The bill requires the contingency plan and corresponding budget to be submitted to the Director of the Office of Management and Enterprise Services, the Governor, the Speaker of the Oklahoma House of Representatives and the President Pro Tempore of the Oklahoma State Senate within 30 days from the effective date of



this act. The bill requires every entity subject to the requirements of the bill to make an annual disclosure of all federal funds under the control of the entity and the programs for which the federal funds are used by distinct expenditure categories and shall identify the priority or rank of the federal funds in descending order with the funding source the agency relies on to the greatest extent listed first and the funding source the agencies relies on to the least extent listed last. The bill requires every entity subject to the requirements of the bill to make an annual disclosure of the federal funds for which the agency must incur costs to implement and shall provide such information in descending order with the most costly federal funds listed first and the least costly federal funds listed last. (Amended by House, Amended by Senate) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** // **Emergency:** No

**Principal Authors:** Shannon, T.W. (H); Bingman, Brian (S)

**Status:** Governor Action - Veto **Status Date:** 05/31/2013

**HB2055**



**Short Title:** An Act relating to administrative rules; amending 75 O.S. 2011, Sections 250.2, 250.3, 253, 308 and 308.1, which relate to the Administrative Procedures Act; modifying powers of the Legislature; modifying definitions; modifying expiration date of emergency rules; modifying legislative approval and disapproval of rules; modifying final adoption of rule; providing for omnibus joint resolution; providing for petition to approve certain rule by the Governor; authorizing Governor to declare all rules approved; repealing 75 O.S. 2011, Section 303.2, which relates to the approval or disapproval of rule by the Governor; providing for codification; providing for noncodification; and providing an effective date. (Amended by House, Amended by Senate, Stricken enacting clause, Committee Substitute)

**Paraphrase:** HB2055, by Rep. Mike Jackson, R-Enid and Sen. Greg Treat, R-Oklahoma City, allows, in creating agencies and designating their functions and purposes, the Legislature may delegate rulemaking authority to executive branch agencies to facilitate administration of legislative policy. The measure requires, upon receipt of any adopted rules, the Speaker of the House of Representatives and the President Pro Tempore of the Senate to assign such rules to the appropriate committees of each house of the Legislature for review. The bill requires, if such rules are received on or before April 1, the Legislature to have until the last day of the regular legislative session of that year to review such rules, and, if such rules are received after April 1, the Legislature to have until the last day of the regular legislative session of the next year to review such rules. The bill allows, if the omnibus joint resolution fails to pass both houses of the Legislature and be signed by the Governor or is found by the Governor to have a technical legal defect preventing approval of administrative rules intended to be approved by the Legislature, the Governor to declare all rules to be approved by publishing a single declaration in "The Oklahoma Register" on or before July 17 without meeting requirements of the bill. The bill requires the governor to make the finding in writing and submit the finding to the Legislature if the governor finds the joint resolution has a technical legal defect. (Amended by House, Amended by Senate, Stricken enacting clause, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No



**Principal Authors:** Jackson, Mike (H); Treat, Greg (S)

**Status:** Governor Action - Signed **Status Date:** 05/29/2013

**HB2062**



**Short Title:** An Act relating to technology; amending 19 O.S. 2011, Sections 1500, 1500.1, 1502, as amended by Section 3, Chapter 144, O.S.L. 2012, 1504 and 1505, as last amended by Section 1 of Enrolled House Bill No. 1987 of the 1st Session of the 54th Oklahoma Legislature (19 O.S. Supp. 2012, Section 1502), which relate to the county purchasing procedures; adding information technology and telecommunications goods to purchasing procedures and requirements; clarifying language; modifying duties of the board of county commissioners; modifying duties of the receiving officer; including the Information Services Division of the Office of Management and Enterprise Services in certain contracting process; amending 62 O.S. 2011, Section 34.11.1, as last amended by Section 56 of Enrolled Senate Bill No. 977 of the 1st Session of the 54th Oklahoma Legislature, which relates to the Chief Information Officer; updating statutory language; expanding certain jurisdictional areas of responsibility; deleting obsolete language; requiring certain assessment to be updated annually; deleting requirement for approval of plan by the State Governmental Technology Applications Review Board; deleting net savings realization requirement; modifying types of products which are allowed to be procured by the Chief Information Officer; authorizing the Chief Information Officer to negotiate certain types of contracts and agreements; deleting requirement to establish certain charges to state agencies; adding definitions; amending 62 O.S. 2011, Section 34.11.2, which relates to the Oklahoma State Government 2.0 Initiative; deleting requirement for board to implement certain standardized policies; amending 62 O.S. 2011, Section 34.11.7, which relates to performance reporting metrics; directing the State Governmental Technology Applications Review Board to establish a statewide assistance telework program guidelines and supports; stating purposes of the program; requiring state agency office space requests to be submitted and review by the Board; modifying certification duties of the Board; amending 62 O.S. 2011, Section 34.11.9, as amended by Section 344, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.11.9), which relates to the Oklahoma State Government Business Licensing One-Stop Program; limiting exemptions to individual licensing processes; prohibiting exemptions on agency-by-agency basis; requiring reporting of exemptions; mandating annual renewal of exemptions; establishing the Oklahoma State Government Security Breach Transparency Initiative; directing the Chief Information Officer to develop and maintain a public access online security breach web address; requiring state agencies to notify the Chief Information Officer of certain security breaches; requiring security breach information to be posted on certain website; amending 62 O.S. 2011, Section 34.12, as last amended by Section 58 of Enrolled Senate Bill No. 977 of the 1st Session of the 54th Oklahoma Legislature, which relates to the powers and duties of the Information Services Division; updating statutory language; changing type of service center; adding telecommunication services to certain acquisition limitation; deleting certain exception for CompSource Oklahoma; amending 62 O.S. 2011, Section 34.13, as amended by Section 346, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.13), which relates to the statement of charges; clarifying language; requiring timely payments; authorizing the Information Services Division to make certain request for the processing of payments; amending 62 O.S. 2011, Section 34.19, as amended by Section 351, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.19), which relates to the creation and maintenance of a state central communication or intercommunications system; authorizing the Information Services Division to

make certain request for the processing of payments; amending 62 O.S. 2011, Section 34.21, as last amended by Section 60 of Enrolled Senate Bill No. 977 of the 1st Session of the 54th Oklahoma Legislature, which relates to authorization and requirements for obtaining communication or telecommunication systems; deleting certain exception for CompSource Oklahoma; amending 62 O.S. 2011, Section 34.24.1, as amended by Section 357, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.24.1), which relates to web-based license and permit application and renewal requirements; changing certain exemption; deleting authorization for the Director of the Office of Management and Enterprise Services to exempt certain licenses or permits from certain requirements; amending 62 O.S. 2011, Section 34.25, as amended by Section 358, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.25), which relates to convenience fee for electronic and online transactions; allowing a state agency to obtain reimbursement for a merchant fee; deleting description of a convenience fee; allowing a state agency to charge a convenience fee for manual transactions; allowing state entities to apply for authorization for convenience fee on electronic or online transactions; providing for certain review and approval; modifying certain definition; adding definitions; amending 62 O.S. 2011, Section 34.27, as last amended by Section 2 of Enrolled House Bill No. 1431 of the 1st Session of the 54th Oklahoma Legislature, which relates to the State Governmental Technology Applications Review Board; deleting duty to make recommendations on online transactions or applications; allowing Board members to attend meetings via teleconference; modifying, adding and deleting duties and responsibilities of the Board; amending 62 O.S. 2011, Sections 34.28, as amended by Section 361, Chapter 304, O.S.L. 2012 and 34.29 (62 O.S. Supp. 2012, Section 34.28), which relate to accessibility of information technology for individuals with disabilities; directing the Information Services Division to adopt an accessibility clause for certain contracts; deleting submission of compliance evidence by certain state agencies; modifying rule-making requirement; updating statutory references; amending 62 O.S. 2011, Sections 35.3, as amended by Section 413, Chapter 304, O.S.L. 2012, 35.4, 35.5, as last amended by Section 14 of Enrolled House Bill No. 1455 of the 1st Session of the 54th Oklahoma Legislature, 35.6, as amended by Section 415, Chapter 304, O.S.L. 2012, 35.8, as last amended by Section 14 of Enrolled House Bill No. 1455 of the 1st Session of the 54th Oklahoma Legislature and 35.9, as amended by Section 418, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Sections 35.3, 35.5, 35.6 and 35.9), which relate to the Information Technology Consolidation and Coordination Act; deleting certain definition; deleting obsolete language; deleting requirement for written approval of a planned project; adding information to be included in certain assessment; modifying process for transferring identified information technology assets and positions; deleting requirement to identify certain information when modifying the assessment; changing type of services provided by the Information Services Division; deleting limitation on the amount of charges for certain services; requiring certain aggregated costs to be budgeted annually; modifying contents of certain quarterly progress reports; amending 65 O.S. 2011, Section 3-114, which relates to the deposit of state publications with the Publication Clearinghouse; allowing publications to be filed electronically; modifying requirement to deposit copies of publications; requiring explanation of reasons; amending 74 O.S. 2011, Sections 85.2, as amended by Section 3 of Enrolled Senate Bill No. 461 of the 1st Session of the 54th Oklahoma Legislature and 85.7c, and Sections 6 and 7, Chapter 106, O.S.L. 2012 (74 O.S. Supp. 2012, Sections 85.7h and 85.7i), which relate to The Oklahoma Central Purchasing Act; deleting certain definitions; changing responsibility for high technology system acquisitions to the Chief Information Officer; modifying certain definition; removing the Chief Information Officer

from certain consideration process for approving software acquisitions; allowing public agencies to utilize certain contracts in lieu of certain bidding procedures; modifying definition of a public agency; amending 74 O.S. 2011, Sections 3104, 3105, as amended by Section 5 of Enrolled House Bill No. 1883 of the 1st Session of the 54th Oklahoma Legislature and 3106.1, which relate to state publications; modifying requirement to file and distribute state agency reports; changing information to be included on state agency reports; adding publication paragraph to be included on electronically filed reports; modifying duties of state agency publications officer; deleting deposit requirement; repealing 62 O.S. 2011, Sections 34.11.6, 34.16, 34.17 and 34.18, as amended by Sections 343, 348, 349 and 350, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Sections 34.11.6, 34.16, 34.17 and 34.18), which relate to state government technology; repealing 74 O.S. 2011, Section 85.7d, as amended by Section 740, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 85.7d), which relates to information technology contracts; providing for codification; providing for recodification; providing an effective date; and declaring an emergency. (Amended by House, Amended by Senate, Emergency Measure, Committee Substitute)

**Paraphrase:** HB2062, by Rep. David Derby, R-Owasso and Sen. Clark Jolley, R-Edmond, updates language related to technology. The bill requires the Chief Information Officer to have authority to designate information technology and telecommunication contracts as statewide contracts and mandatory statewide contracts and to negotiate consolidation contracts, enterprise agreements and high technology systems contracts in lieu of or in conjunction with bidding procedures to reduce acquisition costs. The measure clarifies language related to technology. (Amended by House, Amended by Senate, Emergency Measure, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 07/01/2013 **Emergency:** Yes

**Principal Authors:** Derby, David (H); Jolley, Clark (S)

**Status:** Governor Action - Signed **Status Date:** 05/29/2013

## HB2077



**Short Title:** An Act relating to public retirement systems; creating the Sooner Save Special Act; providing short title; imposing duty on the Oklahoma Public Employees Retirement System to establish defined contribution system; specifying persons eligible for participation in system; prescribing period for irrevocable election to participate in defined contribution system; providing for effect of failure to make election; prescribing procedures related to date of service accrual; requiring defined contribution system to be qualified pursuant to provisions of the Internal Revenue Code of 1986, as amended; prescribing minimum employee contribution amount; prescribing maximum employee contribution amount; providing for salary deductions for employee contributions; providing for employer matching contributions; specifying amount of employer matching contributions; prescribing procedures related to employer matching contributions; providing for modifications to matching amounts; prescribing procedures for cost computation; providing for payment of certain costs related to administration of defined contribution system administration; providing for vesting schedule; providing for applicability of provisions of Section 414(h) of the Internal Revenue Code of 1986, as amended, with respect to employee contributions; imposing duty on Board of Trustees of Oklahoma Public Employees Retirement System with respect to investment of funds in defined contribution system accounts; providing for

payment of certain revenues to the Oklahoma Public Employees Retirement System; providing for deposit of funds with existing defined benefit plan; amending 74 O.S. 2011, Sections 913.4, as last amended by Section 113 of Enrolled Senate Bill No. 977 of the 1st Session of the 54th Oklahoma Legislature, 920, as amended by Section 929, Chapter 304, O.S.L. 2012 and 920A (74 O.S. Supp. 2012, Section 920), which relate to the Oklahoma Public Employees Retirement System; imposing requirement on certain elected official with respect to participation in defined contribution retirement system; modifying provisions related to employer contributions; requiring payment of certain differential amount to the Oklahoma Public Employees Retirement System for specified purpose; providing for effect of enactment on certain rights; prohibiting certain collection activity with respect to funds; authorizing offsets; providing for enforcement of qualified domestic orders; defining term; prescribing procedures with respect to alternate payees; prescribing content; imposing restrictions; authorizing rules; amending 74 O.S. 2011, Sections 1316.2, as amended by Section 962, Chapter 304, O.S.L. 2012 and 1707, as amended by Section 986, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Sections 1316.2 and 1707), which relate to certain provisions affecting the Oklahoma Public Employees Retirement System; modifying provisions based on certain employee election; providing for codification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** HB2077, by Rep. Randy McDaniel, R-Edmond and Sen. Rick Brinkley, R-Owasso, creates the Sooner Save Special Act. The bill requires effective November 1, 2013, the Oklahoma Public Employees Retirement System establish a defined contribution plan for those persons who become members of the system on or after November 1, 2013, whose first participating service in the System occurs on or after November 1, 2013, and who make the election provided by this section to become participants in the defined contribution plan. The bill authorizes a member eligible to participate in the defined contribution plan to have 90 days from his or her entry date in order to choose between participation in the Oklahoma Public Employees Retirement System or to participate in the defined contribution retirement plan. The bill requires the election to be irrevocable and to govern the participation of the member for all years of service performed. The bill provides that if a member fails to make the election within the time prescribed, the member will become a participant in the defined contribution plan and the member will not accrue any service credit in the Oklahoma Public Employees Retirement System. The bill requires the Board of Trustees of the Oklahoma Public Employees Retirement System to cause the defined contribution plan to be a tax-qualified plan. The bill requires employee contributions to the defined contribution retirement plan to consist of a minimum of 3 percent of compensation and a maximum of 10 percent of compensation. The bill requires except as otherwise provided, employers to make payment of the required matching amount each month and to ensure the payment is credited to the defined contribution plan account as selected by the member. The bill provides that members to at all times be vested at 100 percent of the amount of their employee contributions, and members to be vested with respect to the employer matching amounts deposited into their defined contribution plan account according to an established schedule. The bill requires a member to be required to have been employed by a participating employer with the Oklahoma Public Employees Retirement System from January 1 of a calendar year until December 15 of a calendar year in order to be eligible for the matching amount. The bill provides that if the member is not employed as of the December 15 date, the member to not receive the matching contribution. The bill requires the Board of Trustees of the Oklahoma Public Employees Retirement System to contract with one or more business entities in order to create a range of choices regarding investment of funds

deposited into defined contribution plan accounts and for the investment options to be substantially similar to the options provided to members of the Oklahoma Public Employees Retirement System that maintain a Deferred Savings Incentive Plan account. The bill requires the Oklahoma Public Employees Retirement System to deposit the monies remitted to it by employers having members that participate in the defined contribution plan into the existing defined benefit pension plan in order to reduce the liabilities of the defined benefit pension plan. The bill establishes contribution rates for elected officials. The bill requires statewide elected official or legislator whose first service as an elected official occurs on or after November 1, 2013, to become a participant in the defined contribution plan and for elected official not to accrue any service credit in the defined benefit plan of the Oklahoma Public Employees Retirement System and effective November 1, 2013, an employer to be required to make payment to the Oklahoma Public Employees Retirement System of the amount with respect to any employee who is a participant in the defined contribution plan. The bill requires the employer to be required to make the required matching contribution amount for all employees that participate in the defined contribution plan and to remit the difference between such amount and the amount the employer would otherwise have paid to the Oklahoma Public Employees Retirement System and effective November 1, 2013, an employer to be required to make payment to the Oklahoma Public Employees Retirement System with respect to any employee who is a participant in the defined contribution plan, and the employer to be required to make the required matching contribution amount for all employees that participate in the defined contribution plan and to remit the difference between such amount and the amount the employer would otherwise have paid to the Oklahoma Public Employees Retirement System. The measure requires the initial three-percent employee contribution to be the only mandatory contribution of an employee who selects the defined contribution retirement plan created by this act and the funds to be placed by System in either a 401(a) plan or a 457 plan, to be determined by the Board to maintain the plan consistent with the Internal Revenue Code, any employee contributions eligible to be matched under this section over the three-percent initial contribution, to be considered voluntary deferrals of compensation and placed in a 457 plan and all employer matching funds to be placed in a 401(a) plan. requires except as otherwise provided by this section, employers to make payment of the required matching amount as provided by Section 5 of this act within five business days of the member's payroll pay date and the System to ensure the payment is credited to the defined contribution plan account of the member as soon as possible. The measure requires all employee contributions to the defined contribution plan to be effected by mandatory salary deductions from the salary of the employee and to be remitted by the participating employer to the System for deposit into the defined contribution plan account maintained on behalf of the employee. The measure allows contributions by the member into a 457 plan to not be picked up by the employer, but to be a voluntary deferral of the employee's compensation. The bill allows the Board of Trustees to amend any of its existing contracts with its current service providers to perform substantially the same type of service the provider is currently performing for the Board, in order to facilitate the timely introduction of the new defined contribution plan created by this act. The measure requires, except as otherwise provided by this section, no alteration, amendment, or repeal of this act to affect the then-existing rights of members and beneficiaries, but to be effective only as to rights which would otherwise accrue hereunder as a result of services rendered by an employee after such alteration, amendment, or repeal and any benefits, fund, property, or rights created by or accruing to any person under the provisions of this act shall not be subject to execution, garnishment or attachment, or any other

process or claim whatsoever, and to be unassignable, except as specifically provided by this section. The bill prohibits the provisions of subsection A of this section from applying to a qualified domestic order as provided pursuant to this subsection. The measure requires a qualified domestic order to clearly specify the name and last-known mailing address (if any) of the member and the name and mailing address of the alternate payee covered by the order, the amount or percentage of the member's funds or assets to be paid by the System to the alternate payee, the number of payments or period to which such order applies, the characterization of the benefit as to marital property rights or child support, and each plan to which such order applies. The bill states an alternate payee who has acquired beneficiary rights pursuant to a valid qualified domestic order must fully comply with all provisions of the rules promulgated by the Board pursuant to this subsection in order to continue receiving his or her benefit. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** McDaniel, Randy (H); Brinkley, Rick (S)

**Status:** Governor Action - Veto **Status Date:** 05/10/2013

#### HB2099



**Short Title:** An Act relating to children; creating the Children with Disabilities Comprehensive Systems of Services Fund Act of 2013; creating the Children with Disabilities Comprehensive Systems of Services Revolving Fund; providing that fund consists of monies deposited by certain foundation; establishing foundation for certain purpose; requiring foundation to secure tax-exempt status; requiring foundation member to abstain from voting under certain circumstance; providing for codification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** HB2099, by Rep. Jason Nelson, R-Oklahoma City and Sen. Greg Treat, R-Oklahoma City, creates the "Children with Disabilities Comprehensive Systems of Services Fund Act of 2013" and a revolving fund for the Board of Regents for the University of Oklahoma on behalf of the Department of Pediatrics, Child Study Center for Sooner SUCCESS to be designated the "Children with Disabilities Comprehensive Systems of Services Revolving Fund". The measure requires the fund to be a continuing fund, not subject to fiscal year limitations, and to consist of those monies appropriated to the fund by law or deposited in the fund pursuant to Section 3 of this act. The bill requires expenditures from the fund to be made upon warrants issued by the State Treasurer against claims filed as prescribed by law with the Director of the Office of Management and Enterprise Services for approval and payment. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Nelson, Jason (H); Treat, Greg (S)

**Status:** Governor Action - Signed **Status Date:** 05/29/2013

#### HB2201



**Short Title:** An Act relating to CompSource; stating legislative findings and purpose; creating the CompSource Mutual Insurance Company Act; providing short title; defining terms; establishing

CompSource Oklahoma as a mutual insurer; providing for organization of CompSource Mutual Insurance Company; providing duties and powers; providing statutory requirements and exemptions; providing that Company is not a state entity; providing for a Board of Directors; providing for composition and terms of office; providing for filling of vacancies; providing for initial Board; providing duties, power and authority of the Board of Directors; providing requirements for rates; providing immunity from liability for certain persons; providing duties, power and authority for the Company; making Company subject to premium taxes; requiring the Company to be a member of the Oklahoma Property and Casualty Insurance Guaranty Association; limiting liability of the Company for Guaranty Association assessments; providing for certain reports; providing for revenues, monies and assets of the Company; providing that the state has no liability or responsibility for the financial obligations of the Company; providing that the Company is a continuation of CompSource Oklahoma and providing for related duties and authority; providing for certain causes of action; providing for continuation of certain rates; providing for severability; providing that CompSource Oklahoma employees employed on the effective date of this act remain members of the Oklahoma Public Employees Retirement System; requiring CompSource Mutual Insurance Company to pay required employer contributions for such employees; providing that other employees are not allowed to be members of the Oklahoma Public Employees Retirement System; providing for annual leave and sick leave; providing for service credit; amending 36 O.S. 2011, Section 902.3, which relates to calculation of workers' compensation premiums; eliminating the Board of Managers of CompSource Oklahoma from performance of certain duties; providing that the Board of Directors of CompSource Mutual Insurance Company shall perform certain duties; removing reference to CompSource Oklahoma from certain allocation; amending 36 O.S. 2011, Section 903.2, which relates to workplace safety plans; removing references to CompSource Oklahoma and its Board of Managers regarding certain prohibitions and procedure; amending 36 O.S. 2011, Section 924.2, which relates to workers' compensation insurance plans; removing references to CompSource Oklahoma and its officers; transferring certain duties to the Board of Directors of CompSource Mutual Insurance Company; removing certain requirements pertaining to CompSource Oklahoma; amending 36 O.S. 2011, Section 995, which relates to the Property and Casualty Competitive Loss Cost Rating Act; excluding CompSource Mutual Insurance Company from certain requirements relating to joint underwriting, joint reinsurance pool and residual market activities; amending 36 O.S. 2011, Sections 1250.2, 1250.4, 1250.9, 1250.10, 1250.11, 1250.13 and 1250.14, which relate to the Unfair Claims Settlement Practices Act; modifying definition; removing references to the State Insurance Fund and its representatives; amending 36 O.S. 2011, Section 1442, which relates to the Third-party Administrator Act; modifying definition; amending 36 O.S. 2011, Section 6701, which relates to workplace safety services; removing references to the State Insurance Fund; amending 40 O.S. 2011, Sections 417 and 418, which relate to the Oklahoma Occupational Health and Safety Standards Act; removing references to CompSource Oklahoma, its officers and the State Insurance Fund; amending 47 O.S. 2011, Section 157.1, which relates to insurance coverage for certain state vehicles; removing reference to the State Insurance Fund; amending 74 O.S. 2011, Section 85.29, as amended by Section 750, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 85.29), which relates to The Oklahoma Central Purchasing Act; removing references to CompSource Oklahoma officers; amending 74 O.S. 2011, Section 85.58A, as amended by Section 782, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 85.58A), which relates to the comprehensive professional risk management program; removing reference to CompSource

Oklahoma; amending 74 O.S. 2011, Section 902, as amended by Section 1 of Enrolled House Bill No. 1325 of the 1st Session of the 54th Oklahoma Legislature, which relates to the Oklahoma Public Employees Retirement System; modifying definition; including certain employees of the CompSource Mutual Insurance Company; amending 74 O.S. 2011, Section 3601.1, which relates to full-time-equivalent employees; eliminating reference to Board of Managers of the State Insurance Fund and maximum allowable full-time-equivalent employees; amending 74 O.S. 2011, Section 3601.2, as amended by Section 1007, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 3601.2), which relates to salaries of state chief executive officers; removing reference to and salary of chief executive officer of CompSource Oklahoma; amending 82 O.S. 2011, Section 1085.24, which relates to the purchase of certain certificates; removing the State Insurance Fund as a potential buyer; amending 85 O.S. 2011, Sections 308, 313, 328, 339, 352, 373, 375, 376, as amended by Section 1078, Chapter 304, O.S.L. 2012, 380, 396, 403, as amended by Section 1082, Chapter 304, O.S.L. 2012, 406 and 407 (85 O.S. Supp. 2012, Sections 376 and 403), which relate to the Workers' Compensation Code; modifying definitions; modifying requirements for governmental entities for obtaining workers' compensation insurance; changing references from the State Insurance Fund to CompSource Mutual Insurance Company; removing CompSource Oklahoma duties regarding workplace medical plans; removing references to CompSource Oklahoma; clarifying references; exempting CompSource Oklahoma from certain provisions; changing references from CompSource Oklahoma to CompSource Mutual Insurance Company; providing for determination of Multiple Injury Trust Fund obligations by the Director; granting the Board of Directors for CompSource Mutual Insurance Company the power to disapprove certain assessment rate; requiring the State Treasurer to provide certain information to the Chief Executive Officer of CompSource Mutual Insurance Company; providing for a chief administrative officer for the Multiple Injury Trust Fund designated as the MITF Director; providing duties and powers of the MITF Director; repealing 74 O.S. 2011, Section 840-5.10, which relates to the designation of CompSource Oklahoma as a Merit System agency; repealing 76 O.S. 2011, Section 22, which authorizes CompSource Oklahoma to offer malpractice insurance and reinsurance; repealing 85 O.S. 2011, Section 378, which relates to the Task Force on Privatization of CompSource Oklahoma; repealing 85 O.S. 2011, Sections 375, as amended by Section 43 of this act and as recodified by Section 54 of this act, 376, as last amended by Section 44 of this act and as recodified by Section 54 of this act, 377, 379, 381, 382, 384, as amended by Section 1079, Chapter 304, O.S.L. 2012, 385, 386, 387, as amended by Section 1080, Chapter 304, O.S.L. 2012, 388, 389, as amended by Section 1081, Chapter 304, O.S.L. 2012, 390, 391, 392, 393, 394, 395, 397, 400 and 401 (85 O.S. Supp. 2012, Sections 384, 387 and 389), which relate to CompSource Oklahoma; providing for codification; providing for recodification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** HB2201, by Rep. Randy Grau, R-Edmond and Sen. Brian Bingman, R-Sapulpa, creates the CompSource Mutual Insurance Company Act. It provides that CompSource will operate as and exercise the powers to a domestic insurer without capital stock or shares in compliance with the Oklahoma Insurance Code, with specific exemptions, and will be called the CompSource Mutual Insurance Company. The measure requires the Insurance Commission to provide the company's articles of incorporation and issue a certificate of authority to the company no later than Aug. 1, 2014, that will be effective Jan. 1, 2015, to write workers compensation insurance. The bill also exempts the company from certain state statutes. The bill establishes for a 10-member board of directors and board members' duties and responsibilities. The bill requires the



company to be a member of the Oklahoma Property and Casualty Guaranty Association and limits the liability of the company for Guaranty Association assessments. It states all revenues, monies, and assets of CompSource Mutual Insurance Company belong solely to the company and shall be governed by the laws applicable to domestic mutual insurance companies. The bill provides that company be considered to be a continuation of CompSource Oklahoma as it existed prior to this act; and as a continuation of CompSource Oklahoma, the Company is vested with all property, tangible and intangible, real and personal, of CompSource Oklahoma and control of the CompSource Oklahoma fund. It adds that all employees of CompSource Mutual Insurance Company who retain membership in the Oklahoma Public Employees Retirement System continue to be eligible employees for the purposes of the Oklahoma Public Employees Retirement System. CompSource Mutual Insurance Company shall be considered a participating employer only for such employees. It eliminates the Board of Managers of CompSource Oklahoma from performance of certain duties and removes references to CompSource Oklahoma from former allocation and also removes references to CompSource Oklahoma and its Board of Managers regarding certain prohibitions and procedure. It directs the board of directors for CompSource Mutual Insurance Company to have the power to disapprove the rate established by the Multiple Injury Trust director until the Multiple Injury Trust Fund repays in full the amount due on any loan from CompSource Mutual Insurance Company or its predecessor CompSource Oklahoma. It states if the MITF director and CompSource Mutual Insurance Company have not agreed on the assessment rate within 30 days, the administrator of the Workers' Compensation Court will set an assessment rate sufficient to cover all foreseeable obligations of the Multiple Injury Trust Fund, including interest and principle owed by the fund on any loan until such time as the Multiple Injury Trust Fund fully satisfies any loan obligation payable to CompSource Mutual insurance Company or its predecessor CompSource Oklahoma. The bill removes language stating that state institutions will insure against liability for workers' compensation with the State Insurance Fund and will not insure with any other carrier unless authorized by certain provisions. The bill repeals statutory language related to state malpractice insurance, the CompSource Oklahoma Merit System, Classified and Unclassified Service, the Task Force on Privatization of CompSource Oklahoma and the CompSource Oklahoma" Fund. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 01/01/2015 **Emergency:** No

**Principal Authors:** Grau, Randy (H); Bingman, Brian (S)

**Status:** Governor Action - Signed **Status Date:** 05/13/2013

#### HB2226



**Short Title:** An Act relating to health benefit plans; defining terms; requiring use of certain forms under certain circumstances; establishing requirements for certain forms; providing for accessibility of certain forms; prohibiting certain emergency contraception to be available to certain individuals without a prescription; requiring certain emergency contraception to be dispensed by pharmacists to certain individuals without a prescription; and providing for codification. (Amended by House, Amended by Senate)

**Paraphrase:** HB2226, by Rep. Colby Schwartz, R-Yukon and Sen. A J Griffin, R-Guthrie, requires a health benefit plan to utilize prior authorization forms for obtaining any prior authorization for

prescription drug benefits and the form to not exceed four pages in length, excluding any instructions or guiding documentation and a health benefit plan may customize the content of the form specific to the prescription drug for which the prior authorization is being requested. The bill allows a health benefit plan to make the form accessible through multiple computer operating systems. The bill also requires a prescription for the purchase of Plan B One-Step by any person under the age of 17. (Amended by House, Amended by Senate) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 07/01/2013 **Emergency:** Yes

**Principal Authors:** Schwartz, Colby (H); Griffin, A J (S)

**Status:** Governor Action - Signed **Status Date:** 05/29/2013

### HB2301



**Short Title:** An Act relating to general appropriations for the expenses of various agencies of the executive, legislative and judicial departments of the state; making appropriations to the State Board of Education, the Oklahoma Arts Council, the Commissioners of the Land Office, the Board of Trustees of the Oklahoma School of Science and Mathematics, the Office of Educational Quality and Accountability, the Oklahoma Commission for Teacher Preparation, the State Board of Career and Technology Education, the Oklahoma Educational Television Authority, the Oklahoma Department of Libraries, the Oklahoma State Regents for Higher Education, the Physician Manpower Training Commission, the Oklahoma Center for the Advancement of Science and Technology, the Office of the State Auditor and Inspector, the Office of the State Bond Advisor, the State Election Board, the Oklahoma Department of Emergency Management, the Ethics Commission, the Office of the Governor, the Oklahoma House of Representatives, the Legislative Service Bureau, the Office of the Lieutenant Governor, the Office of Management and Enterprise Services, the Oklahoma Merit Protection Commission, the Military Department of the State of Oklahoma, the Oklahoma State Senate, the Oklahoma Tax Commission, the Office of the State Treasurer, the Department of Transportation, the Oklahoma Space Industry Development Authority, the State Department of Health, the Oklahoma Health Care Authority, the J.D. McCarty Center for Children with Developmental Disabilities, the Department of Mental Health and Substance Abuse Services, the University Hospitals Authority, the Oklahoma Department of Veterans Affairs, the Oklahoma Commission on Children and Youth, the Office of Disability Concerns, the Department of Human Services, the Office of Juvenile Affairs, the State Department of Rehabilitation Services, the Oklahoma Department of Agriculture, Food, and Forestry, the Oklahoma Department of Commerce, the Rural Economic Action Plan Fund, the Oklahoma Conservation Commission, the Department of Consumer Credit, the Corporation Commission, the Department of Environmental Quality, the Oklahoma Historical Society, the Oklahoma Horse Racing Commission, the Insurance Department, the J.M. Davis Memorial Commission, the Department of Labor, the Department of Mines, the Scenic Rivers Commission, the Oklahoma Tourism and Recreation Department, the Oklahoma Water Resources Board, the Will Rogers Memorial Commission, the Alcoholic Beverage Laws Enforcement Commission, the Department of Corrections, the Office of the State Fire Marshal, the Oklahoma State Bureau of Investigation, the Council on Law Enforcement Education and Training, the Board of Medicolegal Investigations, the Oklahoma State Bureau of Narcotics and Dangerous Drugs Control, the Department of Public Safety, the Office of the Attorney General, district attorneys and the District Attorneys Council, the

Court of Criminal Appeals, the Supreme Court, the Oklahoma Indigent Defense System, the Pardon and Parole Board, and the Workers' Compensation Court; stating amounts of the appropriations; stating purposes and restrictions; authorizing and requiring certain expenditures; authorizing and requiring certain transfers; requiring certain deposit; reappropriating and redesignating certain funds; and providing effective dates. (Amended by House, Appropriation Bill, Committee Substitute)

**Paraphrase:** HB2301, by Rep. Scott Martin, R-Norman, Rep. Tom Newell, R-Seminole, Sen. Clark Jolley, R-Edmond, and Sen. Ron Justice, R-Chickasha, appropriates \$7.1 billion to various agencies of the executive, legislative and judicial branches. (Amended by House, Appropriation Bill, Emergency Measure, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 07/01/2013 **Emergency:** No

**Principal Authors:** Martin, Scott (H); Newell, Tom (H); Jolley, Clark (S); Justice, Ron (S)

**Status:** Governor Action - Signed **Status Date:** 05/20/2013

### HB2305



**Short Title:** An Act relating to the Oklahoma Health Care Authority; providing for duties and compensation of employees; authorizing payment of certain expenses; requiring compliance with and providing budgetary limitations; requiring budgeting and expenditure for certain services; providing exemptions to budgetary limitations; providing process for exemptions; authorizing certain transfers; providing procedures; providing lapse dates; requiring and prohibiting certain budget procedures; providing an effective date; and declaring an emergency. (Amended by House, Appropriation Bill, Emergency Measure, Committee Substitute)

**Paraphrase:** HB2305, by Rep. Scott Martin, R-Norman, Rep. Tom Newell, R-Seminole, Sen. Clark Jolley, R-Edmond, and Sen. Ron Justice, R-Chickasha, sets budget limits for the Oklahoma Health Care Authority. The bill also provides that the director may request that receipt and expenditure of unanticipated federal funds awarded after July 1, 2013, be exempt from expenditure limitations and from budgetary limitations and establishes procedures for submitting and for the consideration of the request. (Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 07/01/2013 **Emergency:** Yes

**Principal Authors:** Martin, Scott (H); Newell, Tom (H); Jolley, Clark (S); Justice, Ron (S)

**Status:** Governor Action - Signed **Status Date:** 05/24/2013

### SB0027



**Short Title:** An Act relating to Medicaid fraud; amending 56 O.S. 2011, Section 1003, as last amended by Section 36 of Enrolled Senate Bill No. 977 of the 1st Session of the 54th Oklahoma Legislature, which relates to the Medicaid fraud control unit; authorizing the Oklahoma Health Care Authority to require certain information to be displayed by providers; providing standards for certain information; and providing an effective date. (Amended by Senate, Committee Substitute)

**Paraphrase:** SB0027, by Sen. Josh Brecheen, R-Coalgate and Rep. Arthur Hulbert, R-Fort Gibson, requires the Oklahoma Health Care Authority to be authorized to require providers to

display information about how to report providers suspected of fraudulent activity relating to the Oklahoma Medicaid Program, the sign to make reference to the Attorney General's Medicaid Fraud Control Unit hotline and provide the current phone number for the hotline, to be placed in a conspicuous location within a provider's office, and contain notification that all reports to the hotline may be filed anonymously by persons suspecting fraudulent activity. (Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Brecheen, Josh (S); Hulbert, Arthur (H)

**Status:** Governor Action - Signed **Status Date:** 04/22/2013

**SB0101**



**Short Title:** An Act relating to mental health; creating the Task Force on State Services for Adults with Asperger's Syndrome and Autism; designating membership and appointing authorities; providing date by which appointments shall be made; specifying terms of service; providing for filling vacancies; providing frequency of meetings; providing for a quorum; providing travel reimbursements to Task Force members; designating agency staff; providing for noncodification; providing an effective date; and declaring an emergency. (Emergency Measure)

**Paraphrase:** SB0101, by Sen. Patrick Anderson, R-Enid and Rep. John Enns, R-Waukomis, creates the six-member Task Force on State Services for Adults with Asperger's Syndrome and Autism until Dec. 31, 2013, study the needs of this population in Oklahoma, the services currently available for assisting these individuals in Oklahoma, and make specific recommendations to the Legislature regarding services that need to be provided to this population. The bill establishes procedures for selecting members. (Emergency Measure) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 07/01/2013 **Emergency:** Yes

**Principal Authors:** Anderson, Patrick (S); Enns, John (H)

**Status:** Governor Action - Veto **Status Date:** 05/06/2013

**SB0237**



**Short Title:** An act relating to the Nursing Facilities Quality of Care Fee; amending 56 O.S. 2011, Section 2002, as last amended by Section 38 of Enrolled Senate Bill No. 977 of the 1st Session of the 54th Oklahoma Legislature, which relates to the Nursing Facilities Quality of Care Fee; exempting facilities operated by the Oklahoma Department of Veterans Affairs; amending 63 O.S. 2011, Sections 1-890.4 and 1-1905, which relate to fees; exempting facilities operated by the Oklahoma Department of Veterans Affairs; and declaring an emergency. (Amended by Senate, Emergency Measure)

**Paraphrase:** SB0237, by Sen. Frank Simpson, R-Ardmore and Rep. Tommy Hardin, R-Madill, amends language concerning the Oklahoma Health Care Authority in regards to the Nursing Facilities Quality of Care Fee. The measure states that facilities operated by the Oklahoma Department of Veterans Affairs will be exempt from the fee. (Amended by Senate, Emergency Measure) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 04/29/2013 **Emergency:** Yes

**Principal Authors:** Simpson, Frank (S); Hardin, Tommy (H)

**Status:** Governor Action - Signed **Status Date:** 04/29/2013

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**SB0272**



**Short Title:** An Act relating to public health and safety; providing for definition; requiring the Oklahoma Health Care Authority to conduct a feasibility study; directing certain results be included on study; providing for delivering of study to certain subcommittees; providing for noncodification; providing for an effective date; and declaring an emergency. (Amended by Senate, Emergency Measure, Committee Substitute)

**Paraphrase:** SB0272, by Sen. Kimberley David, R-Wagoner and Rep. Doug Cox, R-Grove, defines "dual-eligible" person as low-income seniors and younger persons with disabilities who are enrolled in both the Medicare and Medicaid programs. The bill requires the Oklahoma Health Care Authority to conduct a feasibility study of current and potential care coordination models that could be implemented for dually-eligible persons and to explore options for cost containment and delivery alternatives for those individuals. The bill requires the authority to deliver the study to the Senate Appropriations Subcommittee on Health and Human Services and the House Appropriations and Budget Subcommittee on Public Health and Social Services by December 31, 2013. (Amended by Senate, Emergency Measure, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 07/01/2013 **Emergency:** Yes

**Principal Authors:** David, Kimberley (S); Cox, Doug (H)

**Status:** Governor Action - Signed **Status Date:** 04/22/2013

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**SB0292**



**Short Title:** An Act relating to property; amending 68 O.S. 2011, Section 3129, which relates to property tax resales; requiring county treasurers to provide certain list of property resales to the Oklahoma Health Care Authority; requiring OHCA to produce certain list of property with OHCA liens; providing for information to be released to the public; authorizing release of certain liens on blighted property; and providing an effective date. (Amended by Senate)

**Paraphrase:** SB0292, by Sen. Brian Crain, R-Tulsa and Rep. Mike Sanders, R-Kingfisher, amends language pertaining to property and county treasurers. The bill states that the county treasurers will provide the Oklahoma Health Care Authority with a list of properties that will be sold at tax resales in their respective counties. The bill states that with the information OHCA will produce a list of each county properties with OHCA liens. The bill allows the list of liens to be made available to potential buyers at tax resales. The measure provides that OCHA will file a release of the liens on properties that fit the definition of the blighted properties as defined in Oklahoma statutes. The measure does not allow the filing of the lien release to extinguish debt owed to OHCA. (Amended by Senate) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Crain, Brian (S); Sanders, Mike (H)

**Status:** Governor Action - Signed **Status Date:** 04/24/2013

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**SB0456**

**Short Title:** An Act relating to public assistance fraud; amending 56 O.S. 2011, Section 185, which relates to fraud in obtaining public assistance; requiring county offices of the Department of Human Services to provide information on reporting fraudulent acquisition and use of public assistance; providing standards for signs posted in county offices; providing confidentiality to persons reporting fraud; and providing an effective date. (Amended by Senate, Committee Substitute)

**Paraphrase:** SB0456, by Sen. Josh Brecheen, R-Coalgate and Rep. Arthur Hulbert, R-Fort Gibson, requires every county Department of Human Services office to conspicuously post a sign in an area clearly visible to all visitors of the county office that provides information about how to report individuals who have obtained public assistance through fraudulent means or who have used public assistance in a manner not consistent with its intended use and the sign to make reference to the Department of Human Services fraud hotline and provide the current phone number for the hotline. The bill requires, notwithstanding any other provision of law, the identity of any person making a report on another individual who may have obtained public assistance through fraudulent means, or an individual using public assistance in a manner not consistent with its intended use, shall not be revealed without the permission of the person making the report. (Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Brecheen, Josh (S); Hulbert, Arthur (H)

**Status:** Governor Action - Signed **Status Date:** 04/18/2013

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**SB0587**

**Short Title:** An Act relating to public health; providing definitions; authorizing noncompulsory electronic recording of residents of nursing facilities; requiring written notice; prohibiting certain restrictions on residents; requiring certain posting; prohibiting tampering with electronic recording devices; providing penalties for violations; requiring resident permission for disclosure of certain information; permitting certain information to be used for legal proceedings; requiring certain notification; requiring consent form; providing who may give consent; providing rights of other resident of a room; providing for additional information in form; requiring certain compliance; providing for codification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** SB0587, by Sen. Ron Justice, R-Chickasha and Rep. Harold Wright, R-Weatherford, clarifies definitions related to public health. The bill states authorized electronic monitoring of a resident's room conducted under this act is not compulsory and shall only be conducted with the consent of the resident, residents, or legal representatives thereof. The bill requires a nursing facility to not refuse to admit an individual to residency in the facility and shall not remove a resident from a facility because of authorized electronic monitoring of a resident's room. The bill prohibits any person or entity from intentionally hampering, obstructing, tampering with, or destroying an electronic monitoring device installed in a nursing facility and finds that any person or entity that does so to be subject to certain penalties. The bill prohibits any person or entity from



intercepting a communication or disclose or using an intercepted communication of an electronic monitoring device placed or installed in a common area of a nursing facility without the express consent of the facility, or, for an electronic monitoring device installed in a resident's room, the express consent of the resident or legal representatives thereof. The bill allows, subject to the provisions of law, a tape or recording created through the use of authorized electronic monitoring pursuant to this act to be admitted into evidence in a civil or criminal court action or administrative proceeding. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Justice, Ron (S); Wright, Harold (H)

**Status:** Governor Action - Signed **Status Date:** 05/06/2013

**SB0596**



**Short Title:** An Act relating to state government; amending 62 O.S. 2011, Section 45.8, which relates to requiring evaluation of certain report in certain performance audits; requiring annual report to certain legislative committees and state agency by certain date; stating required information; defining terms; requiring posting of certain reports on certain agency website; requiring notice of posting; providing for codification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** SB0596, by Sen. David Fuller Holt, R-Oklahoma City and Rep. Jason Murphey, R-Guthrie, requires the director of the Office of Management and Enterprise Services to develop a method of accountability for performance and efficiency to be used by state governmental agencies. The bill requires that the accountability method at a minimum determine the actual cost of each agency program, detail the agency's cost-containment and other cost-avoidance measures, assess the cost-effectiveness of each agency program, and include a cost/benefit analysis for each program. The bill prohibits any agency from imposing a fee on public bodies to be effective after June 30, 2014, unless the fee is shown to be necessary by the accountability method adopted by the director. The bill defines certain terms. The bill also prohibits the director from including any funding for any agency program in the budget prepared for the governor that is not justified by the cost/benefit analysis. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Holt, David Fuller (S); Murphey, Jason (H)

**Status:** Governor Action - Signed **Status Date:** 05/07/2013

**SB0630**



**Short Title:** An Act relating to sole source purchase contracts; amending 74 O.S. 2011, Section 85.22, which relates to competitive bidding; modifying certification requirements; authorizing substitution of certain products; prohibiting purchasing restrictions to certain geographical areas; authorizing promulgation of rules to implement act; providing for codification; providing for noncodification; and declaring an emergency. (Amended by House, Amended by Senate, Emergency Measure, Committee Substitute)

**Paraphrase:** SB0630, by Sen. Clark Jolley, R-Edmond and Rep. Jason Murphey, R-Guthrie, requires any bid submissions made by a state agency or any political subdivision that substitute an item with one that is alike in quality and design or which meets the required specifications of the bid be considered and not be prohibited. The bill also provides that no sole source bid proposal can require any limitation that materials must be supplied from a vendor within any specific geographical area. The bill permits geographic preference for vendors inside the geographical boundaries but only when the cost is the same or similar. The bill authorizes the Office of Management and Enterprise Services to promulgate rules necessary for the bill's implementation. (Amended by House, Amended by Senate, Emergency Measure, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 05/07/2013 **Emergency:** Yes

**Principal Authors:** Jolley, Clark (S); Murphey, Jason (H)

**Status:** Governor Action - Signed **Status Date:** 05/07/2013

**SB0900**



**Short Title:** An Act relating to public health and safety; creating the Prioritization of Public Funding in the Purchasing of Family Planning and Counseling Services Act; defining terms; establishing priority of public funding for family planning services; authorizing district attorney or Attorney General to bring certain action; providing for standing of certain entities to bring certain action; providing for attorney fees in certain circumstances; providing for severability; providing for codification; and providing an effective date. (Amended by House, Amended by Senate)

**Paraphrase:** SB0900, by Sen. Robert Standridge, R-Norman and Rep. Randy Grau, R-Edmond, requires any and all investigations, surveys, or other measures of facility performance occur at least once every three years for facilities licensed pursuant to the provisions of the Oklahoma Hospice Licensing Act and states this requirement not apply to any investigations, surveys, or other measures administered by the Centers for Medicare and Medicaid Services. (Amended by House, Amended by Senate) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Standridge, Robert (S); Grau, Randy (H)

**Status:** Governor Action - Signed **Status Date:** 05/29/2013

**SB0945**



**Short Title:** An Act relating to revenue and taxation; amending 68 O.S. 2011, Section 205.2, as amended by Section 1, Chapter 240, O.S.L. 2012 (68 O.S. Supp. 2012, Section 205.2) which relates to interception of tax refunds; modifying applicability; and declaring an emergency. (Amended by Senate, Emergency Measure, Committee Substitute)

**Paraphrase:** SB0945, by Sen. Brian Bingman, R-Sapulpa and Rep. Scott Martin, R-Norman, clarifies that a state agency, a municipal court or a district court seeking to collect a debt, unpaid fines and cost or final judgment of at least \$50 from an individual who has filed a state income tax return may file a claim with the Oklahoma Tax Commission requesting that the amount owed to the agency, a municipal court or a district court be deducted from any state income tax refund due to that individual except from those 65 years and older and those receiving a refund under the Sales



Tax Relief Act. (Amended by Senate, Emergency Measure, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Bingman, Brian (S); Martin, Scott (H)

**Status:** Governor Action - Signed **Status Date:** 04/15/2013

**SB0975**



**Short Title:** An Act relating to insurance; amending 36 O.S. 2011, Section 7301, which relates to dental plan fee regulation; specifying certain contract requirements for services rendered by a dentist; and providing an effective date. (Amended by Senate, Committee Substitute)

**Paraphrase:** SB0975, by Sen. Rob Johnson, R-Kingfisher and Rep. Dan Kirby, R-Tulsa, requires health benefit plans and dentals plans to establish and maintain appeal procedures for any claim by a dentist or a subscriber that is denied on lack of medical necessity. The bill requires the denial to be based on a determination by a dentist who holds a non-restricted license in the U.S. It also requires that any written communication to a dentist the includes or pertains to a denial of benefits on the basis of a lack to medical necessity to include the identifier and license number and state of issuance and a contact number of the licensed dentist making the determination. It also permits that the dentist who reviewed the claim to be contacted only at the telephone number provided in the written communication about the denial during business hours. (Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 11/01/2013 **Emergency:** No

**Principal Authors:** Johnson, Rob (S); Kirby, Dan (H)

**Status:** Governor Action - Signed **Status Date:** 04/18/2013

**SB0977**



**Short Title:** An Act relating to multiple versions of statutes; amending, merging, consolidating, and repealing multiple versions of statutes; repealing 2 O.S. 2011, Section 2-2, as amended by Section 1, Chapter 133, O.S.L. 2012 (2 O.S. Supp. 2012, Section 2-2); repealing 10 O.S. 2011, Section 1-240, as recodified by Section 6, Chapter 253, O.S.L. 2012 (10 O.S. Supp. 2012, Section 440); amending 10 O.S. 2011, Section 601.3, as amended by Section 1, Chapter 340, O.S.L. 2012 (10 O.S. Supp. 2012, Section 601.3); repealing 10 O.S. 2011, Section 601.3, as amended by Section 2, Chapter 353, O.S.L. 2012 (10 O.S. Supp. 2012, Section 601.3); amending 10A O.S. 2011, Section 2-7-202, as amended by Section 9, Chapter 353, O.S.L. 2012 (10A O.S. Supp. 2012, Section 2-7-202); repealing 10A O.S. 2011, Section 2-7-202, as amended by Section 41, Chapter 304, O.S.L. 2012 (10A O.S. Supp. 2012, Section 2-7-202); amending 11 O.S. 2011, Section 51-104, as amended by Section 1, Chapter 90, O.S.L. 2012 (11 O.S. Supp. 2012, Section 51-104); repealing 11 O.S. 2011, Section 51-104, as amended by Section 1, Chapter 58, O.S.L. 2012 (11 O.S. Supp. 2012, Section 51-104); amending 17 O.S. 2011, Section 354, as amended by Section 1, Chapter 287, O.S.L. 2012 (17 O.S. Supp. 2012, Section 354); repealing 17 O.S. 2011, Section 354, as amended by Section 1, Chapter 362, O.S.L. 2012 (17 O.S. Supp. 2012, Section 354); amending 19 O.S. 2011, Section 339, as amended by Section 1, Chapter 22, O.S.L. 2012 (19 O.S. Supp. 2012, Section 339); repealing 19 O.S. 2011, Section 339, as amended by Section 1,

Chapter 19, O.S.L. 2012 (19 O.S. Supp. 2012, Section 339); repealing 19 O.S. 2011, Section 339, as amended by Section 1, Chapter 144, O.S.L. 2012 (19 O.S. Supp. 2012, Section 339); amending 21 O.S. 2011, Section 1247, as amended by Section 1, Chapter 30, O.S.L. 2012 (21 O.S. Supp. 2012, Section 1247); repealing 21 O.S. 2011, Section 1247, as amended by Section 90, Chapter 304, O.S.L. 2012 (21 O.S. Supp. 2012, Section 1247); amending 21 O.S. 2011, Section 1290.14, as amended by Section 34, Chapter 259, O.S.L. 2012 (21 O.S. Supp. 2012, Section 1290.14); repealing 21 O.S. 2011, Section 1290.14, as amended by Section 91, Chapter 304, O.S.L. 2012 (21 O.S. Supp. 2012, Section 1290.14); amending 21 O.S. 2011, Section 1290.26, as amended by Section 1, Chapter 195, O.S.L. 2012 (21 O.S. Supp. 2012, Section 1290.26); repealing 21 O.S. 2011, Section 1290.26, as amended by Section 44, Chapter 259, O.S.L. 2012 (21 O.S. Supp. 2012, Section 1290.26); amending 26 O.S. 2011, Section 3-101, as amended by Section 2, Chapter 31, O.S.L. 2012 (26 O.S. Supp. 2012, Section 3-101); repealing 26 O.S. 2011, Section 3-101, as amended by Section 1, Chapter 152, O.S.L. 2012 (26 O.S. Supp. 2012, Section 3-101); amending 36 O.S. 2011, Section 6670, as amended by Section 1, Chapter 147, O.S.L. 2012 (36 O.S. Supp. 2012, Section 6670); repealing 36 O.S. 2011, Section 6670, as amended by Section 36, Chapter 150, O.S.L. 2012 (36 O.S. Supp. 2012, Section 6670); amending 47 O.S. 2011, Section 2-110, as amended by Section 3, Chapter 242, O.S.L. 2012 (47 O.S. Supp. 2012, Section 2-110); repealing 47 O.S. 2011, Section 2-110, as amended by Section 1, Chapter 255, O.S.L. 2012 (47 O.S. Supp. 2012, Section 2-110); amending 47 O.S. 2011, Section 6-101, as amended by Section 1, Chapter 280, O.S.L. 2012 (47 O.S. Supp. 2012, Section 6-101); repealing 47 O.S. 2011, Section 6-101, as amended by Section 5, Chapter 283, O.S.L. 2012 (47 O.S. Supp. 2012, Section 6-101); amending 47 O.S. 2011, Section 11-1401.2, as amended by Section 1, Chapter 43, O.S.L. 2012 (47 O.S. Supp. 2012, Section 11-1401.2); repealing 47 O.S. 2011, Section 11-1401.2, as amended by Section 1, Chapter 132, O.S.L. 2012 (47 O.S. Supp. 2012, Section 11-1401.2); amending 47 O.S. 2011, Section 14-118, as amended by Section 1, Chapter 162, O.S.L. 2012 (47 O.S. Supp. 2012, Section 14-118); repealing 47 O.S. 2011, Section 14-118, as amended by Section 11, Chapter 283, O.S.L. 2012 (47 O.S. Supp. 2012, Section 14-118); amending 47 O.S. 2011, Section 759, as amended by Section 181, Chapter 304, O.S.L. 2012 (47 O.S. Supp. 2012, Section 759); repealing 47 O.S. 2011, Section 759, as amended by Section 1, Chapter 61, O.S.L. 2012 (47 O.S. Supp. 2012, Section 759); amending 51 O.S. 2011, Section 155, as amended by Section 1, Chapter 16, O.S.L. 2012 (51 O.S. Supp. 2012, Section 155); repealing 51 O.S. 2011, Section 155, as amended by Section 1, Chapter 14, O.S.L. 2012 (51 O.S. Supp. 2012, Section 155); amending 56 O.S. 2011, Section 1003, as amended by Section 1, Chapter 244, O.S.L. 2012 (56 O.S. Supp. 2012, Section 1003); repealing 56 O.S. 2011, Section 1003, as amended by Section 240, Chapter 304, O.S.L. 2012 (56 O.S. Supp. 2012, Section 1003); amending 56 O.S. 2011, Section 2002, as amended by Section 1, Chapter 122, O.S.L. 2012 (56 O.S. Supp. 2012, Section 2002); repealing 56 O.S. 2011, Section 2002, as amended by Section 241, Chapter 304, O.S.L. 2012 (56 O.S. Supp. 2012, Section 2002); amending 57 O.S. 2011, Section 549.1, as amended by Section 252, Chapter 304, O.S.L. 2012 (57 O.S. Supp. 2012, Section 549.1); repealing 57 O.S. 2011, Section 549.1, as amended by Section 2, Chapter 219, O.S.L. 2012 (57 O.S. Supp. 2012, Section 549.1); amending 59 O.S. 2011, Section 1203, as amended by Section 279, Chapter 304, O.S.L. 2012 (59 O.S. Supp. 2012, Section 1203); repealing 59 O.S. 2011, Section 1203, as amended by Section 1, Chapter 72, O.S.L. 2012 (59 O.S. Supp. 2012, Section 1203); amending 59 O.S. 2011, Section 1800.14, as amended by Section 16, Chapter 368, O.S.L. 2012 (59 O.S. Supp. 2012, Section 1800.14); repealing 59 O.S.

2011, Section 1800.14, as amended by Section 282, Chapter 304, O.S.L. 2012 (59 O.S. Supp. 2012, Section 1800.14); amending 59 O.S. 2011, Section 1800.15, as amended by Section 17, Chapter 368, O.S.L. 2012 (59 O.S. Supp. 2012, Section 1800.15); repealing 59 O.S. 2011, Section 1800.15, as amended by Section 283, Chapter 304, O.S.L. 2012 (59 O.S. Supp. 2012, Section 1800.15); amending 61 O.S. 2011, Section 202, as amended by Section 1, Chapter 184, O.S.L. 2012 (61 O.S. Supp. 2012, Section 202); repealing 61 O.S. 2011, Section 202, as amended by Section 318, Chapter 304, O.S.L. 2012 (61 O.S. Supp. 2012, Section 202); amending 61 O.S. 2011, Section 204, as amended by Section 2, Chapter 184, O.S.L. 2012 (61 O.S. Supp. 2012, Section 204); repealing 61 O.S. 2011, Section 204, as amended by Section 321, Chapter 304, O.S.L. 2012 (61 O.S. Supp. 2012, Section 204); amending 61 O.S. 2011, Section 208.1, as amended by Section 3, Chapter 184, O.S.L. 2012 (61 O.S. Supp. 2012, Section 208.1); repealing 61 O.S. 2011, Section 208.1, as amended by Section 325, Chapter 304, O.S.L. 2012 (61 O.S. Supp. 2012, Section 208.1); amending 61 O.S. 2011, Section 208.2, as amended by Section 4, Chapter 184, O.S.L. 2012 (61 O.S. Supp. 2012, Section 208.2); repealing 61 O.S. 2011, Section 208.2, as amended by Section 326, Chapter 304, O.S.L. 2012 (61 O.S. Supp. 2012, Section 208.2); amending 62 O.S. 2011, Section 34.11.1, as amended by Section 342, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.11.1); repealing 62 O.S. 2011, Section 34.11.1, as last amended by Section 1, Chapter 292, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.11.1); amending 62 O.S. 2011, Section 34.12, as amended by Section 2, Chapter 292, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.12); repealing 62 O.S. 2011, Section 34.12, as amended by Section 345, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.12); amending 62 O.S. 2011, Section 34.21, as amended by Section 3, Chapter 292, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.21); repealing 62 O.S. 2011, Section 34.21, as amended by Section 353, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 34.21); amending 62 O.S. 2011, Section 35.5, as amended by Section 414, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 35.5); repealing 62 O.S. 2011, Section 35.5, as amended by Section 4, Chapter 292, O.S.L. 2012 (62 O.S. Supp. 2012, Section 35.5); amending 62 O.S. 2011, Section 35.8, as amended by Section 5, Chapter 292, O.S.L. 2012 (62 O.S. Supp. 2012, Section 35.8); repealing 62 O.S. 2011, Section 35.8, as amended by Section 417, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 35.8); amending 62 O.S. 2011, Section 89.2, as amended by Section 4, Chapter 131, O.S.L. 2012 (62 O.S. Supp. 2012, Section 89.2); repealing 62 O.S. 2011, Section 89.2, as amended by Section 439, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 89.2); amending 62 O.S. 2011, Section 901, as amended by Section 1, Chapter 288, O.S.L. 2012 (62 O.S. Supp. 2012, Section 901); repealing 62 O.S. 2011, Section 901, as last amended by Section 469, Chapter 304, O.S.L. 2012 (62 O.S. Supp. 2012, Section 901); amending 63 O.S. 2011, Section 2-103, as amended by Section 1, Chapter 186, O.S.L. 2012 (63 O.S. Supp. 2012, Section 2-103); repealing 63 O.S. 2011, Section 2-103, as amended by Section 495, Chapter 304, O.S.L. 2012 (63 O.S. Supp. 2012, Section 2-103); repealing 63 O.S. 2011, Section 2-309, as amended by Section 5, Chapter 80, O.S.L. 2012 (63 O.S. Supp. 2012, Section 2-309); amending 63 O.S. 2011, Section 2-309C, as last amended by Section 3, Chapter 206, O.S.L. 2012 (63 O.S. Supp. 2012, Section 2-309C); repealing 63 O.S. 2011, Section 2-309C, as amended by Section 2, Chapter 83, O.S.L. 2012 (63 O.S. Supp. 2012, Section 2-309C); repealing 63 O.S. 2011, Section 2-329, as amended by Section 7, Chapter 80, O.S.L. 2012 (63 O.S. Supp. 2012, Section 2-329); amending 63 O.S. 2011, Section 91, as amended by Section 1, Chapter 119, O.S.L. 2012 (63 O.S. Supp. 2012, Section 91); repealing 63 O.S. 2011, Section 91, as amended by Section 1, Chapter 62, O.S.L. 2012 (63

O.S. Supp. 2012, Section 91); amending 63 O.S. 2011, Section 2418, as amended by Section 3, Chapter 357, O.S.L. 2012 (63 O.S. Supp. 2012, Section 2418); repealing 63 O.S. 2011, Section 2418, as amended by Section 512, Chapter 304, O.S.L. 2012 (63 O.S. Supp. 2012, Section 2418); amending 68 O.S. 2011, Section 205.2, as amended by Section 1, Chapter 240, O.S.L. 2012 (68 O.S. Supp. 2012, Section 205.2); repealing 68 O.S. 2011, Section 205.2, as amended by Section 1, Chapter 256, O.S.L. 2012 (68 O.S. Supp. 2012, Section 205.2); amending 68 O.S. 2011, Section 1357, as amended by Section 2, Chapter 230, O.S.L. 2012 (68 O.S. Supp. 2012, Section 1357); repealing 68 O.S. 2011, Section 1357, as amended by Section 1, Chapter 233, O.S.L. 2012 (68 O.S. Supp. 2012, Section 1357); amending 68 O.S. 2011, Section 2368.14, as amended by Section 2, Chapter 209, O.S.L. 2012 (68 O.S. Supp. 2012, Section 2368.14); repealing 68 O.S. 2011, Section 2368.14, as amended by Section 555, Chapter 304, O.S.L. 2012 (68 O.S. Supp. 2012, Section 2368.14); amending 68 O.S. 2011, Section 2368.16, as amended by Section 3, Chapter 209, O.S.L. 2012 (68 O.S. Supp. 2012, Section 2368.16); repealing 68 O.S. 2011, Section 2368.16, as amended by Section 557, Chapter 304, O.S.L. 2012 (68 O.S. Supp. 2012, Section 2368.16); amending 68 O.S. 2011, Section 3603, as amended by Section 1, Chapter 308, O.S.L. 2012 (68 O.S. Supp. 2012, Section 3603); repealing 68 O.S. 2011, Section 3603, as amended by Section 567, Chapter 304, O.S.L. 2012 (68 O.S. Supp. 2012, Section 3603); repealing 68 O.S. 2011, Section 3603, as amended by Section 1, Chapter 310, O.S.L. 2012 (68 O.S. Supp. 2012, Section 3603); amending 69 O.S. 2011, Section 404, as amended by Section 3, Chapter 356, O.S.L. 2012 (69 O.S. Supp. 2012, Section 404); repealing 69 O.S. 2011, Section 404, as amended by Section 572, Chapter 304, O.S.L. 2012 (69 O.S. Supp. 2012, Section 404); amending 69 O.S. 2011, Section 1521, as amended by Section 1, Chapter 346, O.S.L. 2012 (69 O.S. Supp. 2012, Section 1521); repealing 69 O.S. 2011, Section 1521, as amended by Section 583, Chapter 304, O.S.L. 2012 (69 O.S. Supp. 2012, Section 1521); repealing 70 O.S. 2011, Section 3-117, as amended by Section 590, Chapter 304, O.S.L. 2012 (70 O.S. Supp. 2012, Section 3-117); amending 70 O.S. 2011, Section 1210.508C, as last amended by Section 1, Chapter 250, O.S.L. 2012 (70 O.S. Supp. 2012, Section 1210.508C); repealing 70 O.S. 2011, Section 1210.508C, as last amended by Section 9, Chapter 354, O.S.L. 2012 (70 O.S. Supp. 2012, Section 1210.508C); amending 70 O.S. 2011, Section 21-116, as amended by Section 1, Chapter 277, O.S.L. 2012 (70 O.S. Supp. 2012, Section 21-116); repealing 70 O.S. 2011, Section 21-116, as amended by Section 612, Chapter 304, O.S.L. 2012 (70 O.S. Supp. 2012, Section 21-116); repealing 74 O.S. 2011, Section 10.3, as amended by Section 694, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 10.3); amending 74 O.S. 2011, Section 85.45k, as amended by Section 4, Chapter 106, O.S.L. 2012 (74 O.S. Supp. 2012, Section 85.45k); repealing 74 O.S. 2011, Section 85.45k, as amended by Section 764, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 85.45k); amending 74 O.S. 2011, Section 85.45l, as amended by Section 6, Chapter 316, O.S.L. 2012 (74 O.S. Supp. 2012, Section 85.45l); repealing 74 O.S. 2011, Section 85.45l, as amended by Section 765, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 85.45l); amending 74 O.S. 2011, Section 110.3, as amended by Section 809, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 110.3); repealing 74 O.S. 2011, Section 110.3, as amended by Section 7, Chapter 316, O.S.L. 2012 (74 O.S. Supp. 2012, Section 110.3); amending 74 O.S. 2011, Section 500.2, as amended by Section 5, Chapter 106, O.S.L. 2012 (74 O.S. Supp. 2012, Section 500.2); repealing 74 O.S. 2011, Section 500.2, as amended by Section 853, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 500.2); amending 74 O.S. 2011, Section 840-4.14, as amended by Section 1, Chapter 285, O.S.L. 2012 (74 O.S. Supp. 2012, Section 840-4.14); repealing 74 O.S. 2011,

Section 840-4.14, as amended by Section 909, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 840-4.14); amending 74 O.S. 2011, Section 913, as amended by Section 1, Chapter 155, O.S.L. 2012 (74 O.S. Supp. 2012, Section 913); repealing 74 O.S. 2011, Section 913, as amended by Section 928, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 913); amending 74 O.S. 2011, Section 913.4, as amended by Section 2, Chapter 109, O.S.L. 2012 (74 O.S. Supp. 2012, Section 913.4) repealing 74 O.S. 2011, Section 913.4, as amended by Section 2, Chapter 155, O.S.L. 2012 (74 O.S. Supp. 2012, Section 913.4); amending 74 O.S. 2011, Section 1310.1, as amended by Section 2, Chapter 321, O.S.L. 2012 (74 O.S. Supp. 2012, Section 1310.1); repealing 74 O.S. 2011, Section 1310.1, as amended by Section 949, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 1310.1); amending 74 O.S. 2011, Section 3001, as amended by Section 1, Chapter 289, O.S.L. 2012 (74 O.S. Supp. 2012, Section 3001); repealing 74 O.S. 2011, Section 3001, as amended by Section 1000, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 3001); amending 74 O.S. 2011, Section 3007, as amended by Section 3, Chapter 289, O.S.L. 2012 (74 O.S. Supp. 2012, Section 3007); repealing 74 O.S. 2011, Section 3007, as amended by Section 1003, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 3007); amending 74 O.S. 2011, Section 7005, as amended by Section 1049, Chapter 304, O.S.L. 2012 (74 O.S. Supp. 2012, Section 7005); repealing 74 O.S. 2011, Section 7005, as amended by Section 2, Chapter 301, O.S.L. 2012 (74 O.S. Supp. 2012, Section 7005); providing an effective date; and declaring an emergency. (Emergency Measure)

**Paraphrase:** SB0977, by Sen. Anthony Sykes, R-Moore and Rep. Leslie Osborn, R-Mustang, amends, merges, consolidates and repeals duplicative sections of law. (Emergency Measure) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 04/08/2013 **Emergency:** Yes

**Principal Authors:** Sykes, Anthony (S); Osborn, Leslie (H)

**Status:** Governor Action - Signed **Status Date:** 04/08/2013

### SB1008



**Short Title:** An Act relating to state government; creating the Oklahoma Privatization Act; directing the Office of Management and Enterprise Services to establish certain repository; and providing for codification. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** SB1008, by Sen. Greg Treat, R-Oklahoma City and Rep. Randy McDaniel, R-Edmond, creates the Oklahoma Office of Privatization Act. The bill creates the Oklahoma Office of Privatization under the regulatory authority of the Office of Management and Enterprise Services. The bill establishes that the purpose of the Office of Privatization is to establish an entity to be the repository of the best privatization and surplus asset sales practices, as well as having expertise to select projects or services for privatization, be capable of rapid evaluation and response to unsolicited privatization proposals and have the ability to oversee the contracting for privatization opportunities. The bill provides that the Secretary of Finance, in the capacity of the Director of the Office of Management and Enterprise Services or a successor agency, will organize, with the approval of the governor, a governing board to assist in the functions outlined in the governor's task force recommendations. The bill requires initial appointments to the board be made no later than Sept. 1, 2013. The bill provides that the governor shall determine the number of members and qualifications necessary as the governor deems appropriate. The bill also establishes that the

Director of OMES, will be authorized to report legislative recommendations as the board deems necessary to further implement the provisions of the bill. (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 08/22/2013 **Emergency:** No

**Principal Authors:** Treat, Greg (S); McDaniel, Randy (H)

**Status:** Governor Action - Signed **Status Date:** 05/13/2013

**SB1062**



**Short Title:** An Act relating to workers' compensation administrative system; creating the Administrative Workers' Compensation Act; providing short title; defining terms; stating applicability of act; stating effect of finding of unconstitutionality; providing for exclusivity of certain remedies; providing exceptions; prohibiting certain statement or misrepresentation; creating felony offense; directing allocation of certain fine; requiring referral of certain violations; creating certain investigation unit; requiring Attorney General to designate certain personnel; establishing qualifications for certain personnel; designating certain enforcement powers to Attorney General; requiring employers to make certain reports; creating misdemeanor offense; imposing fine for certain offense; directing allocation of certain fine; specifying authority for certain prosecuting attorneys; establishing confidentiality of certain investigatory files; authorizing Attorney General to promulgate certain rules; providing for stay of certain proceeding under specified circumstances; prohibiting certain discrimination or retaliation; establishing exclusive jurisdiction over certain claims; providing remedies for certain violations; construing provisions; providing certain discharge, with exception; providing for invalidity of certain waivers or agreements; providing exceptions; creating misdemeanor offense; prohibiting assignment or garnishment of and other legal process against certain claims or benefits; providing exception; providing for child support liens; establishing requirements for certain compensation to alien nonresidents; establishing preference for certain compensation; prohibiting compensation for certain injury; providing exceptions; limiting benefits for certain disability; establishing requirements for determination of certain injury or illness as compensable injury; requiring Attorney General to provide certain report to Commission; establishing requirements for certain report; requiring certain certification; providing for applicability of certain guidelines; creating a Physician Advisory Committee; specifying membership of Committee; directing appointment of certain membership; providing for terms of certain membership; establishing duties of Committee; prohibiting certain compensation; providing for reimbursement of certain travel expenses; establishing requirements for conducting committee business; providing for office supplies and personnel; requiring provision of certain data; providing immunity from liability for certain reports; prohibiting certain billing or attempt to collect fee for services under certain circumstances; requiring certain notice; specifying contents of certain notice; authorizing collection for certain charges; requiring stay of certain proceedings; creating the Oklahoma Workers' Compensation Commission; establishing membership of Commission; providing for appointment and confirmation of commissioners; providing for terms of commissioners; providing for certain salary; providing for appointment of chair; establishing duties of chair; granting specified authority to Commission; directing deposit of certain fees; requiring certain oath; establishing requirements for conducting of Commission business; providing for principal office; providing for hearings, appeals and disputes; establishing position and authority of special commissioner; authorizing certain per diem; providing for adoption of certain rules;

authorizing appointment of certain employees; providing for salary to certain employees; establishing duty of certain judges; requiring submission of certain report; requiring publication of certain information; establishing procedures for removal of commissioner; establishing jurisdiction of the Commission; establishing duties of certain judges; providing for establishment of certain Funds; establishing requirements for management and administration of certain Funds; requiring certain fees; directing deposit of certain fees; authorizing reimbursement for certain travel expenses; specifying revenue sources for Multiple Injury Trust Fund; establishing methods for determination of certain assessments; defining terms; requiring certain notice; establishing maximum limit for certain assessments; establishing duty for collection of certain payments; establishing administrative penalties for failure to make or report certain payments; establishing requirements for management and administration of certain Fund; requiring promulgation of certain rules; providing for the MITF Director; requiring employers to secure certain compensation; establishing requirements for contractor liability for certain compensation; creating felony offense; establishing requirements for certification of noncoverage; authorizing waiver of certain exemptions; establishing requirements for certain notice of waiver; establishing methods for employers to secure required compensation; authorizing waiver of certain requirements; establishing consequences for failure to obtain certain compensation; creating misdemeanor offense; requiring posting of certain notices; specifying required contents of certain notices; specifying required contents of certain policy or contract; establishing procedures for cancellation of certain coverage; establishing requirements for coverage of certain liabilities; prohibiting split coverage under certain circumstances; stating effects of certain claims; authorizing subrogation of certain claims; establishing procedures for certain subrogation; providing for reduction of benefits under certain circumstances; requiring certain disclosures; establishing requirements for benefits for temporary total disability; establishing requirements for benefits for temporary partial disability; establishing requirements for benefits for permanent partial disability; establishing requirements for benefits for permanent total disability; establishing requirements for benefits for disfigurement; providing for determination of certain benefits; establishing time limitations for permanent partial disability compensation; creating certain rebuttable presumption; prohibiting benefits to common law spouse; providing exception; establishing requirements for death benefits to beneficiaries; providing for termination of certain benefits; providing for doubling of certain benefits; providing exception; prohibiting certain disability compensation while receiving unemployment benefits; requiring provision of certain medical services to injured employee; providing rights of employee if employer does not provide medical treatment within certain time; providing for diagnostic tests; limiting continuing medical maintenance or pain management; authorizing Commission to direct provision of medical services under certain circumstances; requiring establishment and review of certain Fee Schedule; providing requirements for certain Fee Schedule; requiring adoption of rules for certain formulary; requiring employer to pay certain specified expenses; prohibiting certain employer liability; requiring submission to certain examination or treatment under certain circumstances; requiring suspension of certain proceedings under certain circumstances; barring right to certain compensation under specified circumstances; requiring consideration of certain refusal in determination of certain compensation; authorizing review and amendment of certain charges; providing exception; establishing procedures for selection or change of physician; providing for responsibility of employee for certain treatment or services; requiring certain notice; providing for applicability of certain requirements; requiring inclusion of certain information on specified forms; establishing consequences for absence from certain treatment appointments;



authorizing copies of certain information; providing for cost of copies; providing for computation of average weekly wages; providing for method or system for evaluation of permanent disability; prohibiting consideration of certain condition as compensable injury; providing exception; providing for benefits for certain injury; authorizing extension of certain benefits under specified circumstances; stating applicability of provisions; defining term; requiring certain report of injury from employer to Commission; authorizing refusal to provide certain confidential information; establishing requirements for certain reports; establishing penalty for refusal to submit certain reports; establishing procedures for judgments for certain violations; authorizing application for certification of certain medical plans; requiring fee for certain certification; requiring inclusion of certain information in application for certification; establishing requirements for certification of certain plans; authorizing independent contracting with certain medical plans under specified circumstances; authorizing certain premium reductions; prohibiting certification of certain plans; requiring implementation of certain site visit protocol; establishing requirements of certain protocol; requiring adoption of certain rules; establishing requirements for compensation for occupational disease; defining term; specifying liability of certain employer for compensation for certain disease; specifying applicability of certain provisions; defining terms; establishing requirements for compensation for disability or death from silicosis or asbestosis; establishing limitations on certain compensation; requiring payment for certain training; establishing notice of disability requirements for occupational disease and cumulative trauma; authorizing review of certain award or denial; creating certain presumptions; establishing procedures for filing claim for certain benefits; establishing time limitations for filing of certain claims; establishing procedures for filing claim for additional compensation; stating consequences for failure to file certain claim within specified time period; providing exceptions; directing Commission to promulgate certain rules; requiring establishment and implementation of certain preliminary conference procedure; requiring certain notice; establishing hearing procedure for certain claims; establishing evidentiary requirements for certain hearing; directing filing and mailing of certain judgment; prohibiting disability compensation for certain period; providing exception; establishing requirements for conducting hearing, investigation or inquiry by Commission and certain judges; requiring certain hearing be open to the public; providing for recording of certain proceedings; providing procedures for introduction of certain evidence; establishing certain powers of Commission; imposing fine for certain contempt; creating certain rebuttable presumptions; authorizing certain depositions; authorizing certain witness fees; authorizing employment of attorneys for certain proceedings; permitting appeal of judgment or decision to Commission; establishing procedures for certain appeal; requiring filing fee; establishing procedures for commencement of action in Supreme Court; authorizing certain actions by the Supreme Court in relation to certain judgments or awards under specified circumstances; establishing procedures for appeal to Supreme Court; requiring fee for certain appeal; providing for recording of certain judgment; authorizing Commission review of certain compensation judgment or award; establishing requirements for certain review; requiring assessment of certain costs; requiring Commission approval of certain legal fees; imposing limits on certain attorney fees; defining term; requiring certain notice; requiring Commission to direct fees for certain legal services; establishing certain signature requirements; authorizing sanctions under certain circumstances; specifying form of certain payments; requiring certain payments be made within specified time period; defining term; establishing procedures for controversion of certain claims; authorizing application for certain extension; establishing procedures for joint petition for settlement of claims; directing payment of certain benefits when source of payment is



disputed; providing for certain reimbursement; providing for certain interest; authorizing requirement of certain deposit or bond; providing for certain interest on certain compensation award; requiring certain notice; authorizing assessment of certain penalty; authorizing Commission to take certain actions; prohibiting benefits to incarcerated employees; requiring offer of certain deductible options by insurers; establishing requirements for optional deductibles; authorizing adoption of certain rules; stating applicability of certain provisions; requiring administration of Self-insurance Guaranty Fund by Board; providing for membership of Board; establishing terms for certain membership; prohibiting certain compensation; authorizing certain reimbursement; establishing requirements for conducting Board business; providing immunity from certain liability; stating purpose of certain Fund; stating requirements for expenditure of monies in certain Fund; establishing funding sources for Workers' Compensation Self-Insured Guaranty Fund; defining term; requiring Commission to secure certain releases under specified circumstances; requiring Board to be party in certain proceedings; authorizing Board to exercise certain rights and defenses; requiring Commission to submit certain report; requiring implementation of certain electronic data interchange system; creating the Oklahoma Workers' Compensation Electronic Data Interchange Advisory Committee; directing appointment of membership of Committee; requiring notice of certain meetings; authorizing certain pooling; providing immunity from certain liability; prohibiting certain acts; construing provisions; creating the Oklahoma Employee Injury Benefit Act; providing short title; defining terms; authorizing exemption from certain act; requiring certain notice; requiring payment of certain fee; requiring maintenance of certain information; requiring adoption of certain rules; authorizing designation of certain information collection agent; requiring certain notice; authorizing certain contracts; authorizing prescription of certain rules and forms; requiring certain notice; requiring adoption of certain benefit plan under specified circumstances; establishing requirements for certain benefit plans; requiring benefit plans to provide certain compensation; stating applicability of certain standards; authorizing certain lump sum payments; authorizing certain settlement agreements; authorizing specification of certain conditions and limitations; prohibiting certain fees or costs; requiring provision of certain information; authorizing qualified employers to insure certain risks; requiring employers to secure compensation in specified ways; authorizing certain waivers; prohibiting relief of certain compensation; establishing requirements for certain bond; establishing certain security requirements; authorizing promulgation of certain rules; establishing requirements of certain benefit plans; holding certain insurance agents and brokers harmless for certain actions; establishing certain funds; stating purpose of certain funds; directing expenditures of certain funds; defining term; directing administration and disbursement of certain funds; authorizing funding from certain sources; requiring creation of certain account; authorizing certain Association to exercise certain rights and defenses; directing deposit of certain fines and penalties; requiring annual payment of certain fee; directing deposit of certain premium taxes; providing for collection of certain premiums; requiring collection of certain fees; establishing determination of certain surplus; establishing determination of certain assessment; requiring certain notice; authorizing promulgation of certain rules; providing for exclusivity of certain liability and remedy; prohibiting benefits in certain circumstances; providing for eligibility of certain benefits; requiring filing of certain action within certain time period; establishing responsibility of certain employer; requiring certain notice; requiring plan to contain certain rights; construing provisions; authorizing procedures for certain appeal; providing for invalidity of certain provisions; creating the Workers' Compensation Arbitration Act; providing short title; authorizing validity of certain agreements;

establishing requirements for certain notice; specifying governance of certain act; authorizing waiver of certain requirements; prohibiting certain agreements; prohibiting certain waiver; requiring certain application; providing for validity of certain agreement; authorizing arbitration of certain agreement; authorizing assessment of certain costs; providing for dispute of certain proceeding; authorizing Commission to enter certain findings; authorizing certain judgment; authorizing actions of certain arbitrators; requiring certain notice; authorizing consolidation of arbitration proceedings under certain circumstances; requiring following of certain agreement under specified circumstances; requiring certain disclosure; authorizing removal of arbitrator under certain circumstances; establishing continuing disclosure requirements; providing for exercise of authority for majority of arbitrators; providing for immunity of certain civil liability; establishing requirements for certain testimony; authorizing award of certain fees and costs under certain circumstances; establishing requirements for certain arbitrations; establishing authority of arbitrators; providing for appointment of replacement arbitrator; authorizing legal representation under certain circumstances; providing for payment of legal fees; granting subpoena authority to arbitrator; establishing requirements for deposition and discovery; authorizing issuance of protective order for certain purpose; authorizing enforcement of certain orders; authorizing certain motions; requiring certain record; specifying time period for certain award; authorizing modification of certain award; requiring certain notice; establishing procedures for certain modification; authorizing award of certain benefits; authorizing order for certain remedies; authorizing motion for confirmation of certain award; establishing procedures for vacating certain award; requiring modification under certain circumstances; requiring recording of certain judgment; granting exclusive jurisdiction; authorizing appeal of certain actions; directing certain motions to certain courts; specifying entities required to provide workers' compensation and requirements and procedures therefor; providing for dismissal of claims; requiring Commission to establish a workers' compensation or ombudsman program; stating purpose and duties; requiring certain notice; providing for certain training; requiring development of alternative dispute resolution program; providing requirements for program; making mediation voluntary; providing for appointment of mediators; providing mediation procedures; making mediation proceedings confidential; providing that recommendations are nonbinding absent settlement agreement; providing that certain results and statements are not admissible in subsequent proceedings; providing for certification of mediators; providing duration of certification; providing qualifications and duties for mediators; providing for compensation of mediators; requiring and providing procedure for filing of Employee's First Notice of Claim; providing for Notice of Contested Issues; providing for prehearing conference and administrative hearings; requiring creation of lists of physicians to serve as independent medical examiners; providing for qualification and duration of qualification; providing for removal; providing duties; providing for selection; providing for reimbursement; providing for review process; providing for deviation from opinion of independent medical examiner; providing for objection to report of independent medical examiner; providing for case management; providing for appointment and qualification of case managers; providing duration of qualification; providing for payment of certain charges; providing for prosthetic devices; providing for Joint Petitions; providing procedures; providing that Joint Petition is binding in certain circumstances; providing for official record; providing for objections and comments to settlements; providing for certain written notice; providing for awards for permanent partial and permanent total disability; providing certain estoppel; establishing certain fees; providing for penalties and fines; authorizing certain inquiries regarding prior claims; providing for discharge of employee for failure to answer truthfully;

providing procedure and fee for requests to Commission; providing exceptions; creating the Advisory Council on Workers' Compensation; providing for composition, appointment, terms of office and travel reimbursement; providing for meetings; providing for office supplies and personnel; providing duties of the Advisory Council; providing purposes of the Workers' Compensation Fund; providing for certain assessments; providing duties of the Oklahoma Tax Commission; providing procedures for refunds; requiring certain written declarations; providing for transfer of certain funds, assets, property, records, personnel, financial obligations and encumbrances; requiring the Director of the Office of Management and Enterprise Services to coordinate transfer; providing for computation of time; renaming Workers' Compensation Court as Workers' Compensation Court of Existing Claims; providing for composition of Court; providing for terms of office; providing that positions cease to exist at certain time; authorizing judges to apply for position of administrative law judge; providing for filling of vacancies by administrative law judges; providing for salary; prohibiting judges from engaging in private practice of law during term of office; establishing Court of Existing Claims as court of record; establishing jurisdiction of certain court; providing for principal office of the Court; providing for locations for conducting of court hearings; requiring county commissioners and presiding district judges to make quarters available to the Court; establishing procedures for appeal of certain orders; providing for retention of certain remedies and responsibilities; specifying controlling law for certain benefits and procedures to obtain benefits; providing for preservation of accrued rights and certain penalties; repealing 74 O.S. 2011, Sections 18m-1 and 18m-2, which relate to the Workers' Compensation Fraud Unit; repealing 85 O.S. 2011, Sections 301, 302 303, as amended by Section 1074, Chapter 304, O.S.L. 2012, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, as amended by Section 1 of Enrolled Senate Bill No. 250 of the 1st Session of the 54th Oklahoma Legislature, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, as amended by Section 1075, Chapter 304, O.S.L. 2012, 362, 363, 364, 365, as amended by Section 1076, Chapter 304, O.S.L. 2012, 366, 367, 368, 369, 370, as amended by Section 1077, Chapter 304, O.S.L. 2012, 371, 372, 373, 374, 402, 403, as amended by Section 1082, Chapter 304, O.S.L. 2012, 404, 405, 406, 407, 408, 409, 410, as last amended by Section 1, Chapter 254, O.S.L. 2012, 411, 412, as amended by Section 1083, Chapter 304, O.S.L. 2012 and 413 (85 O.S. Supp. 2012, Sections 303, 361, 365, 370, 403, 410 and 412), which relate to the Workers' Compensation Code; providing for codification; and providing an effective date. (Amended by House, Amended by Senate, Committee Substitute)

**Paraphrase:** SB1062, by Sen. Brian Bingman, R-Sapulpa and Rep. T.W. Shannon, R-Lawton, creates the Administrative Workers' Compensation Act. The bill repeals the existing Workers Compensation statute (Title 85) and creates a new Title 85A establishing an administrative workers' compensation system (For a complete summary of the bill, see 2013 Workers' Compensation Summary in The Buzz). (Amended by House, Amended by Senate, Committee Substitute) - © 2013 eCapitol, LLC. All rights reserved.

**Effective Date:** 01/01/2014 **Emergency:** No

**Principal Authors:** Bingman, Brian (S); Shannon, T.W. (H)

**Status:** Governor Action - Signed **Status Date:** 05/06/2013

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**OKLAHOMA HEALTH CARE AUTHORITY**  
**Summary of Revenues & Expenditures: OHCA**  
**Fiscal Year 2013, For the Ten Months Ended April 30, 2013**

REVENUES	FY13 Budget YTD	FY13 Actual YTD	Variance	% Over/ (Under)
State Appropriations	\$ 768,027,510	\$ 768,027,510	\$ -	0.0%
Federal Funds	1,645,980,552	1,599,368,015	(46,612,537)	(2.8)%
Tobacco Tax Collections	50,085,609	47,677,607	(2,408,002)	(4.8)%
Quality of Care Collections	53,422,525	53,422,525	-	0.0%
Prior Year Carryover	63,075,735	63,075,735	-	0.0%
Federal Deferral - Interest	102,386	102,386	-	0.0%
Contingent Liability	-	(11,000,000)	(11,000,000)	0.0%
Drug Rebates	163,866,219	171,201,954	7,335,735	4.5%
Medical Refunds	40,359,118	43,983,295	3,624,177	9.0%
SHOPP	382,830,479	382,830,479	-	0.0%
Other Revenues	13,875,669	14,050,657	174,987	1.3%
<b>TOTAL REVENUES</b>	<b>\$ 3,181,625,802</b>	<b>\$ 3,132,740,162</b>	<b>\$ (48,885,639)</b>	<b>(1.5)%</b>

EXPENDITURES	FY13 Budget YTD	FY13 Actual YTD	Variance	% (Over)/ Under
<b>ADMINISTRATION - OPERATING</b>	<b>\$ 39,602,361</b>	<b>\$ 34,208,526</b>	<b>\$ 5,393,835</b>	<b>13.6%</b>
<b>ADMINISTRATION - CONTRACTS</b>	<b>\$ 105,663,511</b>	<b>\$ 96,059,752</b>	<b>\$ 9,603,759</b>	<b>9.1%</b>
<b>MEDICAID PROGRAMS</b>				
<u>Managed Care:</u>				
SoonerCare Choice	29,023,033	27,642,058	1,380,975	4.8%
<u>Acute Fee for Service Payments:</u>				
Hospital Services	747,902,520	707,565,087	40,337,433	5.4%
Behavioral Health	16,245,377	15,859,316	386,061	2.4%
Physicians	392,887,461	393,432,619	(545,157)	(0.1)%
Dentists	122,810,951	121,150,322	1,660,630	1.4%
Other Practitioners	61,009,858	62,545,545	(1,535,687)	(2.5)%
Home Health Care	18,630,385	17,654,393	975,992	5.2%
Lab & Radiology	49,731,194	48,536,037	1,195,157	2.4%
Medical Supplies	42,224,478	42,055,729	168,749	0.4%
Ambulatory/Clinics	92,320,753	89,162,209	3,158,545	3.4%
Prescription Drugs	329,284,298	327,881,671	1,402,627	0.4%
OHCA TFC	2,665,160	2,046,251	618,909	0.0%
<u>Other Payments:</u>				
Nursing Facilities	449,195,352	441,441,414	7,753,938	1.7%
ICF-MR Private	47,959,828	48,727,337	(767,508)	(1.6)%
Medicare Buy-In	109,465,850	108,708,870	756,980	0.7%
Transportation	52,004,582	50,701,509	1,303,073	2.5%
MFP-OHCA	1,319,714	1,266,860	52,853	0.0%
EHR-Incentive Payments	32,542,968	32,542,968	-	0.0%
Part D Phase-In Contribution	65,144,204	64,658,849	485,356	0.7%
SHOPP payments	352,455,649	352,455,649	-	0.0%
<b>Total OHCA Medical Programs</b>	<b>3,014,823,617</b>	<b>2,956,034,692</b>	<b>58,788,925</b>	<b>1.9%</b>
OHCA Non-Title XIX Medical Payments	89,382	-	89,382	0.0%
<b>TOTAL OHCA</b>	<b>\$ 3,160,178,871</b>	<b>\$ 3,086,302,970</b>	<b>\$ 73,875,901</b>	<b>2.3%</b>

<b>REVENUES OVER/(UNDER) EXPENDITURES</b>	<b>\$ 21,446,931</b>	<b>\$ 46,437,193</b>	<b>\$ 24,990,261</b>	
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**OKLAHOMA HEALTH CARE AUTHORITY**  
**Total Medicaid Program Expenditures**  
**by Source of State Funds**  
**Fiscal Year 2013, For the Ten Months Ended April 30, 2013**

Category of Service	Total	Health Care Authority	Quality of Care Fund	HEEIA	Medicaid Program Fund	BCC Revolving Fund	Other State Agencies
SoonerCare Choice	\$ 28,019,737	\$ 27,626,005	\$ -	\$ 377,679	\$ -	\$ 16,052	\$ -
Inpatient Acute Care	570,210,943	438,965,951	405,572	8,264,792	43,103,720	1,706,214	77,764,694
Outpatient Acute Care	232,200,407	219,338,706	34,670	8,816,778	-	4,010,253	-
Behavioral Health - Inpatient	19,294,441	10,005,129	-	519,812	-	-	8,769,501
Behavioral Health - Psychiatrist	5,854,187	5,854,187	-	-	-	-	-
Behavioral Health - Outpatient	17,864,205	-	-	-	-	-	17,864,205
Behavioral Health Facility- Rehab	228,176,747	-	-	-	-	81,329	228,176,747
Behavioral Health - Case Management	6,622,317	-	-	-	-	-	6,622,317
Behavioral Health - PRTF	82,052,367	-	-	-	-	-	82,052,367
Residential Behavioral Management	15,932,387	-	-	-	-	-	15,932,387
Targeted Case Management	55,671,312	-	-	-	-	-	55,671,312
Therapeutic Foster Care	2,046,251	2,046,251	-	-	-	-	-
Physicians	438,481,998	335,185,271	48,417	11,617,150	52,735,087	5,463,843	33,432,229
Dentists	121,222,038	114,386,517	-	71,716	6,724,327	39,478	-
Mid Level Practitioners	3,202,950	3,123,738	-	75,084	-	4,128	-
Other Practitioners	59,632,963	58,185,893	371,970	215,284	847,077	12,739	-
Home Health Care	17,654,429	17,638,214	-	35	-	16,179	-
Lab & Radiology	51,360,354	47,965,463	-	2,824,317	-	570,575	-
Medical Supplies	42,706,419	39,853,881	2,152,012	650,690	-	49,836	-
Clinic Services	93,335,518	80,551,197	-	1,283,801	-	218,788	11,281,732
Ambulatory Surgery Centers	8,794,432	8,372,057	-	402,209	-	20,166	-
Personal Care Services	10,241,686	-	-	-	-	-	10,241,686
Nursing Facilities	441,441,414	265,110,260	142,476,414	-	33,845,663	9,077	-
Transportation	50,443,555	45,635,089	2,140,113	-	2,620,430	47,924	-
GME/IME/DME	100,457,716	-	-	-	-	-	100,457,716
ICF/MR Private	48,727,337	39,679,892	8,355,600	-	691,845	-	-
ICF/MR Public	44,619,571	-	-	-	-	-	44,619,571
CMS Payments	173,367,718	171,689,021	1,678,697	-	-	-	-
Prescription Drugs	344,285,333	288,350,119	-	16,403,662	38,106,685	1,424,866	-
Miscellaneous Medical Payments	258,578	254,532	-	624	-	3,422	-
Home and Community Based Waiver	133,407,157	-	-	-	-	-	133,407,157
Homeward Bound Waiver	71,870,200	-	-	-	-	-	71,870,200
Money Follows the Person	2,845,426	1,266,860	-	-	-	-	1,578,566
In-Home Support Waiver	18,817,380	-	-	-	-	-	18,817,380
ADvantage Waiver	147,083,765	-	-	-	-	-	147,083,765
Family Planning/Family Planning Waiver	8,610,673	-	-	-	-	-	8,610,673
Premium Assistance*	42,689,929	-	-	42,689,929	-	-	-
EHR Incentive Payments	32,542,968	32,542,968	-	-	-	-	-
SHOPP Payments**	352,455,649	352,455,649	-	-	-	-	-
<b>Total Medicaid Expenditures</b>	<b>\$ 4,124,502,457</b>	<b>\$ 2,253,627,201</b>	<b>\$ 157,663,466</b>	<b>\$ 94,213,563</b>	<b>\$ 178,674,834</b>	<b>\$ 13,694,870</b>	<b>\$ 1,074,254,203</b>

\* Includes \$42,377,406.65 paid out of Fund 245 and \*\*\$352,455,649.09 paid out of Fund 205

**OKLAHOMA HEALTH CARE AUTHORITY**  
**Summary of Revenues & Expenditures:**  
**Other State Agencies**  
**Fiscal Year 2013, For the Ten Months Ended April 30, 2013**

<b>REVENUE</b>	<b>FY13 Actual YTD</b>
Revenues from Other State Agencies	\$ 439,067,793
Federal Funds	689,672,806
<b>TOTAL REVENUES</b>	<b>\$ 1,128,740,599</b>
<b>EXPENDITURES</b>	<b>Actual YTD</b>
<b>Department of Human Services</b>	
Home and Community Based Waiver	\$ 133,407,157
Money Follows the Person	1,578,566
Homeward Bound Waiver	71,870,200
In-Home Support Waivers	18,817,380
ADvantage Waiver	147,083,765
ICF/MR Public	44,619,571
Personal Care	10,241,686
Residential Behavioral Management	12,818,829
Targeted Case Management	41,390,893
<b>Total Department of Human Services</b>	<b>481,828,047</b>
<b>State Employees Physician Payment</b>	
Physician Payments	33,432,229
<b>Total State Employees Physician Payment</b>	<b>33,432,229</b>
<b>Education Payments</b>	
Graduate Medical Education	55,616,817
Graduate Medical Education - PMTC	2,225,302
Indirect Medical Education	30,449,271
Direct Medical Education	12,166,326
<b>Total Education Payments</b>	<b>100,457,716</b>
<b>Office of Juvenile Affairs</b>	
Targeted Case Management	2,716,520
Residential Behavioral Management	3,113,557
<b>Total Office of Juvenile Affairs</b>	<b>5,830,077</b>
<b>Department of Mental Health</b>	
Case Management	6,622,317
Inpatient Psych FS	8,769,501
Outpatient	17,864,205
PRTF	82,052,367
Rehab	228,176,747
<b>Total Department of Mental Health</b>	<b>343,485,137</b>
<b>State Department of Health</b>	
Children's First	1,786,707
Sooner Start	1,633,057
Early Intervention	4,749,002
EPSDT Clinic	1,869,039
Family Planning	47,503
Family Planning Waiver	8,543,307
Maternity Clinic	38,781
<b>Total Department of Health</b>	<b>18,667,396</b>
<b>County Health Departments</b>	
EPSDT Clinic	632,910
Family Planning Waiver	19,863
<b>Total County Health Departments</b>	<b>652,773</b>
<b>State Department of Education</b>	
Public Schools	87,492
Medicare DRG Limit	4,940,699
Native American Tribal Agreements	69,688,192
Department of Corrections	7,107,944
JD McCarty	1,102,467
<b>Total OSA Medicaid Programs</b>	<b>\$ 1,074,254,203</b>
<b>OSA Non-Medicaid Programs</b>	<b>\$ 61,850,248</b>
<b>Accounts Receivable from OSA</b>	<b>\$ 7,363,851</b>

**OKLAHOMA HEALTH CARE AUTHORITY**  
**SUMMARY OF REVENUES & EXPENDITURES:**  
Fund 205: Supplemental Hospital Offset Payment Program Fund  
Fiscal Year 2013, For the Ten Months Ended April 30, 2013

REVENUES	FY 13 Revenue
SHOPP Assessment Fee	\$ 157,230,926
Federal Draws	225,468,462
Interest	38,740
Penalties	92,351
State Appropriations	(22,700,000)
<b>TOTAL REVENUES</b>	<b>\$ 360,130,479</b>

EXPENDITURES	Quarter	Quarter	Quarter	Quarter	FY 13 Expenditures
	7/1/12 - 9/30/12	10/1/12 - 12/31/12	1/1/13 - 3/31/13	4/1/13 - 6/30/13	
<b>Program Costs:</b>					
Hospital - Inpatient Care	76,857,805	76,538,280	81,236,442	81,236,442	\$ 315,868,970
Hospital -Outpatient Care	3,224,900	3,217,022	2,815,812	2,815,812	\$ 12,073,546
Psychiatric Facilities-Inpatient	5,660,381	5,636,765	6,128,236	6,128,236	\$ 23,553,618
Rehabilitation Facilities-Inpatient	217,066	216,157	263,146	263,146	\$ 959,515
<b>Total OHCA Program Costs</b>	<b>85,960,153</b>	<b>85,608,224</b>	<b>90,443,636</b>	<b>90,443,636</b>	<b>\$ 352,455,649</b>

<b>Total Expenditures</b>	<b>\$ 352,455,649</b>
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<b>CASH BALANCE</b>	<b>\$ 7,674,830</b>
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**OKLAHOMA HEALTH CARE AUTHORITY**  
**SUMMARY OF REVENUES & EXPENDITURES:**  
**Fund 230: Nursing Facility Quality of Care Fund**  
**Fiscal Year 2013, For the Ten Months Ended April 30, 2013**

REVENUES	Total Revenue	State Share
Quality of Care Assessment	\$ 52,736,680	\$ 52,736,680
Interest Earned	30,566	30,566
<b>TOTAL REVENUES</b>	<b>\$ 52,767,246</b>	<b>\$ 52,767,246</b>

EXPENDITURES	FY 13 Total \$ YTD	FY 13 State \$ YTD	Total State \$ Cost
<b>Program Costs</b>			
NF Rate Adjustment	\$ 139,305,753	\$ 50,191,863	
Eyeglasses and Dentures	238,761	86,026	
Personal Allowance Increase	2,931,900	1,056,364	
Coverage for DME and supplies	2,152,012	775,370	
Coverage of QMB's	860,630	310,085	
Part D Phase-In	1,678,697	1,678,697	
ICF/MR Rate Adjustment	4,171,324	1,502,928	
Acute/MR Adjustments	4,184,275	1,507,594	
NET - Soonerride	2,140,113	771,083	
<b>Total Program Costs</b>	<b>\$ 157,663,466</b>	<b>\$ 57,880,010</b>	<b>\$ 57,880,010</b>
<b>Administration</b>			
OHCA Administration Costs	\$ 464,427	\$ 232,214	
DHS - QOC Exp	80,353	80,353	
OSDH-NF Inspectors	-	-	
Mike Fine, CPA	4,500	2,250	
<b>Total Administration Costs</b>	<b>\$ 549,280</b>	<b>\$ 314,817</b>	<b>\$ 314,817</b>
<b>Total Quality of Care Fee Costs</b>	<b>\$ 158,212,747</b>	<b>\$ 58,194,826</b>	
<b>TOTAL STATE SHARE OF COSTS</b>			<b>\$ 58,194,826</b>

Note: Expenditure amounts are for informational purposes only. Actual payments are made from Fund 340. Revenues deposited into the fund are transferred to Fund 340 to support the costs, not to exceed the calculated state share amount.

**OKLAHOMA HEALTH CARE AUTHORITY**  
**SUMMARY OF REVENUES & EXPENDITURES:**  
Fund 245: Health Employee and Economy Improvement Act Revolving Fund  
Fiscal Year 2013, For the Ten Months Ended April 30, 2013

REVENUES	FY 12 Carryover	FY 13 Revenue	Total Revenue
Prior Year Balance	\$ 27,390,790	\$ -	\$ 19,810,585
State Appropriations			\$ (23,500,000)
Tobacco Tax Collections	-	39,212,988	39,212,988
Interest Income	-	574,251	574,251
Federal Draws	684,936	28,802,148	28,802,148
All Kids Act	(7,033,146)	249,375	249,375
<b>TOTAL REVENUES</b>	<b>\$ 21,042,580</b>	<b>\$ 68,838,763</b>	<b>\$ 64,899,972</b>

EXPENDITURES	FY 12 Expenditures	FY 13 Expenditures	Total \$ YTD
<b>Program Costs:</b>			
Employer Sponsored Insurance		\$ 41,829,529	\$ 41,829,529
College Students		312,523	312,523
All Kids Act		547,877	547,877
<b>Individual Plan</b>			
SoonerCare Choice		\$ 363,624	\$ 131,014
Inpatient Hospital		8,190,087	2,950,888
Outpatient Hospital		8,679,825	3,127,341
BH - Inpatient Services-DRG		489,117	176,229
BH -Psychiatrist		-	-
Physicians		11,499,880	4,143,407
Dentists		51,346	18,500
Mid Level Practitioner		73,462	26,468
Other Practitioners		210,954	76,007
Home Health		35	13
Lab and Radiology		2,787,199	1,004,228
Medical Supplies		633,906	228,396
Clinic Services		1,263,933	455,395
Ambulatory Surgery Center		397,926	143,373
Prescription Drugs		16,136,987	5,814,156
Miscellaneous Medical		624	624
Premiums Collected		-	(1,849,263)
<b>Total Individual Plan</b>		<b>\$ 50,778,906</b>	<b>\$ 16,446,777</b>
<b>College Students-Service Costs</b>		<b>\$ 600,473</b>	<b>\$ 216,350</b>
<b>All Kids Act- Service Costs</b>		<b>\$ 144,255</b>	<b>\$ 51,975</b>
<b>Total OHCA Program Costs</b>		<b>\$ 94,213,563</b>	<b>\$ 59,405,031</b>
<b>Administrative Costs</b>			
Salaries	\$ 30,032	\$ 1,339,299	\$ 1,369,331
Operating Costs	48,746	363,053	411,799
Health Dept-Postponing	-	-	-
Contract - HP	1,153,217	1,809,440	2,962,657
<b>Total Administrative Costs</b>	<b>\$ 1,231,995</b>	<b>\$ 3,511,792</b>	<b>\$ 4,743,787</b>
<b>Total Expenditures</b>			<b>\$ 64,148,819</b>
<b>NET CASH BALANCE</b>	<b>\$ 19,810,585</b>		<b>\$ 751,153</b>

\*State Appropriations include \$20,000,000 from SFY 2012 and \$3,500,000 from SFY 2013

**OKLAHOMA HEALTH CARE AUTHORITY  
SUMMARY OF REVENUES & EXPENDITURES:**

**Fund 250: Belle Maxine Hilliard Breast and Cervical Cancer Treatment Revolving Fund  
Fiscal Year 2013, For the Ten Months Ended April 30, 2013**

<b>REVENUES</b>	<b>FY 13 Revenue</b>	<b>State Share</b>
Tobacco Tax Collections	\$ 782,633	\$ 782,633
<b>TOTAL REVENUES</b>	<b>\$ 782,633</b>	<b>\$ 782,633</b>

<b>EXPENDITURES</b>	<b>FY 13 Total \$ YTD</b>	<b>FY 13 State \$ YTD</b>	<b>Total State \$ Cost</b>
<b>Program Costs</b>			
SoonerCare Choice	\$ 16,052	\$ 4,048	
Inpatient Hospital	1,706,214	430,307	
Outpatient Hospital	4,010,253	1,011,386	
Inpatient Services-DRG	-	-	
Psychiatrist	-	-	
TFC-OHCA	-	-	
Nursing Facility	9,077	2,289	
Physicians	5,463,843	1,377,981	
Dentists	39,478	9,956	
Mid-level Practitioner	4,128	1,041	
Other Practitioners	12,739	3,213	
Home Health	16,179	4,080	
Lab & Radiology	570,575	143,899	
Medical Supplies	49,836	12,569	
Clinic Services	218,788	55,178	
Ambulatory Surgery Center	20,166	5,086	
Prescription Drugs	1,424,866	359,351	
Transportation	47,924	12,086	
Miscellaneous Medical	3,422	863	
<b>Total OHCA Program Costs</b>	<b>\$ 13,613,541</b>	<b>\$ 3,433,335</b>	
<b>OSA DMHSAS Rehab</b>	<b>\$ 81,329</b>	<b>\$ 20,511</b>	
<b>Total Medicaid Program Costs</b>	<b>\$ 13,694,870</b>	<b>\$ 3,453,846</b>	
<b>TOTAL STATE SHARE OF COSTS</b>			<b>\$ 3,453,846</b>

Note: Expenditure amounts are for informational purposes only. Actual payments are made from Fund 340. Revenues deposited into the fund are transferred to Fund 340 to support the costs, not to exceed the calculated state share amount.



## FINANCIAL REPORT

For the Ten Months Ended April 30, 2013

Submitted to the CEO & Board

June 27, 2013

- Revenues for OHCA through April, accounting for receivables, were **\$3,132,740,162** or **(1.5%) under** budget.
- Expenditures for OHCA, accounting for encumbrances, were **\$3,086,302,970** or **2.3% under** budget.
- The state dollar budget variance through April is **\$24,990,261 positive**.
- The budget variance is primarily attributable to the following (in millions):

<b>Expenditures:</b>	
Medicaid Program Variance	27.7
Administration	6.7
Contingent Liability	(11.0)
<b>Revenues:</b>	
Taxes and Fees	(2.3)
Drug Rebate	2.6
Overpayments/Settlements	1.3
<b>Total FY 13 Variance</b>	<b>\$ 25.0</b>

### ATTACHMENTS

Summary of Revenue and Expenditures: OHCA	1
Medicaid Program Expenditures by Source of Funds	2
Other State Agencies Medicaid Payments	3
Fund 205: Supplemental Hospital Offset Payment Program Fund	4
Fund 230: Quality of Care Fund Summary	5
Fund 245: Health Employee and Economy Act Revolving Fund	6
Fund 250: Belle Maxine Hilliard Breast and Cervical Cancer Treatment Revolving Fund	7

# SoonerCare Programs

## May 2013 Data for July 2013 Board Meeting

### SOONERCARE ENROLLMENT/EXPENDITURES

Delivery System	Monthly Enrollment Average SFY2012	Enrollment May 2013	Total Expenditures May 2013	Average Dollars Per Member Per Month May 2013
<b>SoonerCare Choice Patient-Centered Medical Home</b>	468,268	537,293	\$169,524,758	
<i>Lower Cost</i> (Children/ Parents; Other)		490,797	\$122,045,736	\$249
<i>Higher Cost</i> (Aged, Blind or Disabled; TEFRA; BCC)		46,496	\$47,479,021	\$1,021
<b>SoonerCare Traditional</b>	241,278	193,955	\$208,648,087	
<i>Lower Cost</i> (Children/ Parents; Other)		86,680	\$49,783,538	\$574
<i>Higher Cost</i> (Aged, Blind or Disabled; TEFRA; BCC & HCBS Waiver)		107,275	\$158,864,549	\$1,481
<b>SoonerPlan</b>	41,378	50,117	\$1,144,774	\$23
<b>Insure Oklahoma</b>	31,502	30,033	\$10,363,328	
<i>Employer-Sponsored Insurance</i>	17,728	16,643	\$4,420,175	\$266
<i>Individual Plan</i>	13,773	13,390	\$5,943,153	\$444
<b>TOTAL</b>	<b>782,425</b>	<b>811,398</b>	<b>\$389,680,947</b>	

The enrollment totals above include all members enrolled during the report month; therefore, some members may not have expenditure data. Custody expenditures are excluded. Non-member specific expenditures of \$83,558,196 are excluded.

Net Enrollee Count Change from Previous Month Total	907
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New Enrollees	18,503
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### Opportunities for Living Life (OLL) (subset of data above)

Qualifying Group	Age Group	Enrollment
Aged/Blind/Disabled	Child	19,664
Aged/Blind/Disabled	Adult	133,137
Other	Child	147
Other	Adult	20,998
PACE	Adult	124
TEFRA	Child	471
Living Choice	Adult	103
<b>OLL Enrollment</b>		<b>174,644</b>

The "Other" category includes DDS/State, PKU, Q1, Q2, Refugee, SLMB, Soon-to-be-Sooner (STBS) and TB members.

Medicare and SoonerCare	Monthly Average SFY2012	Enrolled May 2013
<b>Dual Enrollees</b>	<b>107,504</b>	<b>109,167</b>

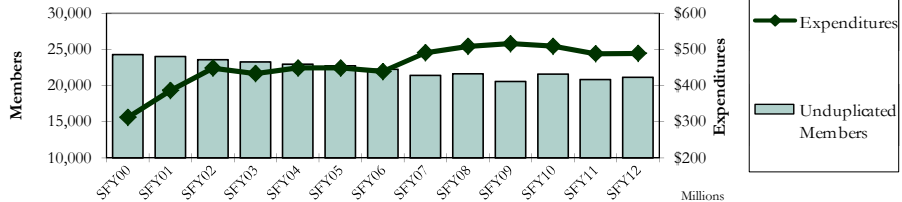
	Monthly Average SFY2012	Enrolled May 2013
<b>Long-Term Care Members</b>	<b>15,770</b>	<b>15,493</b>
Child	87	56
Adult	15,683	15,437

FACILITY PER MEMBER PER MONTH

**SFY2012 Long-Term Care**  
 Statewide LTC Occupancy Rate - 71.7%  
 SoonerCare funded LTC Bed Days 67.2%

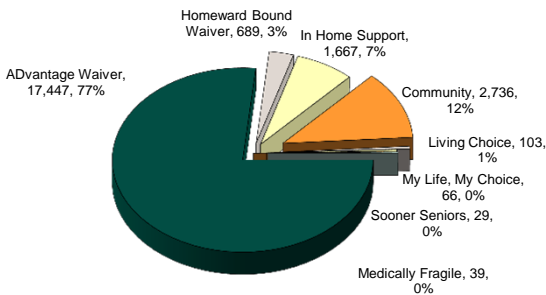
Data as of September 2012

Standard SoonerCare Nursing Facility - Unduplicated Members and Total Expenditure Trends



Data as of Nov. 19, 2012. Figures do not include intermediate care facilities for the intellectually disabled (ICF/ID).

### Waiver Enrollment Breakdown Percent



**Advantage Waiver** - Serves frail elderly individuals age 65 or older and adults age 21 and older with physical disabilities who would otherwise require placement in a nursing facility.

**Community** - serves individuals 3 years of age and older who have intellectual disabilities and certain persons with related conditions who would otherwise require placement in an intermediate care facility for the intellectually disabled (ICF/ID).

**Homeward Bound Waiver** - Designed to serve the needs of individuals with intellectual disabilities or "related conditions" who are also members of the Plaintiff Class in Homeward Bound et al. v. The Hisson Memorial Center, et al, who would otherwise qualify for placement in an ICF/ID.

**In Home Support** - Serves the needs of individuals 3 years of age and older with intellectual disabilities who would otherwise require placement in an ICF/ID.

**Living Choice** - Promotes community living for people of all ages who have disabilities or long-term illnesses.

**Medically Fragile** - This program serves qualifying individuals who meet hospital or skilled nursing facility level of care.

**My Life, My Choice** - This program is for adults with physical disabilities who transitioned to the community under the Living Choice program.

**Sooner Seniors** - This program is for adults 65 and older with long term illnesses who transitioned to community-based services in the Living Choice program.

# SoonerCare Programs

## SOONERCARE CONTRACTED PROVIDER INFORMATION

Provider Counts	Monthly Average SFY2012	Enrolled May 2013*
<b>Total Providers</b>	<b>29,723</b>	<b>37,733</b>
<i>In-State</i>	20,881	29,756
<i>Out-of-State</i>	8,842	7,977

\*Effective July 2012, the methodology for counting providers has changed to count provider network. Previous counts include group practice and its members; the current count will include members only. Provider Network is providers who are contracted to provide health care services by locations, programs, types, and specialties. Providers are being counted multiple times if they have multiple locations, programs, types,

Program	% of Capacity Used
SoonerCare Choice	43%
SoonerCare Choice I/T/U	17%
Insure Oklahoma IP	3%

Select Provider Type Counts	In-State		Totals	
	Monthly Average SFY2012	Enrolled May 2013*	Monthly Average SFY2012	Enrolled May 2013
Physician***	7,497	7,929	13,790	12,212
Pharmacy	874	913	1,153	1,229
Mental Health Provider**	3,395	6,405	3,449	6,476
Dentist	986	1,235	1,124	1,421
Hospital	194	182	934	453
Optometrist	550	513	587	538
Extended Care Facility	375	358	375	358

Above counts are for specific provider types and are not all-inclusive.

Total Primary Care Providers***	4,915	5,095	6,955	6,585
Patient-Centered Medical Home	1,711	2,003	1,739	2,083

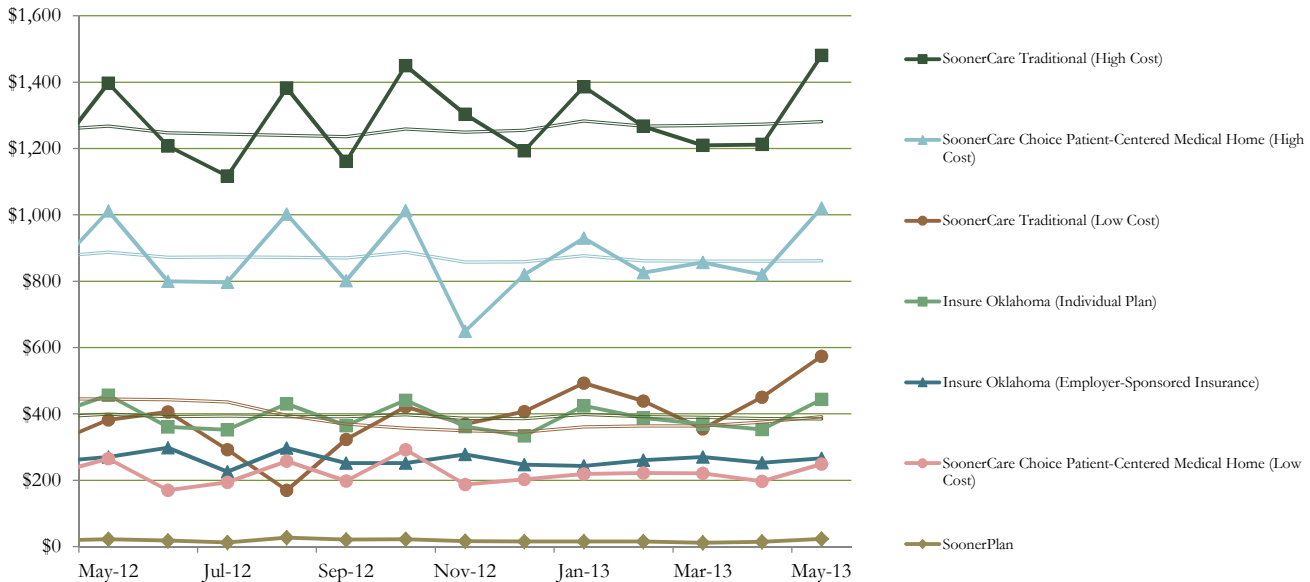
Including Physicians, Physician Assistants and Advance Nurse Practitioners.

\*Items shaded above represent a 10% or more increase (green) or decrease (red) from the previous fiscal year's average.

\*\*Due to federal regulations, OHCA must have an approved agreement on file for all providers providing care to our members. To meet this requirement OHCA is directly contracting with providers that had previously billed through a group or agency. This contributed to the increase in the provider counts for Mental Health Providers.

\*\*\*Decrease in current month's count is due to contract renewal period which is typical during all renewal periods.

## SOONERCARE PER MEMBER PER MONTH (PMPM) TRENDS



In November and December 2012, there was a large increase in Patient-Centered Medical Home enrollment and related decrease in Traditional enrollment due to system changes.

## ELECTRONIC HEALTH RECORDS (EHR) INCENTIVE STATISTICS

The Electronic Health Records Incentive Program is a federal program that offers major financial support to assist certain providers to adopt (acquire and install), implement (train staff, deploy tools, exchange data), upgrade (expand functionality or interoperability) or meaningfully use certified EHR technology.

As Of 7/1/2013	June 2013		Since Inception	
	Number of Payments	Payment Amount	Total Number of Payments	Total Payment Amount
Eligible Professionals	43	\$760,750	1,720	\$39,151,001
Eligible Hospitals	4*	\$4,873,102	90	\$78,573,319
<b>Totals</b>	<b>47</b>	<b>\$5,633,852</b>	<b>1,810</b>	<b>\$117,724,320</b>

\*Current Eligible Hospitals Paid

INTEGRIS BAPTIST MEDICAL C  
 INTEGRIS BASS MEM BAP  
 INTEGRIS CANADIAN VALLEY HOSPITAL  
 INTEGRIS SOUTHWEST MEDICAL





# SoonerCare Health Management Program (HMP)



# History of the Health Management Program

48<sup>th</sup>: Diabetes deaths\*

48<sup>th</sup>: Stroke deaths\*

49<sup>th</sup>: Heart disease deaths\*



2006 Legislative mandate (HB 2842)

- Focus on chronic disease
- Reduce cost
- Increase quality

\*Number of deaths due to disease per 100,000

United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Compressed Mortality File (CMF) compiled from 2005, Series 20 No. 2K, 2008. Accessed 3/24/2008 via the CDC WONDER On-line Database.





# SoonerCare HMP Principles



Focus on the person – not the disease



Teach the member how to self-manage – rather than do it for them



Providers must be included



Redesigning practice to support team based care



# SoonerCare HMP Design

## Arm 1

- Focuses on the high risk patients



Nurse Care  
Management

## Arm 2

- Focuses on assisting providers (physicians)



Practice Facilitation



# HMP Evaluation

Performed by external, independent evaluator:  
Pacific Health Policy Group (PHPG)



## 4 Outcomes Examined



Quality of Care



Satisfaction



Utilization and Expenditure Trends



Cost Effectiveness



# NCM Outcomes

## Quality of Care

- Decreased gaps in care
- Decreased risk scores

## Member Satisfaction

- 88% of graduates “very satisfied”

## Utilization Trends

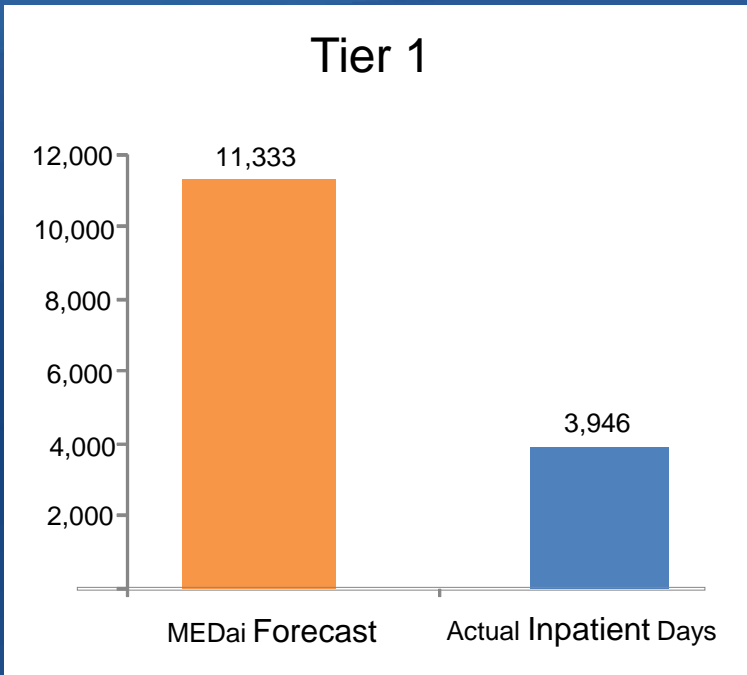
- Decreased ED utilization
- Decreased inpatient admissions

## Cost-effectiveness

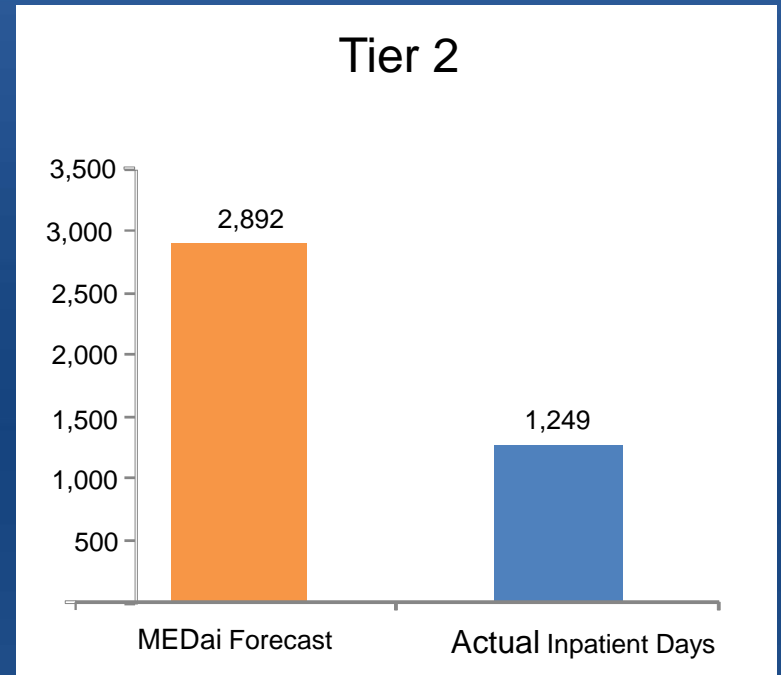
- \$32.81 PMPM deficit during engagement
- \$410 PMPM savings post-engagement



# Inpatient Utilization Trends



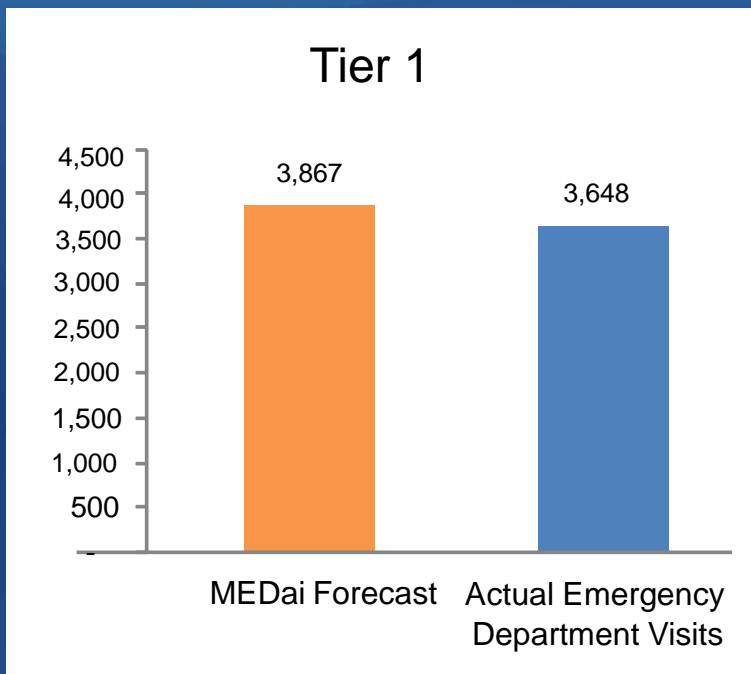
**65% Reduction**



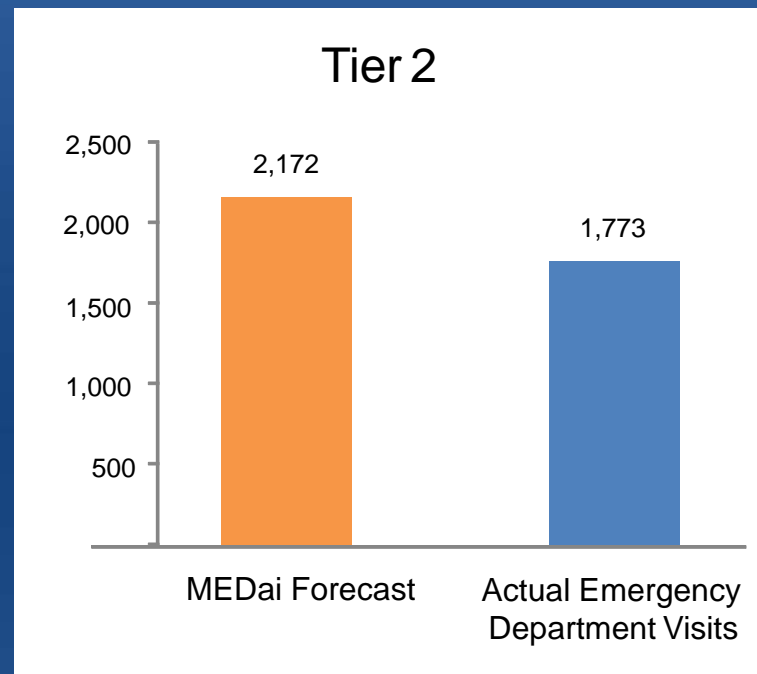
**57% Reduction**



# Emergency Department Utilization Trends



6% Reduction



18% Reduction





# Practice Facilitation Outcomes

## 88 Practices Served

- Serving approximately 115,000+ SoonerCare members

## Quality of Care

- Improvement on 51% of disease-specific clinical measures
- Most improvement on asthma and diabetes

## Provider Satisfaction

- 87% credit the program with improving care to patients with chronic conditions
- 91% would recommend the program to a colleague

## Cost-Effectiveness

- \$74.91 PMPM savings





# Aggregate Cost Avoidance – Return On Investment

Component	Administrative Costs	Medical Savings	Net Savings	Return on Investment
NCM (All)	(\$16,811,912)	\$109,924,559	\$93,112,647	554%
NCM Tier 1	(\$8,190,023)	\$34,541,997	\$26,351,974	322%
NCM Tier 2	(\$8,621,890)	\$75,382,563	\$66,760,673	774%
Practice Facilitation	(\$9,751,949)	\$55,863,530	\$46,111,582	473%
<b>TOTAL Program</b>	<b>(\$26,563,861)</b>	<b>\$165,788,090</b>	<b>\$139,224,229</b>	<b>524%</b>



# Moving Forward

## Health Coaches

Improve process and provider involvement by moving Nurse Care Management into the practice site. Work directly with the member to incorporate teaching and behavior modification principles at the time of the provider visit.

## Resource Center

Provide additional support and services to the Health Coaches to allow Health Coach to focus on behavior change.

## Practice Facilitation

Continue to work with practices to focus on process improvement and improving chronic disease care.



# Contact Information

HMP Manager  
Della Gregg  
[Della.gregg@okhca.org](mailto:Della.gregg@okhca.org)  
405-522-7435



## Disaster Response Update July 18, 2013

The Oklahoma Health Care Authority family, including our vendors and partners, united to dedicate time, resources, energy and support to those affected by the recent tornadoes in our state. Assistance has been ongoing for members, providers, employees and others in the affected communities. Though it does not do justice to all of the acts of kindness and support provided, this brief overview illustrates the rapid mobilization that occurred at a time of great need. The OHCA family is incredibly grateful to all of those who have volunteered to make a difference.

### Member and Provider Assistance

- OHCA Public Information distributed a press release with important contact information for affected members.
- OHCA Pharmacy Unit and OU College of Pharmacy approved early refill requests for affected members and communicated with pharmacies to ensure member needs were met.
- OHCA Population Care Management identified 185 members in the affected zip codes, and reached out to each individual member to offer assistance.
- 110 members of the Health Management Program were contacted and provided assistance—primarily related to lost medications.
- OHCA Member Services established a process for identifying affected members on inbound calls and providing individual assistance for each member's unique circumstances.
- OHCA Provider Services reached out to affected practices and worked with them to help guide members to other practices if necessary.
- OHCA Medical Authorization Unit established a protocol for approving requests for the replacement of lost or damaged durable medical equipment and extending private duty nursing services as necessary.
- OHCA Durable Medical Equipment Unit collaborated with OKDMERP and other states offering assistance to assist with the replacement of lost or damaged durable medical equipment.
- Staff from across the agency, including Behavioral Health, Tribal Relations, Community Relations, Population Care Management and Provider Services, have provided on-site assistance at Red Cross Multi-Agency Resource Centers for the past four weeks. They have connected members and nonmembers to much needed resources and enrolled qualified families in SoonerCare.

## Employee Assistance

- OHCA teams of volunteers have come together to assist employees affected by the tornadoes. Volunteers came from across agency divisions and units to recover items from damaged homes, clean up damaged property, prepare and deliver meals, gather and distribute donated items (e.g., food, clothing, toys), raise funds and provide a support system.



## **VIII. INFORMATIONAL PRESENTATION**

ERIN JACKSON, GRANT PROJECT COORDINATOR ([ERIN.JACKSON@OKHCA.ORG](mailto:ERIN.JACKSON@OKHCA.ORG))

### **1. The Living Choice Project – OHCA’s Money Follows the Person Demonstration**

## **IX. POLICY INFORMATIONAL PRESENTATION**

### **PROPOSED RULE CHANGES**

JOSEPH FAIRBANKS, POLICY DEVELOPMENT COORDINATOR ([JOSEPH.FAIRBANKS@OKHCA.ORG](mailto:JOSEPH.FAIRBANKS@OKHCA.ORG))

#### **1. Early Implementation of MAGI**

OHCA is researching the possibility of implementing MAGI household composition and income-counting rules effective October 1, 2013, instead of January 1, 2014. The agency is also researching an option to delay renewals and redeterminations of eligibility based on changes in circumstances that would fall during the period January – March, 2014. Early implementation of MAGI and redetermination delays would allow the state to avoid having to use two sets of eligibility rules for MAGI groups (children, pregnant women, parents and caretaker relatives, Soon-To-Be-Sooners, and family planning) from October 2013 to March 2014.

#### **2. Hospital Presumptive Eligibility**

OHCA is researching how to implement the ACA mandate that states allow contracted hospitals to perform presumptive eligibility determinations if they choose to, regardless of whether the State Plan otherwise establishes presumptive eligibility for any particular eligibility group. The state must determine which eligibility groups hospitals will determine presumptive eligibility for and must develop standards that hospitals will need to meet in order to retain the ability to perform presumptive eligibility determinations.

### **STATE PLAN AMENDMENTS**

JOSEPH FAIRBANKS, POLICY DEVELOPMENT COORDINATOR ([JOSEPH.FAIRBANKS@OKHCA.ORG](mailto:JOSEPH.FAIRBANKS@OKHCA.ORG))

#### **3. Proposed Health Homes State Plan Amendment (*Tentatively Effective 07-01-14*)**

The agency, in partnership with the ODMHSAS, proposes to create health homes for adults with a Serious Mental illness (SMI), and children who are Severely Emotionally Disturbed (SED). The purpose of a Health Home is to provide centralized, whole-person level of care that encompasses the individual’s medical, behavioral and any social supports they need, coordinated under a unified care plan and managed by a single lead entity, Community Mental Health Centers (CMHC). SoonerCare providers who currently serve this population can be part of the Health Home through a Memorandum of Agreement with a CMHC. Health Homes are an

optional Medicaid State Plan benefit where states have the opportunity to receive enhanced federal match to develop and implement an integrated delivery model for eight quarters upon approval from CMS.

#### **4. Residential Behavioral Management Services (RMBS) in Therapeutic Foster Care (TFC) Settings Reimbursement Correction (*Effective 04-01-13*)**

The State intends to revise language in the State Plan Amendment to permit providers delivering RMBS in TFC settings to bill crisis intervention. This aligns this covered service with other fee-for-service duties already being billed by these provider types. The change will be retroactive to April 1, 2013.

#### **5. MAGI and ACA Eligibility Group and Determination Procedures (*Effective 01-01-14*)**

The Centers for Medicare and Medicaid Services (CMS) recently released templates for the State Plan Amendments that consolidate eligibility groups and establish MAGI eligibility determination procedures for 2014. OHCA is analyzing the templates and preparing the amendments to reflect current policies and those recently adopted in the ACA eligibility rules that take effect January 1, 2014.

#### **6. Hospital Presumptive Eligibility (*Effective 01-01-14*)**

This State Plan Amendment is one of the templates included in the MAGI and ACA State Plan pages. It addresses the choices made by the state regarding how to implement the ACA mandate to allow contracted hospitals to perform presumptive eligibility determinations if they choose to, regardless of whether the State Plan otherwise establishes presumptive eligibility for any particular eligibility group. The state must determine which eligibility groups hospitals will determine presumptive eligibility for and must develop standards that hospitals will need to meet in order to retain the ability to perform presumptive eligibility determinations.

#### **7. Income Standards for MAGI Eligibility Groups (*Effective 10-01-13*)**

The MAGI and ACA State Plan pages referred to above will include conversion of Oklahoma's current income standards for MAGI eligibility groups to MAGI conversion income standards. In addition to converting those income limits to MAGI-equivalent amounts, OHCA proposes changing the following income standards:

- The income limit for pregnant women will be lowered to the MAGI equivalent of 133% FPL.
- The income limit for SoonerPlan family planning services will be lowered to the MAGI equivalent of 133% FPL.



## 8. Recovery Audit Contractor

### ➤ **Proposal**

The OHCA brings to you for your review and consultation a proposal for the agency to consider applying for a waiver of the below requirement for RAC contractors to hire a full time employee to serve as the medical director in accordance with federal law.

Section 455.508(b) states: The entity must hire a minimum of 1.0 FTE Contractor Medical Director who is a Doctor of Medicine or Doctor of Osteopathy in good standing with the relevant State licensing authorities and has relevant work and educational experience. A State may seek to be excepted, in accordance with § 455.516. Section 455.516 states: A State may seek to be excepted from some or all Medicaid RAC contracting requirements by submitting to CMS a written justification for the request for CMS review and approval through the State Plan amendment process.

### ➤ **Rationale**

The selected Contractor currently has a full-time Chief Medical Officer (CMO) at its corporate level who is a physician licensed in another state but not in Oklahoma. The CMO oversees the medical record review process; assists nurses, therapists, and certified coders upon request; manages quality assurance procedures; and maintains relationships with provider associations. Additionally, the Contractor will also contract with an Oklahoma licensed Medical Director who is available as needed for the RAC contract, but will not be a FTE employee of the company. The Contractor believes that the in-depth involvement of the RAC's CMO, combined with a state based medical director who is utilized as needed as well as leveraging the RACs physician panel will accomplish the high level of quality, accuracy and objectivity required for the RAC program.

### **PROPOSED WAIVER CHANGES**

**LATHONYA SHIVERS, WAIVER DEVELOPMENT COORDINATOR** ([LATHONYA.SHIVERS@OKHCA.ORG](mailto:LATHONYA.SHIVERS@OKHCA.ORG))

## 9. MAGI and CHIP Enrollment and Renewal in 2014

### ➤ **Waiver Request**

The State has submitted a waiver amendment request to CMS. In State Health Officials Letter #13-003 on the subject "Facilitating Medicaid and CHIP Enrollment and Renewal in 2014," CMS outlined five strategies for assisting states to help facilitate streamlined enrollment procedures for 2014. The strategies that will be most beneficial to Oklahoma will require two time-limited waiver amendments.

### ➤ **Background**

Federal law established a new Modified Adjusted Gross Income (MAGI) standard that will be used for certain populations starting October 1, 2013, to determine income

eligibility for Medicaid, the Children's Health Insurance Program, and premium tax credits. MAGI is a simplified system that is different from current income evaluations and could result in loss of eligibility for some individuals. Federal law requires that when States transition to MAGI, the eligibility systems fairly protect beneficiaries who might otherwise lose coverage.

➤ **Waiver Amendments**

OHCA proposes to take two steps:

- (1) to begin using MAGI methodology on October 1 to have only one set of requirements, and
- (2) to extend January through March 2014 renewals to protect eligibility of those individuals who could be disqualified by MAGI methods.

The information systems changes and related expenses will be greatly reduced if we can operate under one system of rules effective October 1, 2013, and going forward. In addition, certain agency policies will need to be revised to match the new timeframe.

OHCA is seeking waiver approval to implement the two time-limited steps above.