# House Bill 3649

Sponsored by Representative HOYLE

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## 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 insurers, health care service contractors and multiple employer welfare arrangements that offer prescription eye drop coverage to also cover refills of prescriptions for eye drops under specified conditions. Applies to contracts and health benefit plans entered into, issued or renewed on or after effective date of Act.

Declares emergency, effective October 1, 2011.

# A BILL FOR AN ACT

Relating to coverage of prescription eye drops; creating new provisions; amending ORS 750.055 and
 750.333; and declaring an emergency.

4 Be It Enacted by the People of the State of Oregon:

5 <u>SECTION 1.</u> Section 2 of this 2011 Act is added to and made a part of the Insurance Code.

6 SECTION 2. An insurer offering a health benefit plan, as defined in ORS 743.730, that

7 provides coverage of prescription eye drops shall provide coverage for a refill of a pre-

8 scription for eye drops if all of the following criteria are met:

9 (1) The refill is requested by an insured less than 30 days after the later of:

10 (a) The date the original prescription was dispensed to the insured; or

11 (b) The date that the last refill of the prescription was dispensed to the insured.

(2) The prescriber indicates on the original prescription that a specific number of refills
 will be needed.

(3) The refill does not exceed the number of refills that the prescriber indicated under
 subsection (2) of this section.

16 **SECTION 3.** ORS 750.055 is amended to read:

17 750.055. (1) The following provisions of the Insurance Code apply to health care service contractors to the extent not inconsistent with the express provisions of ORS 750.005 to 750.095:

(a) ORS 705.137, 705.139, 731.004 to 731.150, 731.162, 731.216 to 731.362, 731.382, 731.385, 731.386,
731.390, 731.398 to 731.430, 731.428, 731.450, 731.454, 731.488, 731.504, 731.508, 731.509, 731.510,
731.511, 731.512, 731.574 to 731.620, 731.592, 731.594, 731.640 to 731.652, 731.730, 731.731, 731.735,
731.737, 731.750, 731.752, 731.804, 731.844 to 731.992 and 731.870.

23 (b) ORS 732.215, 732.220, 732.230, 732.245, 732.250, 732.320, 732.325 and 732.517 to 732.592, not 24 including ORS 732.582.

25 (c) ORS 733.010 to 733.050, 733.080, 733.140 to 733.170, 733.210, 733.510 to 733.680 and 733.695 26 to 733.780.

27 (d) ORS chapter 734.

(e) ORS 742.001 to 742.009, 742.013, 742.061, 742.065, 742.150 to 742.162, 742.400, 742.520 to
742.540, 743.010, 743.013, 743.018 to 743.030, 743.050, 743.100 to 743.109, 743.402, 743.472, 743.492,
743.495, 743.498, 743.522, 743.523, 743.524, 743.526, 743.527, 743.528, 743.529, 743.549 to 743.552,

#### HB 3649

743.560, 743.600 to 743.610, 743.650 to 743.656, 743.804, 743.807, 743.808, 743.814 to 743.839, 743.842, 1 743.845, 743.847, 743.854, 743.856, 743.857, 743.858, 743.859, 743.861, 743.862, 743.863, 743.864, 743.911, 2 743.912, 743.913, 743.917, 743A.010, 743A.012, 743A.020, 743A.036, 743A.048, 743A.058, 743A.062, 3 743A.064, 743A.066, 743A.068, 743A.070, 743A.080, 743A.084, 743A.088, 743A.090, 743A.100, 743A.104, 4 743A.105, 743A.110, 743A.140, 743A.141, 743A.144, 743A.148, 743A.160, 743A.164, 743A.168, 743A.170, 5 743A.175, 743A.184, 743A.188, 743A.190 and 743A.192 and section 2 of this 2011 Act. 6

(f) The provisions of ORS chapter 744 relating to the regulation of insurance producers.

(g) ORS 746.005 to 746.140, 746.160, 746.220 to 746.370, 746.600, 746.605, 746.607, 746.608, 746.610, 8 9 746.615, 746.625, 746.635, 746.650, 746.655, 746.660, 746.668, 746.670, 746.675, 746.680 and 746.690.

(h) ORS 743A.024, except in the case of group practice health maintenance organizations that 10 are federally qualified pursuant to Title XIII of the Public Health Service Act unless the patient is 11 12 referred by a physician associated with a group practice health maintenance organization.

(i) ORS 735.600 to 735.650. 13

(i) ORS 743.680 to 743.689. 14

15 (k) ORS 744.700 to 744.740.

(L) ORS 743.730 to 743.773. 16

(m) ORS 731.485, except in the case of a group practice health maintenance organization that 17is federally qualified pursuant to Title XIII of the Public Health Service Act and that wholly owns 18 19 and operates an in-house drug outlet.

20(2) For the purposes of this section, health care service contractors shall be deemed insurers.

(3) Any for-profit health care service contractor organized under the laws of any other state that 2122is not governed by the insurance laws of the other state is subject to all requirements of ORS 23chapter 732.

(4) The Director of the Department of Consumer and Business Services may, after notice and 24hearing, adopt reasonable rules not inconsistent with this section and ORS 750.003, 750.005, 750.025 25and 750.045 that are deemed necessary for the proper administration of these provisions. 26

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SECTION 4. ORS 750.333 is amended to read:

750.333. (1) The following provisions of the Insurance Code apply to trusts carrying out a mul-28tiple employer welfare arrangement: 29

30 (a) ORS 731.004 to 731.150, 731.162, 731.216 to 731.268, 731.296 to 731.316, 731.324, 731.328, 31 731.378, 731.386, 731.390, 731.398, 731.406, 731.410, 731.414, 731.418 to 731.434, 731.454, 731.484, 731.486, 731.488, 731.512, 731.574 to 731.620, 731.640 to 731.652 and 731.804 to 731.992. 32

(b) ORS 733.010 to 733.050, 733.140 to 733.170, 733.210, 733.510 to 733.680 and 733.695 to 733.780. 33 34 (c) ORS chapter 734.

(d) ORS 742.001 to 742.009, 742.013, 742.061 and 742.400. 35

(e) ORS 743.028, 743.053, 743.524, 743.526, 743.527, 743.528, 743.529, 743.530, 743.560, 743.562, 36 37 743.600, 743.601, 743.602, 743.610, 743.730 to 743.773 (except 743.760 to 743.773), 743.801, 743.804, 38 743.807, 743.808, 743.814 to 743.839, 743.842, 743.845, 743.847, 743.854, 743.856, 743.857, 743.858, 743.859, 743.861, 743.862, 743.863, 743.864, 743.912, 743.917, 743A.012, 743A.020, 743A.052, 743A.064, 39 40 743A.080, 743A.100, 743A.104, 743A.110, 743A.144, 743A.170, 743A.175, 743A.184 and 743A.192 and 41 section 2 of this 2011 Act.

42(f) ORS 743A.010, 743A.014, 743A.024, 743A.028, 743A.032, 743A.036, 743A.040, 743A.048, 743A.058, 743A.066, 743A.068, 743A.070, 743A.084, 743A.088, 743A.090, 743A.105, 743A.140, 743A.141, 43 743A.148, 743A.168, 743A.180, 743A.188 and 743A.190. Multiple employer welfare arrangements to 44 which ORS 743.730 to 743.773 apply are subject to the sections referred to in this paragraph only 45

### HB 3649

1 as provided in ORS 743.730 to 743.773.

2 (g) Provisions of ORS chapter 744 relating to the regulation of insurance producers and insur-3 ance consultants, and ORS 744.700 to 744.740.

- 4 (h) ORS 746.005 to 746.140, 746.160 and 746.220 to 746.370.
- 5 (i) ORS 731.592 and 731.594.
- 6 (j) ORS 731.870.
- 7 (2) For the purposes of this section:
- 8 (a) A trust carrying out a multiple employer welfare arrangement shall be considered an insurer.
- 9 (b) References to certificates of authority shall be considered references to certificates of mul-
- 10 tiple employer welfare arrangement.
- 11 (c) Contributions shall be considered premiums.
- (3) The provision of health benefits under ORS 750.301 to 750.341 shall be considered to be the
   transaction of health insurance.

SECTION 5. Section 2 of this 2011 Act and the amendments to ORS 750.055 and 750.333 by sections 3 and 4 of this 2011 Act apply to contracts entered into or renewed, and policies or certificates issued or renewed, on or after the effective date of this 2011 Act.

- 17 <u>SECTION 6.</u> This 2011 Act being necessary for the immediate preservation of the public 18 peace, health and safety, an emergency is declared to exist, and this 2011 Act takes effect 19 October 1, 2011.
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