

HOUSE AMENDMENTS TO HOUSE BILL 2517

By COMMITTEE ON HEALTH CARE

April 17

1 On page 1 of the printed bill, after line 3, insert:

2 **“SECTION 1. Section 2 of this 2007 Act is added to and made a part of the Insurance**
3 **Code.”.**

4 In line 4, delete the first “1” and insert “2”.

5 Delete line 6 and insert “vices that are medically necessary to restore or maintain the ability
6 to complete activities of daily living or essential job-related activities and that are not solely for
7 comfort or convenience. The coverage required by this subsection includes all services and supplies
8 medically necessary for the effective use of a prosthetic or orthotic device, including formulating its
9 design, fabrication, material and component selection, measurements, fittings, static and dynamic
10 alignments, and instructing the patient in the use of the device.”.

11 Delete lines 8 through 32 and delete page 2 and insert:

12 “(a) ‘Orthotic device’ means a rigid or semirigid device supporting a weak or deformed leg, foot,
13 arm, hand, back or neck, or restricting or eliminating motion in a diseased or injured leg, foot, arm,
14 hand, back or neck.

15 “(b) ‘Prosthetic device’ means an artificial limb device or appliance designed to replace in whole
16 or in part an arm or a leg.

17 “(3) The Director of the Department of Consumer and Business Services shall adopt and annu-
18 ally update rules listing the prosthetic and orthotic devices covered under this section. The list shall
19 be no more restrictive than the list of prosthetic and orthotic devices and supplies in the Medicare
20 fee schedule for Durable Medical Equipment, Prosthetics, Orthotics and Supplies, but only to the
21 extent consistent with this section.

22 “(4) The coverage required by subsection (1) of this section may be made subject to, and no more
23 restrictive than, the provisions of a health insurance policy that apply to other benefits under the
24 policy.

25 “(5) The coverage required by subsection (1) of this section shall include any repair or replace-
26 ment of a prosthetic or orthotic device that is determined medically necessary to restore or maintain
27 the ability to complete activities of daily living or essential job-related activities and that is not
28 solely for comfort or convenience.

29 “(6) If coverage under subsection (1) of this section is provided through a managed care plan,
30 the insured shall have access to medically necessary clinical care and to prosthetic and orthotic
31 devices and technology from not less than two distinct Oregon prosthetic and orthotic providers in
32 the managed care plan’s provider network.”.

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