



Access to Primary and Behavioral Healthcare HB 4083 – Representative Rachel Prusak

Passed House Healthcare Committee in 2021 (8-1-1) | In Ways and Means committee upon adjournment

Background:

Many Oregonians encounter barriers when attempting to access primary care or behavioral healthcare. This lack of access results in deferral of needed health services, postponed detection and treatment of disease, and poorer chronic disease management.

Without readily accessible primary care or behavioral healthcare, people utilize urgent care centers and emergency rooms for healthcare services, resulting in fragmented, uncoordinated, and unnecessarily expensive care.

HB 4083 will expand access to preventative care by:

- Requiring insurer reimbursement for three primary care or behavioral healthcare visits annually. These visits will be free for the beneficiary and not subject to copayment, coinsurance, or deductible.
- Prohibiting insurers from denying coverage for behavioral health services provided on the same day or in the same facility as their primary care services.
- Limiting copayments for behavioral health services provided on the same day or in the same facility as their primary care services.
- Prohibiting insurers from requiring prior authorization for specialty behavioral health services.
- Requiring insurers to assign a beneficiary to a primary care provider if they haven't selected one by the 90th day of the plan year. HB 4083 directs the insurer to provide the beneficiary notice of the PCP assignment and allows the beneficiary to select a different primary care provider at any time.

For more information, contact:

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