

# House Bill 3427

Sponsored by Representatives GALLEGOS, LIVELY; Representative GORSEK

## 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**.

Prohibits insurers from reducing reimbursement paid to health care providers by more than five percent for more than two consecutive years, and prohibits further reductions without approval of Department of Consumer and Business Services.

Specifies amount of reimbursement that must be paid to clinical social workers, psychologists, professional counselors and marriage and family therapists as percentage of reimbursement paid to psychiatrists.

## A BILL FOR AN ACT

1  
2 Relating to insurance reimbursement for health services; creating new provisions; and amending  
3 ORS 743A.024, 743A.048 and 743A.052.

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

5 **SECTION 1. Section 2 of this 2015 Act is added to and made a part of the Insurance Code.**

6 **SECTION 2. (1) An insurer that reimburses a person for the cost of providing a service**  
7 **covered by a health insurance policy or contract may not reduce the amount of reimburse-**  
8 **ment paid to the person for the service by more than five percent during any 12-month pe-**  
9 **riod.**

10 **(2)(a) If an insurer reduces the amount of reimbursement paid to a person for the cost**  
11 **of providing a service covered by a health insurance policy or contract in two consecutive**  
12 **years, the insurer may not further reduce the reimbursement amount without approval by**  
13 **the Department of Consumer and Business Services.**

14 **(b) The department shall adopt by rule the criteria that justify successive reductions in**  
15 **the amount of reimbursement paid to a person as described in this subsection.**

16 **SECTION 3. ORS 743A.024 is amended to read:**

17 743A.024. Whenever any individual or group health insurance policy or blanket health insurance  
18 policy described in ORS 743.534 (3) provides for payment or reimbursement for any service within  
19 the lawful scope of service of a clinical social worker licensed under ORS 675.530, **the payment**  
20 **or reimbursement shall be:**

21 *[(1) The insured under the policy shall be entitled to the services of a clinical social worker licensed*  
22 *under ORS 675.530, upon referral by a physician or psychologist.]*

23 *[(2) The insured under the policy shall be entitled to have payment or reimbursement made to the*  
24 *insured or on behalf of the insured for the services performed. The payment or reimbursement shall*  
25 *be]*

26 **(1) In accordance with the benefits provided in the policy [and shall be];**

27 **(2) Computed in the same manner whether performed by a physician, by a psychologist or by a**  
28 **clinical social worker[, according to the customary and usual fee of clinical social workers in the area**  
29 **served.]; and**

**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           **(3) In an amount equal to at least 80 percent of the payment or reimbursement made**  
2 **pursuant to the policy to a psychiatrist providing the same service.**

3           **SECTION 4.** ORS 743A.048 is amended to read:

4           743A.048. Whenever *[any]* a provision of any individual or group health insurance policy or  
5 contract provides for payment or reimbursement for any service *[which]* **that** is within the lawful  
6 scope of a psychologist licensed under ORS 675.010 to 675.150, **the payment or reimbursement**  
7 **shall be:**

8           *[(1) The insured under such policy or contract shall be free to select, and shall have direct access*  
9 *to, a psychologist licensed under ORS 675.010 to 675.150, without supervision or referral by a physician*  
10 *or another health practitioner, and wherever such psychologist is authorized to practice.]*

11           *[(2) The insured under such policy or contract shall be entitled to have payment or reimbursement*  
12 *made to the insured or on the insured's behalf for the services performed. Such payment or re-*  
13 *imbursement shall be]*

14           (1) In accordance with the benefits provided in the policy *[and shall be]*;

15           (2) The same whether performed by a physician or a psychologist licensed under ORS 675.010  
16 to 675.150[.]; **and**

17           **(3) In an amount equal to at least 95 percent of the payment or reimbursement made**  
18 **pursuant to the policy or contract to a psychiatrist providing the same service.**

19           **SECTION 5.** ORS 743A.052 is amended to read:

20           743A.052. (1) If a *[group]* health benefit plan, as described in ORS 743.730, provides for coverage  
21 for services performed by a clinical social worker or nurse practitioner, the plan also must cover  
22 services provided by a professional counselor or marriage and family therapist licensed under ORS  
23 675.715 to 675.835 when the counselor or therapist is acting within the counselor's or therapist's  
24 lawful scope of practice.

25           **(2) The amount of reimbursement paid to a professional counselor or marriage and family**  
26 **therapist licensed under ORS 675.715 to 675.835 shall be equal to at least 80 percent of the**  
27 **reimbursement paid pursuant to the plan to a psychiatrist providing the same service.**

28           *[(2)]* (3) Health maintenance organizations may limit the receipt of covered services performed  
29 by professional counselors and marriage and family therapists to services provided by or upon re-  
30 ferral by providers contracting with the health maintenance organization. Health maintenance or-  
31 ganizations and health care service contractors may create substantive plan benefit and  
32 reimbursement differentials at the same level as, and subject to limitations not more restrictive than,  
33 those imposed on coverage or reimbursement of expenses arising out of other medical conditions and  
34 apply them to contracting and noncontracting providers.

35           *[(3)]* (4) The provisions of ORS 743A.001 do not apply to this section.

36           **SECTION 6. Section 2 of this 2015 Act and the amendments to ORS 743A.024, 743A.048**  
37 **and 743A.052 by sections 3 to 5 of this 2015 Act apply to reimbursement of claims paid by**  
38 **insurers on or after the effective date of this 2015 Act.**

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