House Bill 2464

Sponsored by Representative MAURER; Representatives FREEMAN, GILLIAM, HANNA, KRIEGER, RICHARDSON, SPRENGER, WINGARD

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced.

Requires Public Employees' Benefit Board to provide eligible employees and their families with option of using health savings accounts.

A BILL FOR AN ACT

- 2 Relating to health savings accounts; amending ORS 243.135.
 - Be It Enacted by the People of the State of Oregon:
- 4 **SECTION 1.** ORS 243.135 is amended to read:
- 243.135. (1) Notwithstanding any other benefit plan contracted for and offered by the Public Employees' Benefit Board, the board shall contract for a health benefit plan or plans best designed to meet the needs and provide for the welfare of eligible employees and the state. In considering whether to enter into a contract for a plan, the board shall place emphasis on:
- 9 (a) Employee choice among high quality plans;
- 10 (b) A competitive marketplace;

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- 11 (c) Plan performance and information;
- 12 (d) Employer flexibility in plan design and contracting;
- 13 (e) Quality customer service;
- 14 (f) Creativity and innovation;
 - (g) Plan benefits as part of total employee compensation; and
- 16 (h) The improvement of employee health.
 - (2) The board may approve more than one carrier for each type of plan contracted for and offered but the number of carriers shall be held to a number consistent with adequate service to eligible employees and their family members.
 - (3) Where appropriate for a contracted and offered health benefit plan, the board shall provide options under which an eligible employee may arrange coverage for family members.
 - (4) The board shall provide eligible employees and their family members the option of using health savings accounts, with accompanying high deductible health plans, authorized under the Internal Revenue Code. When an eligible employee chooses a health savings account, the state shall contribute monthly to the employee's health savings account and accompanying high deductible health plan in a total amount not less than the highest monthly contribution made for any other eligible employee's health benefit plan. The state shall first pay the premium for the high deductible health plan, then shall apply the remainder of the total monthly contribution to the employee's health savings account.
 - [(4)] (5) Payroll deductions for such costs as are not payable by the state may be made upon receipt of a signed authorization from the employee indicating an election to participate in the plan

or plans selected and the deduction of a certain sum from the employee's pay.

[(5)] (6) In developing any health benefit plan, the board may provide an option of additional coverage for eligible employees and their family members at an additional cost or premium.

[(6)] (7) Transfer of enrollment from one plan to another shall be open to all eligible employees and their family members under rules adopted by the board. Because of the special problems that may arise in individual instances under comprehensive group practice plan coverage involving acceptable physician-patient relations between a particular panel of physicians and particular eligible employees and their family members, the board shall provide a procedure under which any eligible employee may apply at any time to substitute a health service benefit plan for participation in a comprehensive group practice benefit plan.

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