## Senate Bill 734

Sponsored by Senator MONNES ANDERSON, Representatives LIVELY, NOBLE; Senators KNOPP, MANNING JR, RILEY, TAYLOR, Representatives EVANS, GREENLICK, HERNANDEZ, HOLVEY, NEARMAN, NOSSE, PRUSAK, REARDON, SALINAS, SCHOUTEN, STARK, WILDE, WILLIAMSON, WITT

## **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 individual and group health insurance policies to reimburse services provided by naturopathic physicians within scope of their practice if services are reimbursed when provided by licensed physicians.

Declares emergency, effective on passage.

## A BILL FOR AN ACT

- 2 Relating to naturopathic physicians; and declaring an emergency.
  - Be It Enacted by the People of the State of Oregon:
    - SECTION 1. Section 2 of this 2019 Act is added to and made a part of the Insurance Code.
    - SECTION 2. (1) An individual or group health insurance policy that reimburses the cost of a service performed by a licensed physician shall reimburse the cost of the same service performed by a naturopathic physician if the service is within the scope of practice of the naturopathic physician.
    - (2)(a) An individual or group health insurance policy shall reimburse the cost of a service provided by a naturopathic physician who is in an independent practice in the same amount as the reimbursement paid under the policy to a licensed physician performing the service in the area served.
    - (b) As used in this subsection, "independent practice" means the naturopathic physician bills insurers for services provided by the naturopathic physician using the:
      - (A) Diagnosis and procedure codes applicable to the services;
      - (B) Naturopathic physician's own name; and
      - (C) Naturopathic physician's national provider identifier.
    - (3) This section does not apply to group practice health maintenance organizations that are federally qualified pursuant to Title XIII of the Health Maintenance Organization Act or other insurers that employ health care practitioners to provide care to members of the organizations and do not compensate such practitioners on a fee-for-service basis.
    - (4) An insurer may not reduce the reimbursement paid to a licensed physician in order to comply with this section.
      - SECTION 3. (1) As used in this section:
    - (a) "In-network provider" means a health care professional who contracts with an insurer to provide care to insureds under health insurance policies issued by the insurer.
    - (b) "Out-of-network provider" means a health care professional who provides care to an insured under a health insurance policy issued by an insurer but who does not have a contract with the insurer to provide care.

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(2) Section 2 of this 2019 Act applies to:	
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- (a) Services billed by an in-network provider on or after the effective date of this 2019 Act; and
- (b) Services provided by an out-of-network provider on or after the effective date of this 2019 Act.

<u>SECTION 4.</u> This 2019 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2019 Act takes effect on its passage.