HB 3163-1 (LC 1876) 3/5/13 (LHF/ps)

PROPOSED AMENDMENTS TO HOUSE BILL 3163

1 Delete lines 4 through 21 of the printed bill and insert:

2 "<u>SECTION 1.</u> (1) As used in this section:

"(a) 'Coordinated care organization' has the meaning given that
term in ORS 414.025.

"(b) 'Group health plan' has the meaning given that term in 42
U.S.C. 300gg-91(a).

"(c) 'Health care facility' has the meaning given that term in ORS
442.015.

9 "(d) 'Household income' has the meaning given that term in 26
10 U.S.C. 5000A(c)(4)(B).

"(e) 'Premium cost' means the cost of group health plan premium for coverage of the employee, if only the employee is covered, or for family coverage, if the employee selects family coverage under the plan.

"(2) A health care facility may contract with a coordinated care 15organization to provide health services to medical assistance recipients 16 or may be represented on the board of directors of a coordinated care 17 organization if, with respect to the full-time and part-time employees 18 of the facility, the facility offers a group health plan that provides 19 coverage for a scope of services equivalent to the scope of services that 20must be provided by a coordinated care organization. The group health 21plan must be agreed to as part of a collective bargaining agreement 22

1 between the facility and the employees.

"(3) An employee's required contribution toward the premium cost
of a group health plan described in this section may not exceed the
following percentage of household income:

"(a) Eight percent for group health plans that are issued or renewed
in 2014; and

"(b) For group health plans issued or renewed after 2014, the percentage, as determined by the Secretary of Health and Human Services
under 26 U.S.C. 5000A(e)(1)(D), that reflects the excess of the rate of
premium growth between the preceding calendar year over the rate
of income growth for the period.".

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