

HOUSE AMENDMENTS TO HOUSE BILL 2221

By COMMITTEE ON CONSUMER PROTECTION

April 4

- 1 On page 1 of the printed bill, line 8, delete “(1)(a)” and insert “(1)”.
- 2 In line 11, after “the” delete the rest of the line and insert “plan member access to providers”.
- 3 In line 12, delete “vider facilities”.
- 4 In line 13, delete “service”.
- 5 Delete lines 14 through 17 and insert:
- 6 “(2) ‘Discount medical plan organization’ means a person that contracts on behalf of plan mem-
- 7 bers with a provider, a provider network or another discount medical plan organization for access
- 8 to medical and ancillary services at a discounted rate and determines what plan members will pay
- 9 as a fee, service or subscription charge, dues or other consideration for a discount medical plan.”.
- 10 In line 21, after “means” insert “, except when administered by or under contract with the State
- 11 of Oregon,”.
- 12 In line 24, after the first comma insert “audiology services,”.
- 13 On page 2, line 2, delete “a person that” and insert “an individual who”.
- 14 In line 4, delete “Service”.
- 15 In line 6, after “charges” insert a period and delete the rest of the line and delete lines 7 and
- 16 8.
- 17 In line 9, delete “Service”.
- 18 Delete lines 16 through 27 and insert:
- 19 “(7) ‘Provider network’ means a person that negotiates directly or indirectly with a discount
- 20 medical plan organization on behalf of more than one provider that provides medical or ancillary
- 21 services to plan members.
- 22 **“SECTION 3. (1) A person may not conduct business as or purport to conduct business**
- 23 **as a discount medical plan organization unless the person first obtains a license to operate**
- 24 **as a discount medical plan organization from the Director of the Department of Consumer**
- 25 **and Business Services in accordance with section 5 of this 2007 Act.**
- 26 **“(2) The license requirement set forth in subsection (1) of this section does not apply to**
- 27 **an insurer that offers a discount medical plan.”.**
- 28 In line 29, delete “service” in both places.
- 29 In line 31, delete “service”.
- 30 In line 34, delete “service”.
- 31 In line 35, delete “subject to” and insert “included in”.
- 32 In line 36, delete “service” in both places.
- 33 In line 39, delete “service”.
- 34 In line 40, delete “service”.
- 35 In line 41, delete “service”.

1 Delete lines 42 through 45.

2 On page 3, delete lines 1 through 5 and insert:

3 “(3) The contract or other agreement between a discount medical plan organization and a pro-

4 vider network, or between an entity and a provider network when the entity contracts with or en-

5 ters into an agreement with a provider network on the organization’s behalf, shall require the

6 provider network to have written agreements with providers that, in addition to meeting the re-

7 quirements of subsection (2) of this section:

8 “(a) Authorize the provider network to contract with or enter into an agreement with the dis-

9 count medical plan organization or the entity on behalf of the provider; and”.

10 In line 6, delete “service” in both places.

11 In line 7, delete “service”.

12 Delete lines 12 and 13.

13 In line 14, delete “(2)” and insert “**SECTION 5.** (1)”.

14 Delete lines 30 and 31.

15 In line 32, delete “(h)” and insert “(g)” and delete “service” in all places.

16 In line 33, after “network” insert “that provide services in this state”.

17 In line 34, delete the period and insert “or the Internet address of a website that lists the pro-

18 viders and services offered.

19 “(h) A list of the persons that the applicant has authorized or intends to authorize to market a

20 discount medical plan in this state under a name that is different from the applicant’s name.”.

21 Delete lines 39 through 41 and insert:

22 “(j) A statement that discloses:”.

23 In line 42, delete the semicolon and insert “involving the applicant, a member of the board of

24 directors or an officer of the applicant and any person owning or having the right to acquire 10

25 percent or more of the voting securities of the applicant; and”.

26 In line 44, delete “; and” and insert a period.

27 Delete line 45.

28 On page 4, delete line 1.

29 Delete lines 7 and 8 and insert:

30 “(m) Other information the director may require that enables the director, after reviewing all

31 of the information submitted under this subsection, to determine whether the applicant:

32 “(A) Is financially responsible;

33 “(B) Has adequate experience and expertise to operate a discount medical plan organization; and

34 “(C) Is of good character.”.

35 In line 9, delete “(3)” and insert “(2)”.

36 In line 11, delete “(4)” and insert “(3)”.

37 In line 13, after “applicant” insert a period and delete the rest of the line and delete lines 14

38 and 15.

39 In line 16, delete “(4)” and insert “(3)”.

40 In line 18, after the semicolon insert “or”.

41 In line 22, after “profession” insert a period and delete the rest of the line and delete lines 23

42 and 24.

43 In line 25, delete “(5)” and insert “(4)”.

44 In line 33, delete “information the licensee” and insert “name, address or contact information

45 of the discount medical plan organization”.

1 In line 34, delete “an” and insert “the”.

2 In line 36, delete “the length” and insert “one year, or for a longer period if”.

3 In line 37, delete “of time” and after “Services” insert “so”.

4 On page 5, line 1, before the period insert “, except that the discount medical plan organization

5 may retain the amount of any one-time processing fee that is less than an amount established by the

6 Director of the Department of Consumer and Business Services by rule”.

7 In line 7, delete “, each of which enables” and insert “. The toll-free telephone line must

8 enable”.

9 In line 9, delete “service” in both places.

10 Delete lines 12 through 15 and insert:

11 “(4) Disclosures, in writing in a font not less than 12 points in size and on the first content page

12 of advertisements, marketing materials or brochures made available to the public and relating to a

13 discount medical plan, that:”.

14 In line 16, after the semicolon insert “and”.

15 Delete line 17.

16 In line 18, delete “(c)” and insert “(b)”.

17 In line 19, delete “service”.

18 Delete lines 20 through 26 and insert:

19 “**SECTION 9.** (1) A person may not use or disseminate in marketing, advertising, promotional,

20 sales or plan documents or other informational materials for discount medical plans or in commu-

21 nications with plan members or prospective plan members:

22 “(a) Misleading, deceptive or false statements; or

23 “(b) The terms ‘health plan,’ ‘coverage,’ ‘copay,’ ‘copayments,’ ‘deductible,’ ‘preexisting

24 condition,’ ‘guaranteed issue,’ ‘premium,’ ‘preferred provider organization’ or other terms in a man-

25 ner that could reasonably mislead an individual into believing that the discount medical plan is in-

26 surance.”.

27 After line 33, insert:

28 “(3) A person may not represent in any marketing, advertising, promotional, sales or plan doc-

29 uments or other informational materials for a discount medical plan or in communications with plan

30 members or prospective plan members that the State of Oregon reviews or approves the discount

31 medical plan.

32 “(4) Before a person uses an advertisement, a brochure, a discount card or promotional or

33 marketing material for marketing, promoting, selling or distributing a discount medical plan, the

34 discount medical plan organization shall approve the material in writing.

35 “(5) At the request of the Director of the Department of Consumer and Business Services, a

36 discount medical plan organization shall submit to the director an advertisement, a brochure, a

37 discount card or promotional or marketing material used for marketing, promoting, selling or dis-

38 tributing a discount medical plan.”.

39 On page 6, line 5, after the semicolon insert “or”.

40 Delete lines 6 and 7.

41 In line 8, delete “(d)” and insert “(c)”.

42 On page 7, line 21, delete “January” and insert “July”.

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