

SB 250-A: Protecting and strengthening the Affordable Care Act in Oregon



Results of the Patient Protection and Affordable Care Act

- Sweeping changes to nation's health care system
- 94 percent of Oregonians now have health coverage
- Oregonians with pre-existing conditions are protected

Oregon law and the Affordable Care Act

- Previous bills aligning Oregon law to the ACA
 - SB 89 (2011) – Adopted early ACA reforms into Oregon law
 - HB 2240 (2013) – Aligned Oregon law with ACA reforms effective on Jan. 1, 2014
 - HB 2466 (2015) & HB 2341 (2017) – Conformed insurance code to most recent federal guidance

Affordable Care Act under threat

- Recent federal actions weaken the ACA
 - Reduced funding for marketing and outreach
 - De-funding required cost sharing reductions
 - Federal rules expand association health plans and short-term limited-duration insurance
 - “Zeroing out” the individual mandate penalty
 - Risk adjustment program temporarily suspended
 - U.S. Dept. of Justice concurred with district court decision in Texas that entire ACA is unconstitutional

Why SB 250-A?

- ACA overlays state law, and Oregon statutes do not align with ACA
- Ensures key provisions of ACA are included in Oregon law
- Enables DCBS to effectively regulate health insurance market

SB 250-A key provisions

- Maintains protections for people with pre-existing conditions
- Clarifies that mental health parity requirements apply to individual and group plans
- Includes nondiscrimination requirement for health insurers
- Enables DCBS to run a state-based risk adjustment program, if necessary

SB 250-A key provisions

- Aligns Oregon requirements for small employer plans with proposed changes to health reimbursement arrangements
- Enables DCBS to adopt multiple bronze and silver standard plan designs
- Ensures market equity by charging fee to insurers exempt from providing benefits other insurers must offer
- Re-inserts out-of-state coverage exemption for employer sponsored group health plans