

## HB 2341 -A2 STAFF MEASURE SUMMARY

### Senate Committee On Health Care

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**Meeting Dates:** 4/27, 5/4

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#### WHAT THE MEASURE DOES:

Updates Insurance Code provisions applicable to health insurance in accordance with federal requirements. Modifies the small employer definition to align with federal definition. Changes short-term policies from six months to three months. Removes gender specific language and replaces it with gender neutral terms for a range of health services: mammograms, pelvic and pap smear examinations, HPV vaccines, physical breast examinations and prostate screenings. Declares emergency, effective on passage.

*REVENUE: No revenue impact.*

*FISCAL: Minimal fiscal impact.*

#### ISSUES DISCUSSED:

- Provisions of the measure

#### EFFECT OF AMENDMENT:

-A2 Conforming amendment tied to the passage of Senate Bill 271.

#### BACKGROUND:

With the passage of the federal Patient Protection and Affordable Care Act (ACA), there were major changes to the nation's health care system. In Oregon, the Department of Consumer and Business Services (DCBS) is responsible for administration of the ACA in the state's commercial market.

The ACA largely preempts state law, requiring state policymakers to revise statutes and rules to comply with federal changes and adjustments. For example, the Centers for Medicare and Medicaid Services issues annual rulemaking regarding the ACA health insurance marketplace, which states must implement in the subsequent plan year. Because of rapid and frequent regulatory changes at the federal level, Oregon statutes may not align with the requirements of the ACA, resulting in complicated rulemaking procedures to reconcile Oregon law with federal requirements and direction. Since the passage of the ACA, the Legislative Assembly has enacted several bills that essentially reconnect Oregon statutes to federal regulations.

House Bill 2341-A is an omnibus bill that brings Oregon statutes in line with new and changed federal regulations, providing DCBS the ability to resolve state health insurance implementation issues.