

1 STATE OF OKLAHOMA

2 1st Session of the 57th Legislature (2019)

3 SENATE BILL 505

By: Newhouse

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5  
6 AS INTRODUCED

7 An Act relating to health insurance; amending 36 O.S.  
8 2011, Section 6060.4, as amended by Section 7,  
9 Chapter 73, O.S.L. 2016 (36 O.S. Supp. 2018, Section  
10 6060.4), which relates to child immunization  
11 coverage; modifying type of plan that health benefit  
12 plan includes; and providing an effective date.

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

14 SECTION 1. AMENDATORY 36 O.S. 2011, Section 6060.4, as  
15 amended by Section 7, Chapter 73, O.S.L. 2016 (36 O.S. Supp. 2018,  
16 Section 6060.4), is amended to read as follows:

17 Section 6060.4. A. A health benefit plan delivered, issued for  
18 delivery or renewed in this state on or after January 1, 1998, that  
19 provides benefits for the dependents of an insured individual shall  
20 provide coverage for each child of the insured, from birth through  
21 the date the child is eighteen (18) years of age for:

22 1. Immunization against:

23 a. diphtheria,

24 b. hepatitis B,

25 c. measles,

- d. mumps,
- e. pertussis,
- f. polio,
- g. rubella,
- h. tetanus,
- i. varicella,
- j. haemophilus influenzae type B, and
- k. hepatitis A; and

2. Any other immunization subsequently required for children by the State Board of Health.

B. Benefits required pursuant to subsection A of this section shall not be subject to a deductible, co-payment, or coinsurance requirement.

C. 1. For purposes of this section, "health benefit plan" means a plan that:

- a. provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, and
- b. is offered by any insurance company, group hospital service corporation, the State and Education Employees Group Insurance Board, or health maintenance organization that delivers or issues for delivery an individual, group, blanket, or franchise insurance policy or insurance agreement, a group hospital

1 service contract, or an evidence of coverage, or, to  
2 the extent permitted by the Employee Retirement Income  
3 Security Act of 1974, 29 U.S.C., Section 1001 et seq.,  
4 by a multiple employer welfare arrangement as defined  
5 in Section 3 of the Employee Retirement Income  
6 Security Act of 1974, or any other analogous benefit  
7 arrangement, whether the payment is fixed or by  
8 indemnity.

9 2. The term "health benefit plan" shall not include:

10 a. a plan that provides coverage:

- 11 (1) only for a specified disease or diseases or under  
12 an individual limited benefit policy,  
13 (2) only for accidental death or dismemberment,  
14 (3) only for dental or vision care,  
15 (4) a hospital confinement indemnity policy,  
16 (5) disability income insurance or a combination of  
17 accident-only and disability income insurance, or  
18 (6) as a supplement to liability insurance,

19 b. a Medicare supplemental policy as defined by Section  
20 1882(g)(1) of the Social Security Act (42 U.S.C.,  
21 Section 1395ss),

22 c. workers' compensation insurance coverage,

23 d. medical payment insurance issued as part of a motor  
24 vehicle insurance policy,  
25

- 1 e. a long-term care policy, including a nursing home  
2 fixed indemnity policy, unless a determination is made  
3 that the policy provides benefit coverage so  
4 comprehensive that the policy meets the definition of  
5 a health benefit plan, or  
6 f. short-term health insurance issued on a ~~nonrenewable~~  
7 renewable basis up to thirty-six (36) months with a  
8 duration of ~~six (6) months~~ three hundred sixty-four  
9 (364) days or less.

10 SECTION 2. This act shall become effective November 1, 2019.

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12 57-1-1598 CB 1/16/2019 6:24:58 PM  
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