SB 242-2 (LC 1827) 4/2/19 (LHF/ps)

Requested by Senator MONNES ANDERSON

## PROPOSED AMENDMENTS TO SENATE BILL 242

In line 2 of the printed bill, after "care" delete the rest of the line and insert a period.

3 Delete lines 4 through 19 and insert:

4 "SECTION 1. Section 2 of this 2019 Act is added to and made a part
5 of the Insurance Code.

6 **"SECTION 2. (1) As used in this section:** 

"(a) 'Assisted reproduction' has the meaning given that term in
ORS 109.239.

9 "(b) 'Childbirth' means labor, delivery and medically necessary
10 postpartum care for at least six weeks after delivery.

"(c) 'Health benefit plan' has the meaning given that term in ORS
 743B.005, excluding health benefit plans sponsored by employers for
 their employees.

"(d) 'Intended parent' means an individual who enters into a
 surrogacy agreement with a surrogate to be the legal parent of the
 child born to the surrogate from assisted reproduction.

"(e) 'Pregnancy care' means the care necessary to support a healthy
 pregnancy.

19 "(f) 'Surrogacy agreement' means an agreement between a woman 20 and an intended parent or intended parents in which the woman 21 agrees to become pregnant through assisted reproduction and to re1 linquish the resulting child to the intended parent or parents.

"(g) 'Surrogate' means a woman who enters into a surrogacy
agreement to become pregnant by assisted reproduction.

"(2) A health benefit plan that provides payment or reimbursement
for the costs of pregnancy and childbirth must provide payment or
reimbursement for the expenses of pregnancy care and childbirth for
an enrollee who is a surrogate.

8 "(3) A health benefit plan may not require a surrogate, as a condi9 tion of coverage under the health benefit plan, to:

"(a) Reimburse the insurer offering the health benefit plan for the
 cost of services described in subsection (2) of this section that are paid
 or reimbursed by the insurer;

"(b) Assign to the insurer the right to receive payments from an
 intended parent under a surrogacy agreement to recover the cost of
 services paid or reimbursed by the insurer; or

"(c) Agree to any term that has the effect of negating the payment
 or reimbursement by the insurer for the cost of services described in
 subsection (2) of this section.

"(4) Any term in a policy or certificate that is in violation of sub section (3) of this section shall be deemed to be contrary to public
 policy and void.

"<u>SECTION 3.</u> Section 2 of this 2019 Act applies to health benefit
plans issued, renewed or extended on or after the effective date of this
2019 Act.".

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