

REVENUE: No revenue impact

FISCAL: No fiscal impact

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| Action: | Do Pass as Amended, Be Printed Engrossed, and Be Placed on the Consent Calendar |
| Vote: | 10 - 0 - 0 |
| Yeas: | Bruun, Cannon, Dembrow, Garrett, Harker, Kennemer, Kotek, Maurer, Thompson, Greenlick |
| Nays: | 0 |
| Exc.: | 0 |
| Prepared By: | Sandy Thiele-Cirka, Administrator |
| Meeting Dates: | 2/2, 2/13 |

WHAT THE MEASURE DOES: Modifies the current Oregon Medical Insurance Pool (OMIP) definition of medical insurance to conform with the current health insurance definition used by the Oregon Insurance Division, Department of Consumer and Business Services. Establishes a majority of voting members of the OMIP board as a quorum (five of nine members). Specifies types of insured individuals excluded from the assessment calculation. Clarifies limits on payment of enrollee premiums by public entities or health care providers. Modifies the OMIP eligibility requirement to comply with federal requirements (180 consecutive days to qualify as Oregon resident). Exempts State Children's Health Insurance Program (SCHIP) from assessment. Deletes medical payment as a specific type of automobile insurance.

ISSUES DISCUSSED:

- Aspects of the measure: 1) definition of medical insurance; 2) allows majority of board members to take action; 3) clarifies limits on payment of enrollee premiums by public entities or health care providers; and, 4) modifies portability eligibility to conform with federal requirements
- Proposed amendments

EFFECT OF COMMITTEE AMENDMENT: Exempts SCHIP from assessment. Deletes medical payment as a specific type of automobile insurance.

BACKGROUND: The Oregon Medical Insurance Pool (OMIP) is the state's high-risk health insurance pool. OMIP provides coverage to adults and children who are unable to obtain commercial medical insurance because of pre-existing health conditions. Additionally, OMIP provides coverage to individuals who are eligible for portability coverage, but have no access to a commercial Oregon portability plan. OMIP enrollees' premium payments cover about 55 percent of the program's medical and drug claim costs. Commercial insurance companies conducting business in Oregon pay the remaining 45 percent through an assessment. The board of directors, representing consumers, insurers, and providers, guide the program's policy.

HB 2194 A makes administrative changes to the OMIP statutes.