## 77th OREGON LEGISLATIVE ASSEMBLY – 2013 Regular Session **MEASURE: HB 2432 A CARRIER:**

STAFF MEASURE SUMMARY

**House Committee on Health Care** 

**REVENUE:** No revenue impact FISCAL: Fiscal statement issued

Action: Do Pass as Amended and Be Printed Engrossed and Be Referred to the Committee on Ways and

Means

Vote: 8 - 0 - 1

> Conger, Harker, Kennemer, Keny-Guyer, Lively, Thompson, Weidner, Greenlick Yeas:

Nays: 0 Clem Exc.:

Prepared By: Tyler Larson, Administrator

**Meeting Dates:** 2/6, 4/5, 4/8

WHAT THE MEASURE DOES: Prohibits health benefit plans from imposing copayment, coinsurance requirement or deductible on covered health services, medications or supplies medically necessary for management of diabetes from conception through six weeks postpartum. Clarifies cost-sharing prohibition is for health services, medications and supplies medically necessary for pregnant woman to manager her diabetes. Declares an emergency, effective on passage.

## ISSUES DISCUSSED:

- Financial barriers to necessary medical treatment for diabetic women who become pregnant
- Fetal risks during first 6-12 weeks of pregnancy
- Personal experience as pregnant diabetic
- Costs to insurers
- Fiscal impact

EFFECT OF COMMITTEE AMENDMENT: Clarifies prohibition on cost sharing extends from conception through six weeks postpartum. Clarifies cost-sharing prohibition is for health services, medications and supplies medically necessary for pregnant woman to manager her diabetes.

BACKGROUND: Diabetic women who become pregnant have a higher risk of birth abnormalities, in utero or neonatal demise, as well as delivery problems as a result of the fetus' exposure to high blood sugars. Generally, these women also face a higher risk of pre-eclampsia, placenta previea and other conditions than non-diabetic pregnant women. Diabetic women who become pregnant require increased testing, prescriptions, supplies, equipment and required weekly visits to ensure their health and safety. Proponents assert that these women with commercial insurance face increased barriers to accessing the necessary pre-natal care.

House Bill 2432-A prohibits cost sharing for health services, medications and supplies medically necessary for a pregnant woman to manager her diabetes from conception to six weeks postpartum.