

1 **HOUSE OF REPRESENTATIVES - FLOOR VERSION**

2 STATE OF OKLAHOMA

3 1st Session of the 60th Legislature (2025)

4 ENGROSSED SENATE
5 BILL NO. 1067

6 By: Rosino of the Senate

7 and

8 Stinson of the House

9 [**health insurance - Out-of-Network Ambulance Service**

10 **Provider Act - local governmental entities - rates**

11 **- Insurance Department - database - effective date**

12]

13

14

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

16 SECTION 1. AMENDATORY Section 3, Chapter 356, O.S.L.

17 2024 (36 O.S. Supp. 2024, Section 6050.3), is amended to read as
18 follows:

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

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

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

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

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

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

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

21 2. 3. The ambulance service provider's billed charges.

22 E. D. Payment made in compliance with this section shall be
23 considered payment in full for the covered ambulance services
24 provided, except for any copayment, coinsurance, deductible, and

1 other cost-sharing feature amounts required to be paid by the
2 enrollee. An ambulance service provider is prohibited from billing
3 the enrollee for any additional amounts for the paid covered
4 ambulance services in excess of what the health care insurer pays.

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

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

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

14
15 COMMITTEE REPORT BY: COMMITTEE ON RULES, dated 04/15/2025 - DO PASS,
As Amended.
16
17
18
19
20
21
22
23
24