

SENATE AMENDMENTS TO A-ENGROSSED HOUSE BILL 2128

By COMMITTEE ON HEALTH CARE AND HUMAN SERVICES

May 31

1 On page 1 of the printed A-engrossed bill, delete lines 4 through 26 and delete pages 2 and 3
2 and insert:

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

5 “741.310. (1) The following individuals and groups may purchase qualified health plans through
6 the health insurance exchange:

7 “(a) Beginning January 1, 2014:

8 “(A) Individuals and families; and

9 “(B) Employers with no more than 50 employees.

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

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

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

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

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

24 “(4)(a) The Oregon Health Insurance Exchange Corporation shall adopt by rule uniform re-
25 quirements, standards and criteria for the certification of qualified health plans, including require-
26 ments that a qualified health plan provide, at a minimum, essential health benefits and have
27 acceptable consumer and provider satisfaction ratings.

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

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

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

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

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

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

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

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

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

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

15 “(11)(a) **The corporation shall consult with stakeholders, including but not limited to**
16 **representatives of school administrators, school board members, school employees and the**
17 **Oregon Educators Benefit Board, regarding the plans that may be offered through the ex-**
18 **change to districts and eligible employees of districts under subsection (1)(b) of this section**
19 **and the insurers that may offer the plans.**

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

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

24 “(B) **In every plan offered under subsection (1)(b) of this section, the coverage is com-**
25 **parable to plans offered by the board.**

26 “[11] (12) The corporation is authorized to apply for and accept federal grants, other federal
27 funds and grants from nongovernmental organizations for purposes of developing, implementing and
28 administering the exchange. Moneys received under this subsection shall be deposited in an account
29 established under ORS 741.101.

30 “**SECTION 2.** ORS 741.310, as amended by section 12, chapter 415, Oregon Laws 2011, section
31 11, chapter 38, Oregon Laws 2012, and section 97, chapter 107, Oregon Laws 2012, is amended to
32 read:

33 “741.310. (1) The following individuals and groups may purchase qualified health plans through
34 the health insurance exchange:

35 “(a) Individuals and families;

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

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

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

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

44 “(3) Only an insurer that has a certificate of authority to transact insurance in this state and
45 that meets applicable federal requirements for participating in the exchange may offer a qualified

1 health plan through the exchange. Any qualified health plan must be certified under subsection (4)
2 of this section. Prepaid managed care health services organizations that do not have a certificate
3 of authority to transact insurance may serve only medical assistance recipients through the ex-
4 change and may not offer qualified health plans.

5 “(4)(a) The Oregon Health Insurance Exchange Corporation shall adopt by rule uniform re-
6 quirements, standards and criteria for the certification of qualified health plans, including require-
7 ments that a qualified health plan provide, at a minimum, essential health benefits and have
8 acceptable consumer and provider satisfaction ratings.

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

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

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

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

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

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

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

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

28 “(a) Insurers that meet the requirements of subsections (3) and (4) of this section, to offer qual-
29 ified health plans through the exchange; and

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

31 “(11)(a) **The corporation shall consult with stakeholders, including but not limited to**
32 **representatives of school administrators, school board members, school employees and the**
33 **Oregon Educators Benefit Board, regarding the plans that may be offered through the ex-**
34 **change to districts and eligible employees of districts under subsection (1)(c) of this section**
35 **and the insurers that may offer the plans.**

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

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

40 “(B) **In every plan offered under subsection (1)(c) of this section, the coverage is com-**
41 **parable to plans offered by the board.**

42 “[*(11)*] (12) The corporation is authorized to apply for and accept federal grants, other federal
43 funds and grants from nongovernmental organizations for purposes of developing, implementing and
44 administering the exchange. Moneys received under this subsection shall be deposited in an account
45 established under ORS 741.101.”

