

House Bill 3246

Sponsored by Representative KOTEK

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**.

Prohibits specified state agencies from contracting with health insurers until Oregon Health Policy Board approves insurer's five-year plan to increase primary care reimbursement rates by lowering reimbursement rates paid to providers of specialty care.

Sunset January 2, 2017.

A BILL FOR AN ACT

1
2 Relating to state agency contracts for health insurance.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1. (1) As used in this section:**

5 (a) **"Insurer" includes:**

6 (A) **An insurer offering a health benefit plan as defined in ORS 743.730;**

7 (B) **A fully capitated health plan as defined in ORS 414.736; and**

8 (C) **A physician care organization as defined in ORS 414.736.**

9 (b) **"Primary care provider" means a clinician who provides integrated, accessible health**
10 **care services and who is accountable for addressing a large majority of personal health care**
11 **needs including providing preventive and health promotion services for men, women and**
12 **children of all ages, developing a sustained partnership with patients and practicing in the**
13 **context of family and community.**

14 (c) **"State agency" includes:**

15 (A) **The Oregon Health Authority.**

16 (B) **The Department of Human Services.**

17 (C) **The Public Employees' Benefit Board.**

18 (D) **The Oregon Educators Benefit Board.**

19 (E) **The trustees of the Public Employees Retirement System.**

20 (2) **An insurer that contracts with a state agency or seeks to contract with a state**
21 **agency shall submit to the Oregon Health Policy Board a plan to achieve within five years**
22 **the goal of increasing the reimbursement rates paid by the insurer to primary care providers**
23 **by lowering the reimbursement rates paid by the insurer to providers of specialty care.**

24 (3) **A state agency may not contract with or renew a contract with an insurer unless the**
25 **Oregon Health Policy Board approves the insurer's five-year plan submitted under subsection**
26 **(2) of this section.**

27 (4) **After an insurer's five-year plan has been approved by the Oregon Health Policy**
28 **Board, the insurer must report to the board annually on its progress in achieving the goal**
29 **of the five-year plan and must receive the board's approval of the progress achieved before**
30 **the state agency may renew a subsequent contract with the insurer.**

NOTE: Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 **SECTION 2.** Section 1 of this 2011 Act applies to contracts entered into or renewed on
2 or after the effective date of this 2011 Act.

3 **SECTION 3.** Section 1 of this 2011 Act is repealed January 2, 2017.

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