House Bill 3187

Sponsored by Representative RAYFIELD

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.**

Requires insurer, Public Employees' Benefit Board and Oregon Educators Benefit Board to reimburse specified amount to noncontracting individual health professional for services provided to health benefit plan enrollee in contracting health facility.

Prohibits noncontracting individual health professional from balance billing for services furnished in contracted health facility.

A BILL FOR AN ACT

2 Relating to health care.

1

4

9

10

11 12

13

14

15

16

17

18

19 20

21

22 23

24

25

26 27

28

29

30

- 3 Be It Enacted by the People of the State of Oregon:
 - SECTION 1. Section 2 of this 2017 Act is added to and made a part of the Insurance Code.
- 5 SECTION 2. (1) As used in this section:
- 6 (a) "Contracting health facility" means a health care facility that contracts with an 7 insurer offering a health benefit plan to provide services to enrollees in the health benefit 8 plan.
 - (b) "Health benefit plan" has the meaning given that term in ORS 743B.005.
 - (c) "Health care facility" includes:
 - (A) A hospital, as defined in ORS 442.015.
 - (B) An ambulatory surgical center, as defined in ORS 442.015.
 - (d) "Individual health professional" means an individual who is licensed, certified or registered to provide health care services in a health care facility.
 - (e) "Insurer" means a person with a certificate of authority to transact insurance or a third party administrator.
 - (f) "Noncontracting individual health professional" means an individual health professional who has not contracted with an insurer to provide services to enrollees in a health benefit plan offered by the insurer.
 - (2) An insurer offering a health benefit plan shall directly reimburse a noncontracting individual health professional an amount equal to 125 percent of the rate paid by Medicare for a covered health care service provided in a contracting health facility to an enrollee in the health benefit plan.
 - **SECTION 3.** (1) As used in this section:
 - (a) "Contracting health facility" means a health care facility that contracts with an insurer offering a health benefit plan to provide services to patients enrolled in the health benefit plan.
 - (b) "Cost sharing" includes any copayment, coinsurance or deductible, or any other form of cost sharing other than a premium or a share of a premium paid by a patient enrolled in a health benefit plan.

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 (c) "Health benefit plan" has the meaning given that term in ORS 743B.005.
- 2 (d) "Health care facility" includes:
- 3 (A) A hospital, as defined in ORS 442.015.
- (B) An ambulatory surgical center, as defined in ORS 442.015.
- 5 (e) "Individual health professional" means an individual who is licensed, certified or reg-6 istered to provide health care services in a health care facility.
 - (f) "Insurer" includes:

7

8

12

13

14 15

16

17

18

19

20 21

22

23

94

25

26

27

28

29 30

31

32

33 34

35

36 37

38

39

40

41

44

45

- (A) A person with a certificate of authority to transact insurance;
- (B) A third party administrator;
- 10 (C) The Public Employees' Benefit Board; and
- 11 (D) The Oregon Educators Benefit Board.
 - (g) "Noncontracting individual health professional" means an individual health professional who has not contracted with an insurer to provide services to patients enrolled in a health benefit plan offered by the insurer.
 - (2) If a noncontracting individual health professional has been reimbursed by an insurer for services provided to a patient enrolled in a health benefit plan at the rate described in section 2 (2) of this 2017 Act, the noncontracting individual health professional may not charge or collect from the patient any additional amount except for any cost sharing authorized by the terms of the patient's health benefit plan.
 - SECTION 4. Section 5 of this 2017 Act is added to and made a part of ORS 243.105 to 243.285.

SECTION 5. (1) As used in this section:

- (a) "Contracting health facility" means a health care facility that contracts with the Public Employees' Benefit Board or a third party administrator acting on behalf of the board to provide services to eligible employees and their dependents who are enrolled in a health benefit plan offered by the board.
 - (b) "Health benefit plan" has the meaning given that term in ORS 743B.005.
 - (c) "Health care facility" includes:
 - (A) A hospital, as defined in ORS 442.015.
 - (B) An ambulatory surgical center, as defined in ORS 442.015.
- (d) "Individual health professional" means an individual who is licensed, certified or registered to provide health care services in a health care facility.
- (e) "Noncontracting individual health professional" means an individual health professional who has not contracted with the board or a third party administrator acting on behalf of the board to provide services to eligible employees and their dependents who are enrolled in a health benefit plan offered by the board.
- (2) The board or a third party administrator acting on behalf of the board shall directly reimburse a noncontracting individual health professional an amount equal to 125 percent of the rate paid by Medicare for a covered health care service provided in a contracting health facility to an eligible employee or the eligible employee's dependent who is enrolled in a health benefit plan offered by the board.
- 42 <u>SECTION 6.</u> Section 7 of this 2017 Act is added to and made a part of ORS 243.860 to 43 243.886.
 - SECTION 7. (1) As used in this section:
 - (a) "Contracting health facility" means a health care facility that contracts with the

- Oregon Educators Benefit Board or a third party administrator acting on behalf of the board to provide services to eligible employees and their dependents who are enrolled in a health benefit plan.
 - (b) "Health benefit plan" has the meaning given that term in ORS 743B.005.
 - (c) "Health care facility" includes:

4 5

7

8 9

10

11 12

13

14 15

16

17 18

19

20

- (A) A hospital, as defined in ORS 442.015.
- (B) An ambulatory surgical center, as defined in ORS 442.015.
- (d) "Individual health professional" means an individual who is licensed, certified or registered to provide health care services in a health care facility.
- (e) "Noncontracting individual health professional" means an individual health professional who has not contracted with the board or a third party administrator acting on behalf of the board to provide services to eligible employees and their dependents who are enrolled in a health benefit plan offered by the board.
- (2) The board or a third party administrator acting on behalf of the board shall directly reimburse a noncontracting individual health professional an amount equal to 125 percent of the rate paid by Medicare for a covered health care service provided in a contracting health facility to an eligible employee or the eligible employee's dependent who is enrolled in a health benefit plan offered by the board.

SECTION 8. Sections 2, 5 and 7 of this 2017 Act apply to coverage under health benefit plan policies or certificates during plan years beginning on and after January 1, 2019.

21