Senate Bill 407

Sponsored by Senator MORRISETTE

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.**

Provides patient freedom of choice of health care physician and primary care physician from among all health care physicians. Requires insurance to cover chiropractic physician services.

A BILL FOR AN ACT 1 Relating to health care. 2 3 Be It Enacted by the People of the State of Oregon: SECTION 1. As used in sections 1 to 6 of this 2007 Act: 4 (1) "Casualty insurance" has the meaning given that term in ORS 731.158. 5 6 (2) "Dental care" means services within the professional scope of practice of a dentist licensed under ORS chapter 679. 7 8 (3) "Enrollee" means an individual who is enrolled in a managed care plan. 9 (4) "Foot care" means services within the professional scope of practice of a podiatric physician and surgeon licensed under ORS chapter 677. 10 (5) "Health care physician" means a person selected in accordance with section 3 (2) of 11 this 2007 Act to provide medical, dental, foot or vision care to an enrollee or insured person. 12 13(6) "Health insurance" has the meaning given that term in ORS 731.162. (7) "Insurer" has the meaning given that term in ORS 731.106. 14 (8) "Managed care entity" means any person, including, but not limited to, a health 15insurer providing health insurance, a health care facility as defined in ORS 442.015, a health 16 care service contractor as defined in ORS 750.005, a preferred provider organization or a 17 third party administrator that establishes or maintains a network of participating health 18 care professionals or provides a health benefit plan as defined in ORS 743.730. 19 (9) "Managed care plan" means a plan or policy operated by a managed care entity that 20 21provides payment for or delivery of health care services to enrollees of a plan with financial 22incentives for enrollees to use participating health care professionals and services covered 23 by the plan. (10) "Policy" has the meaning given that term in ORS 731.122. 24 (11) "Primary care physician" means a health care physician qualified under section 3 (2) 25of this 2007 Act and selected by an enrollee or insured person, when required by the managed 26 27care plan or health insurance policy, to coordinate, supervise or provide ongoing medical care 28 to the enrollee or insured person. (12) "Public employee" means an employee of a public employer, including the State of 29Oregon and cities, counties, community colleges, school districts, special districts, mass 30 transit districts, metropolitan service districts, public service corporations or municipal 31

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1 corporations and public and quasi-public corporations in this state.

2 (13) "Vision care" means services provided within the professional scope of practice of 3 an optometrist licensed under ORS chapter 683.

4 <u>SECTION 2.</u> (1) All managed care plans offered by a managed care entity, all health in-5 surance policies and all casualty insurance policies provided to residents of Oregon shall:

6 (a) Provide for patient freedom of choice of health care physician and primary care phy-7 sician from among all health care physicians providing medical services within the physi-8 cians' professional scope of practice; and

9 (b) Provide a determination of policy benefits that is unbiased and independent of a pa-10 tient's choice of health care physician or primary care physician, that includes, but is not 11 limited to, a determination of the extent and reimbursement, payment and delivery of med-12 ical, dental, foot or vision care.

(2) Notwithstanding subsection (1)(a) of this section, selection of a primary care physician
limits a patient's freedom of choice to the selected primary care physician and referrals by
the primary care physician to other health care physicians. Subsection (1)(a) of this section
does not limit a patient's freedom to choose any service or procedure that is considered to
be medical, dental, foot or vision care.

18 SECTION 3. (1) All managed care plans offered by a managed care entity, all health in-19 surance policies and all casualty insurance policies subject to sections 1 to 6 of this 2007 Act 20may require an enrollee or insured person to select a health care physician from the medical care category described in subsection (2) of this section as a primary care physician. 2122Enrollees and insured persons are permitted to change primary care physicians at will, ex-23cept that a managed care plan, health insurance policy or casualty insurance policy may restrict the enrollee or insured person to changing primary care physicians not more than 94 25twice in a 12-month period.

(2) An enrollee or insured person has the right to select a health care physician or pri mary care physician to provide care for covered services in accordance with the following
 medical care categories:

(a) For medical services, a physician or osteopathic physician licensed under ORS chapter
 677, or a chiropractic physician licensed under ORS chapter 684;

(b) For dental care service, a dentist licensed under ORS chapter 679; and

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32 (c) For vision care services, a physician licensed under ORS chapter 677 or an 33 optometrist licensed under ORS chapter 683.

34 <u>SECTION 4.</u> Nothing in sections 1 to 6 of this 2007 Act is intended to alter the scope of 35 practice of any licensed health care physician as that scope may otherwise be established by 36 law.

37 <u>SECTION 5.</u> (1) All individual and group health insurance, and policies providing coverage 38 for hospital, medical or surgical expenses other than coverage limited to specific diseases or 39 other limited benefit coverage, shall include coverage for any clinically necessary health care 40 service that is within the lawful scope of practice of a chiropractic physician licensed under 41 ORS chapter 684, except that health insurers may:

42 (a) Limit coverage of adjunctive therapies to physiotherapy modalities and rehabilitative
 43 exercises;

(b) Deny coverage for the treatment of any visceral condition arising from problems or
 dysfunctions of the abdominal or thoracic organs; or

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1 (c) Impose reasonable deductibles, copayments, coinsurance, fee limits, practice param-2 eters and utilization review to the extent that they are applied to the same services when

3 provided by other health care physicians.

4 (2) Nothing in this section is intended to limit the provision or coverage of health care 5 services that are within the lawful scope of practice of licensed chiropractic physicians who 6 are employees or staff in hospital facilities.

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SECTION 6. Sections 1 to 6 of this 2007 Act do not apply to:

8 (1) Medical services, dental care services or vision care services provided by state med-9 ical assistance programs, student health insurance programs, services provided under ORS 10 chapter 656 or services provided to persons confined in jails, juvenile facilities or correctional 11 institutions; or

(2) Managed care plans offered by managed care entities and health insurance and casu alty insurance policies provided as employee benefits to public employees in Oregon.

14 <u>SECTION 7.</u> The Director of the Department of Consumer and Business Services shall 15 adopt rules necessary to implement and administer sections 1 to 6 of this 2007 Act. The di-16 rector shall establish an advisory committee to assist the director in the development of the 17 rules.

18 <u>SECTION 8.</u> Sections 1 to 6 of this 2007 Act apply to managed care plans and health or 19 casualty insurance policies issued or renewed on or after the effective date of this 2007 Act.

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