SENATE AMENDMENTS TO SENATE BILL 491

By COMMITTEE ON HEALTH CARE

March 23

- On page 1 of the printed bill, line 2, after "ORS" insert "646A.628, 731.804 and".
- 2 On page 3, after line 10, insert:
- 3 "(6) Subject to ORS 746.021, this section does not require a health benefit plan offered by an 4 insurer described in ORS 743A.067 (7)(e) to reimburse the cost of:
- 5 "(a) Procedures described in subsection (3)(a)(C), (G), (I), (K) or (L) of this section; or
- 6 "(b) Embryo transfer, cryopreservation or storage procedures described in subsection (3)(a)(A),
- 7 (D), (J) or (O) of this section.".

In line 11, delete "(6)" and insert "(7)".

9 After line 36, insert:

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- "SECTION 4. (1) The Oregon Health Authority shall contract with a third party administrator or a health insurance carrier to provide to enrollees in health benefit plans described in section 2 (6) of this 2023 Act reimbursement for the costs of:
 - "(a) Procedures described in section 2 (3)(a)(C), (G), (I), (K) or (L) of this 2023 Act.
 - "(b) Embryo transfer, cryopreservation or storage procedures described in section 2 (3)(a)(A), (D), (J) or (O) of this 2023 Act.
- "(2) The authority shall establish application processes and procedures for enrollees to access the coverage under subsection (1) of this section.
 - "(3) The authority may adopt rules necessary to carry out the provisions of this section.
- "SECTION 5. The Market Equity Fund is established in the State Treasury, separate and distinct from the General Fund, consisting of fees paid to the Director of the Department of Consumer and Business Services that are described in ORS 731.804 (3)(e). Moneys in the Market Equity Fund are continuously appropriated to the Oregon Health Authority to carry out the provisions of section 4 of this 2023 Act.
 - "SECTION 6. ORS 646A.628 is amended to read:
- "646A.628. Notwithstanding ORS 705.145 (2), (3) and (5), the Director of the Department of Consumer and Business Services can allocate as deemed appropriate the moneys derived pursuant to ORS 86A.095 to 86A.198, 86A.990, 86A.992, 650.005 to 650.100, 697.005 to 697.095, 697.602 to 697.842, 705.350, [and] 717.200 to 717.320 and 731.804 (1) and (2) and ORS chapters 59, 645, 706 to 716, 723, 725 and 726 to implement ORS 646A.600 to 646A.628.
 - "SECTION 7. ORS 731.804 is amended to read:
- "731.804. (1) Except as otherwise provided in this section, each authorized insurer doing business in this state shall pay assessments that the Director of the Department of Consumer and Business Services determines are necessary to support the legislatively authorized budget of the Department of Consumer and Business Services with respect to functions of the department under the Insurance Code. The director shall determine the assessments according to one or more per-

centage rates established by the director by rule. The director shall specify in the rule when assessments shall be made and payments shall be due. The premium-weighted average of the percentage rates may not exceed nine-hundredths of one percent of the gross amount of premiums received by an insurer or the insurer's insurance producers from and under the insurer's policies covering direct domestic risks, after deducting the amount of return premiums paid and the amount of dividend payments made to policyholders with respect to such policies. In the case of reciprocal insurers, the amount of savings paid or credited to the accounts of subscribers shall be deducted from the gross amount of premiums. In establishing the percentage rate or rates, the director shall use the most recent premium data approved by the director. In establishing the amounts to be collected under this subsection, the director shall take into consideration the expenses of the department for administering the Insurance Code and the fees collected under subsection (2) of this section. When the director establishes two or more percentage rates:

- "(a) Each rate shall be based on such expenses of the department ascribed by the director to the line of insurance for which the rate is established.
- "(b) Each rate shall be applied to the gross amount of premium received by an insurer or its insurance producers for the applicable line of insurance as provided in this subsection.
- "(2) The director may collect fees for specific services provided by the department under the Insurance Code according to a schedule of fees established by the director by rule. The director may collect such fees in advance. In establishing the schedule for fees, the director shall take into consideration the cost of each service for which a fee is imposed.
- "(3)(a) Notwithstanding the provisions of ORS 743A.067 (7)(e) and 743A.067 (9), for the purpose of mitigating inequity in the health insurance market, the director may assess a fee on any insurer that offers a health benefit plan, as defined in ORS 743B.005, that is exempt from a provision of ORS chapter 743A or other provision of the Insurance Code that requires specified coverage by health benefit plans.
- "(b) Any fees collected under paragraph (a) of this subsection must be the actuarial equivalent of costs attributed to the provision and administration of the required coverage by an insurer that is not exempt.
- "(c) Nothing in this section limits the authority of the director to enforce the provisions of ORS chapter 743A if an insurer unlawfully fails to comply.
- "(d) [Notwithstanding ORS 646A.628,] Except as provided in paragraph (e) of this subsection, fees paid in accordance with paragraph (a) of this subsection shall be deposited in the General Fund to become available for general governmental expenses.
- "(e) Fees paid under this subsection by insurers for health benefit plans described in section 2 (6) of this 2023 Act shall be deposited in the Market Equity Fund established in section 5 of this 2023 Act.
- "(4) Establishment and amendment of the schedule of fees under subsection (2) of this section are subject to prior approval of the Oregon Department of Administrative Services and a report to the Emergency Board prior to adopting the fees and shall be within the budget authorized by the Legislative Assembly as that budget may be modified by the Emergency Board.
- "(5) The director may not collect an assessment under subsection (1) of this section from any of the following persons:
 - "(a) A fraternal benefit society complying with ORS chapter 748.
 - "(b) Any person or class of persons designated by the director by rule.
- 45 "(6) The director may not collect an assessment under subsection (1) of this section with respect

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to premiums received from any of the following policies:
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         "(a) Workers' compensation insurance policies.
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         "(b) Wet marine and transportation insurance policies.
         "(c) Any category of policies designated by the director by rule.".
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         In line 37, delete "4" and insert "8".
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         On page 7, line 3, delete "5" and insert "9".
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         In line 5, delete "6" and insert "10" and after "ORS" insert "646A.628, 731.804 and" delete
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     "section 4" and insert "sections 6 to 8".
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         In line 7, delete "7" and insert "11".
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         In line 8, delete "8" and insert "12".
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