

B-Engrossed
Senate Bill 860

Ordered by the Senate June 19
Including Senate Amendments dated April 25 and June 19

Sponsored by COMMITTEE ON HEALTH CARE (at the request of Oregon Independent Mental Health Professionals)

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.

Requires Department of Consumer and Business Services to examine parity of reimbursement paid by *[insurers]* **carriers** to mental health providers and physicians. Requires department to adopt rules necessary to ensure compliance with mental health parity and network adequacy requirements based on results of department's examination. Requires department to report to interim committees related to health, by September 1, 2019, results of department's examination and actions taken by department in response to examination.

Sunsets January 2, 2021.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to mental health treatment providers; and declaring an emergency.

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

4 **SECTION 1. (1) As used in this section:**

5 (a) **"Behavioral mental health provider" includes:**

6 (A) **A psychologist licensed under ORS 675.010 to 675.150;**

7 (B) **A clinical social worker licensed under ORS 675.530; and**

8 (C) **A professional counselor or marriage and family therapist licensed under ORS 675.715.**

9 (b) **"Carrier" has the meaning given that term in ORS 743B.005.**

10 (c) **"Medical provider" means a physician licensed under ORS chapter 677.**

11 (d) **"Mental health provider with prescribing privileges" includes:**

12 (A) **A psychiatrist; and**

13 (B) **A certified nurse practitioner with a specialty in psychiatric mental health.**

14 (2) **The Department of Consumer and Business Services shall examine all of the following:**

15 (a) **The historical trends of each carrier's maximum allowable reimbursement rates for**
16 **time-based outpatient office visit procedural codes and whether each carrier's in-network**
17 **behavioral mental health providers have been paid reimbursement that is equivalent to the**
18 **reimbursement for the carrier's in-network medical providers and mental health providers**
19 **with prescribing privileges.**

20 (b) **Whether each carrier imposes utilization management procedures for behavioral**
21 **mental health providers that are more restrictive than the utilization management proce-**
22 **dures for medical providers as indicated by the time-based outpatient office visit procedural**
23 **codes applied to providers in each category, including a review of whether a carrier restricts**
24 **the use of longer office visits for behavioral mental health providers more than for medical**

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 providers.

2 (c) Whether each carrier pays equivalent reimbursement for time-based procedural codes
3 for both in-network behavioral mental health providers and in-network medical providers,
4 including the reimbursement of incremental increases in the length of an office visit.

5 (d) Whether the methodologies used by each carrier to determine the carrier's re-
6 imbursement rate schedule are equivalent for in-network behavioral health providers and
7 in-network medical providers.

8 (3) The department shall adopt rules or take other actions based on the results of the
9 department's examination under subsection (2) of this section that ensure that carriers meet
10 the requirements of ORS 743A.168 and 743B.505 in policies, certificates or contracts for
11 health insurance that the carriers offer to residents of this state.

12 SECTION 2. The Department of Consumer and Business Services shall report to the in-
13 terim committees of the Legislative Assembly related to health, no later than September 1,
14 2019, the status of the department's examination in accordance with section 1 of this 2017
15 Act and rules adopted or other actions taken by the department in response to the exam-
16 ination.

17 SECTION 3. Notwithstanding any other law limiting expenditures, the amount of \$600,000
18 is established for the biennium beginning July 1, 2017, as the maximum limit for payment of
19 expenses for carrying out the provisions of section 1 of this 2017 Act from fees, moneys or
20 other revenues, including Miscellaneous Receipts, but excluding lottery funds and federal
21 funds, collected or received by the Department of Consumer and Business Services for the
22 Division of Financial Regulation.

23 SECTION 4. Section 1 of this 2017 Act is repealed on January 2, 2021.

24 SECTION 5. This 2017 Act being necessary for the immediate preservation of the public
25 peace, health and safety, an emergency is declared to exist, and this 2017 Act takes effect
26 on its passage.

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