

SB 784 STAFF MEASURE SUMMARY

Senate Committee On Health Care

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Meeting Dates: 3/23

WHAT THE MEASURE DOES:

Requires insurers in Oregon offering health plans that cover services provided by a women’s health care provider to reimburse for services at the same rate regardless of whether a provider is in-network or out-of-network.

REVENUE: May have revenue impact, but no statement yet issued.

FISCAL: May have fiscal impact, but no statement yet issued.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

The U.S. National Library of Medicine states that “women's health refers to the branch of medicine that focuses on the treatment and diagnosis of diseases and conditions that affect a woman's physical and emotional well-being.” Women's health includes a broad range of specialties and services: birth control, sexually transmitted infections (STIs), and gynecology; female cancers such as breast and ovarian cancer; menopause and hormone therapy; osteoporosis; infertility, pregnancy and childbirth services; sexual health, among other treatments and services. Women’s health services are provided by a range of health care professionals from a variety of different specialties. Oregon law (ORS 743B.222) defines a women’s health care provider as an obstetrician, gynecologist, physician assistant, advanced nurse practitioner, or certified nurse that specializes in women’s health.

Senate Bill 784 requires insurers that serve the individual and group markets in Oregon to reimburse women’s health care providers that do not participate in an insurer’s network at the same rate as providers within their network.