

B-Engrossed
House Bill 2128

Ordered by the Senate May 31
Including House Amendments dated April 9 and Senate Amendments
dated May 31

Introduced and printed pursuant to House Rule 12.00. Pre-session filed (at the request of House Interim Committee on Health Care)

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.

Requires Oregon Health Insurance Exchange Corporation [*and*] **to consult** Oregon Educators Benefit Board **and other specified stakeholders** [*to reach agreement*] on plans offered through exchange to educators. Requires that all plans offered [*by board*] **through exchange** be underwritten based upon entire risk pool of eligible school districts and employees of districts **and be comparable to plans offered by board**.

A BILL FOR AN ACT

1
2 Relating to health benefit plans for Oregon educators; amending ORS 741.310.

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

4 **SECTION 1.** ORS 741.310, as amended by section 10, chapter 38, Oregon Laws 2012, and section
5 96, chapter 107, Oregon Laws 2012, is amended to read:

6 741.310. (1) The following individuals and groups may purchase qualified health plans through
7 the health insurance exchange:

8 (a) Beginning January 1, 2014:

9 (A) Individuals and families; and

10 (B) Employers with no more than 50 employees.

11 (b) Beginning October 1, 2015, districts and eligible employees of districts that are subject to
12 ORS 243.886, unless their participation is precluded by federal law.

13 (c) Beginning January 1, 2016, employers with 51 to 100 employees.

14 (2)(a) Only individuals who purchase health plans through the exchange may be eligible to re-
15 ceive premium tax credits under section 36B of the Internal Revenue Code and reduced cost-sharing
16 under 42 U.S.C. 18071.

17 (b) Only employers that purchase health plans through the exchange may be eligible to receive
18 small employer health insurance credits under section 45R of the Internal Revenue Code.

19 (3) Only an insurer that has a certificate of authority to transact insurance in this state and
20 that meets applicable federal requirements for participating in the exchange may offer a qualified
21 health plan through the exchange. Any qualified health plan must be certified under subsection (4)
22 of this section. Prepaid managed care health services organizations that do not have a certificate
23 of authority to transact insurance may serve only medical assistance recipients through the ex-
24 change and may not offer qualified health plans.

25 (4)(a) The Oregon Health Insurance Exchange Corporation shall adopt by rule uniform require-

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 ments, standards and criteria for the certification of qualified health plans, including requirements
2 that a qualified health plan provide, at a minimum, essential health benefits and have acceptable
3 consumer and provider satisfaction ratings.

4 (b) The corporation may limit the number of qualified health plans that may be offered through
5 the exchange as long as the same limit applies to all insurers.

6 *[(c) The corporation shall consult with stakeholders, including but not limited to representatives
7 of school administrators, school board members and school employees, regarding the plans that may
8 be offered through the exchange to districts and eligible employees of districts under subsection (1)(b)
9 of this section.]*

10 (5) Notwithstanding subsection (4) of this section, the corporation shall certify as qualified a
11 dental only health plan as permitted by federal law.

12 (6) The corporation shall establish one streamlined and seamless application and enrollment
13 process for both the exchange and the state medical assistance program.

14 (7) The corporation, in collaboration with the appropriate state authorities, may establish risk
15 mediation programs within the exchange.

16 (8) The corporation shall establish by rule a process for certifying insurance producers to fa-
17 cilitate the transaction of insurance through the exchange, in accordance with federal standards and
18 policies.

19 (9) The corporation shall ensure, as required by federal laws, that an insurer charges the same
20 premiums for plans sold through the exchange as for identical plans sold outside of the exchange.

21 (10) The corporation is authorized to enter into contracts for the performance of duties, func-
22 tions or operations of the exchange, including but not limited to contracting with:

23 (a) All insurers that meet the requirements of subsections (3) and (4) of this section, to offer
24 qualified health plans through the exchange; and

25 (b) Navigators certified by the corporation under ORS 741.002.

26 **(11)(a) The corporation shall consult with stakeholders, including but not limited to rep-
27 resentatives of school administrators, school board members, school employees and the
28 Oregon Educators Benefit Board, regarding the plans that may be offered through the ex-
29 change to districts and eligible employees of districts under subsection (1)(b) of this section
30 and the insurers that may offer the plans.**

31 **(b) The board and the corporation shall each adopt rules to ensure that:**

32 **(A) Any plan offered under subsection (1)(b) of this section is underwritten by an insurer
33 using a single risk pool composed of all eligible employees who are enrolled or who will be
34 enrolled in the plan both through the exchange and by the board; and**

35 **(B) In every plan offered under subsection (1)(b) of this section, the coverage is compa-
36 rable to plans offered by the board.**

37 *[(11)]* **(12)** The corporation is authorized to apply for and accept federal grants, other federal
38 funds and grants from nongovernmental organizations for purposes of developing, implementing and
39 administering the exchange. Moneys received under this subsection shall be deposited in an account
40 established under ORS 741.101.

41 **SECTION 2.** ORS 741.310, as amended by section 12, chapter 415, Oregon Laws 2011, section
42 11, chapter 38, Oregon Laws 2012, and section 97, chapter 107, Oregon Laws 2012, is amended to
43 read:

44 741.310. (1) The following individuals and groups may purchase qualified health plans through
45 the health insurance exchange:

1 (a) Individuals and families;

2 (b) Employers with no more than 100 employees; and

3 (c) Districts and eligible employees of districts that are subject to ORS 243.886, unless their
4 participation is precluded by federal law.

5 (2)(a) Only individuals who purchase health plans through the exchange may be eligible to re-
6 ceive premium tax credits under section 36B of the Internal Revenue Code and reduced cost-sharing
7 under 42 U.S.C. 18071.

8 (b) Only employers that purchase health plans through the exchange may be eligible to receive
9 small employer health insurance credits under section 45R of the Internal Revenue Code.

10 (3) Only an insurer that has a certificate of authority to transact insurance in this state and
11 that meets applicable federal requirements for participating in the exchange may offer a qualified
12 health plan through the exchange. Any qualified health plan must be certified under subsection (4)
13 of this section. Prepaid managed care health services organizations that do not have a certificate
14 of authority to transact insurance may serve only medical assistance recipients through the ex-
15 change and may not offer qualified health plans.

16 (4)(a) The Oregon Health Insurance Exchange Corporation shall adopt by rule uniform require-
17 ments, standards and criteria for the certification of qualified health plans, including requirements
18 that a qualified health plan provide, at a minimum, essential health benefits and have acceptable
19 consumer and provider satisfaction ratings.

20 (b) The corporation may limit the number of qualified health plans that may be offered through
21 the exchange as long as the same limit applies to all insurers.

22 *[(c) The corporation shall consult with stakeholders, including but not limited to representatives*
23 *of school administrators, school board members and school employees, regarding the plans that may*
24 *be offered through the exchange to districts and eligible employees of districts under subsection (1)(c)*
25 *of this section.]*

26 (5) Notwithstanding subsection (4) of this section, the corporation shall certify as qualified a
27 dental only health plan as permitted by federal law.

28 (6) The corporation shall establish one streamlined and seamless application and enrollment
29 process for both the exchange and the state medical assistance program.

30 (7) The corporation, in collaboration with the appropriate state authorities, may establish risk
31 mediation programs within the exchange.

32 (8) The corporation shall establish by rule a process for certifying insurance producers to fa-
33 cilitate the transaction of insurance through the exchange, in accordance with federal standards and
34 policies.

35 (9) The corporation shall ensure, as required by federal laws, that an insurer charges the same
36 premiums for plans sold through the exchange as for identical plans sold outside of the exchange.

37 (10) The corporation is authorized to enter into contracts for the performance of duties, func-
38 tions or operations of the exchange, including but not limited to contracting with:

39 (a) Insurers that meet the requirements of subsections (3) and (4) of this section, to offer quali-
40 fied health plans through the exchange; and

41 (b) Navigators certified by the corporation under ORS 741.002.

42 **(11)(a) The corporation shall consult with stakeholders, including but not limited to rep-**
43 **resentatives of school administrators, school board members, school employees and the**
44 **Oregon Educators Benefit Board, regarding the plans that may be offered through the ex-**
45 **change to districts and eligible employees of districts under subsection (1)(c) of this section**

1 **and the insurers that may offer the plans.**

2 **(b) The board and the corporation shall each adopt rules to ensure that:**

3 **(A) Any plan offered under subsection (1)(c) of this section is underwritten by an insurer**
4 **using a single risk pool composed of all eligible employees who are enrolled or who will be**
5 **enrolled in the plan both through the exchange and by the board; and**

6 **(B) In every plan offered under subsection (1)(c) of this section, the coverage is compa-**
7 **table to plans offered by the board.**

8 ~~[(11)]~~ (12) The corporation is authorized to apply for and accept federal grants, other federal
9 funds and grants from nongovernmental organizations for purposes of developing, implementing and
10 administering the exchange. Moneys received under this subsection shall be deposited in an account
11 established under ORS 741.101.

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