

Requested by Representative DIEHL

**PROPOSED AMENDMENTS TO  
HOUSE BILL 2002**

1 On page 1 of the printed bill, line 2, after “ORS” insert “12.110,”.

2 On page 10, delete lines 33 through 45.

3 On page 11, delete lines 1 through 27 and insert:

4 **“SECTION 20. (1) As used in this section:**

5 **“(a) ‘Carrier’ has the meaning given that term in ORS 743B.005.**

6 **“(b) ‘Detransition treatment’ means a service provided by a health  
7 care provider to medically reverse a gender-affirming treatment.**

8 **“(c) ‘Gender-affirming treatment’ means a procedure, service, drug,  
9 device or product that a physical or behavioral health care provider  
10 prescribes to treat an individual for incongruence between the  
11 individual’s gender identity and the individual’s sex assignment at  
12 birth.**

13 **“(d) ‘Gender transition treatment’ includes:**

14 **“(A) Detransition treatment; and**

15 **“(B) Gender-affirming treatment.**

16 **“(e) ‘Health benefit plan’ has the meaning given that term in ORS  
17 743B.005.**

18 **“(2) A carrier offering a health benefit plan in this state may not:**

19 **“(a) Deny or limit coverage under the plan for gender transition  
20 treatment that is:**

21 **“(A) Medically necessary as determined by the physical or behav-**

1 **ioral health care provider who prescribes the treatment; and**  
2 **“(B) Prescribed in accordance with accepted standards of care.**  
3 **“(b) Apply categorical cosmetic or blanket exclusions to medically**  
4 **necessary gender transition treatment.**  
5 **“(c) Exclude as a cosmetic service a medically necessary procedure**  
6 **prescribed by a physical or behavioral health care provider as gender-**  
7 **affirming treatment, including but not limited to:**  
8 **“(A) Tracheal shave;**  
9 **“(B) Hair electrolysis;**  
10 **“(C) Facial feminization surgery or other facial gender-affirming**  
11 **treatment;**  
12 **“(D) Revisions to prior forms of gender-affirming treatment; or**  
13 **“(E) Any combination of gender-affirming treatment procedures.**  
14 **“(d) Exclude a medically necessary procedure prescribed by a phys-**  
15 **ical or behavioral health care provider as detransition treatment, in-**  
16 **cluding but not limited to:**  
17 **“(A) Breast reconstruction for an individual who had a bilateral**  
18 **mastectomy;**  
19 **“(B) Breast implant removal for an individual who received a breast**  
20 **implantation;**  
21 **“(C) Electrolysis for an individual suffering from unwanted facial**  
22 **or body hair as a result of taking testosterone;**  
23 **“(D) Physical or occupational therapy;**  
24 **“(E) Fertility services;**  
25 **“(F) Hormone replacement therapy for the purpose of realigning an**  
26 **individual’s gender identity and the individual’s sex assignment at**  
27 **birth if the individual previously underwent a gender-affirming treat-**  
28 **ment procedure that altered the individual’s ability to produce**  
29 **hormones consistent with the individual’s sex assignment at birth;**  
30 **“(G) Behavioral health care for trauma or other mental health im-**

1 **pacts associated with detransition treatment; or**  
2 **“(H) Treatment for chronic pain or disabilities resulting from**  
3 **gender-affirming treatments, including but not limited to:**  
4 **“(i) Pelvic pain;**  
5 **“(ii) Pelvic prolapse;**  
6 **“(iii) Urinary tract infections;**  
7 **“(iv) Incontinence;**  
8 **“(v) Vaginal atrophy;**  
9 **“(vi) Premature menopause;**  
10 **“(vii) Surgical scar pain;**  
11 **“(viii) Sexual dysfunction;**  
12 **“(ix) Complications from surgeries, including hysterectomy,**  
13 **orchiectomy, penectomy, vaginoplasty, phalloplasty and**  
14 **oophorectomy; and**  
15 **“(x) Osteoporosis, osteopenia or osteoarthritic conditions following**  
16 **treatment with hormones known to adversely affect bone develop-**  
17 **ment.**  
18 **“(e) Issue an adverse benefit determination denying or limiting ac-**  
19 **cess to gender transition treatment unless a physical or behavioral**  
20 **health care provider with applicable experience prescribing or deliver-**  
21 **ing the gender transition treatment requested has first reviewed and**  
22 **approved the denial of or the limitation on access to the treatment.**  
23 **“(3) A carrier described in subsection (2) of this section must:**  
24 **“(a) Satisfy any network adequacy standards under ORS 743B.505**  
25 **related to gender transition treatment providers; and**  
26 **“(b)(A) Contract with a network of gender transition treatment**  
27 **providers that is sufficient in numbers and geographic locations to**  
28 **ensure that gender transition treatment services are accessible to all**  
29 **enrollees without unreasonable delay; or**  
30 **“(B) Ensure that all enrollees have geographical access without**

1 unreasonable delay to out-of-network gender transition treatment  
2 services with cost-sharing or other out-of-pocket costs for the services  
3 no greater than the cost-sharing or other out-of-pocket costs for the  
4 services when furnished by an in-network provider.

5 “(4) The Department of Consumer and Business Services shall  
6 evaluate compliance with this section in each examination or analysis  
7 of the market conduct of a carrier under ORS 731.300.

8 “(5) This section is exempt from ORS 743A.001.”.

9 On page 11, delete lines 37 through 45.

10 On page 12, delete lines 1 through 25 and insert:

11 **“SECTION 24. (1) As used in this section:**

12 **“(a) ‘Detransition treatment’ means a service provided by a health**  
13 **care provider to medically reverse a gender-affirming treatment.**

14 **“(b) ‘Gender-affirming treatment’ means a procedure, service, drug,**  
15 **device or product that a physical or behavioral health care provider**  
16 **prescribes to treat an individual for incongruence between the**  
17 **individual’s gender identity and the individual’s sex assignment at**  
18 **birth.**

19 **“(c) ‘Gender transition treatment’ includes:**

20 **“(A) Detransition treatment; and**

21 **“(B) Gender-affirming treatment.**

22 **“(2) Notwithstanding ORS 414.065 and 414.690, medical assistance**  
23 **provided to a member of a coordinated care organization or a medical**  
24 **assistance recipient who is not enrolled in a coordinated care organ-**  
25 **ization shall include gender transition treatment.**

26 **“(3) The Oregon Health Authority or a coordinated care organiza-**  
27 **tion may not:**

28 **“(a) Deny or limit gender transition treatment that is:**

29 **“(A) Medically necessary as determined by the physical or behav-**  
30 **ioral health care provider who prescribes the treatment; and**

1       **“(B) Prescribed in accordance with accepted standards of care.**  
2       **“(b) Deny as a cosmetic service a medically necessary procedure**  
3 **prescribed by a physical or behavioral health care provider as gender-**  
4 **affirming treatment, including but not limited to:**  
5       **“(A) Tracheal shave;**  
6       **“(B) Hair electrolysis;**  
7       **“(C) Facial feminization surgery or other facial gender-affirming**  
8 **treatment;**  
9       **“(D) Revisions to prior forms of gender-affirming treatment; or**  
10       **“(E) Any combination of gender-affirming treatment procedures.**  
11       **“(c) Deny a medically necessary procedure prescribed by a physical**  
12 **or behavioral health care provider as detransition treatment, including**  
13 **but not limited to:**  
14       **“(A) Breast reconstruction for an individual who had a bilateral**  
15 **mastectomy;**  
16       **“(B) Breast implant removal for an individual who received a breast**  
17 **implantation;**  
18       **“(C) Electrolysis for an individual suffering from unwanted facial**  
19 **or body hair as a result of taking testosterone;**  
20       **“(D) Physical or occupational therapy;**  
21       **“(E) Fertility services;**  
22       **“(F) Hormone replacement therapy for the purpose of realigning an**  
23 **individual’s gender identity and the individual’s sex assignment at**  
24 **birth if the individual previously underwent a gender-affirming treat-**  
25 **ment procedure that altered the individual’s ability to produce**  
26 **hormones consistent with the individual’s sex assignment at birth;**  
27       **“(G) Behavioral health care for trauma or other mental health im-**  
28 **pacts associated with detransition treatment; or**  
29       **“(H) Treatment for chronic pain or disabilities resulting from**  
30 **gender-affirming treatments, including but not limited to:**

1       **“(i) Pelvic pain;**  
2       **“(ii) Pelvic prolapse;**  
3       **“(iii) Urinary tract infections;**  
4       **“(iv) Incontinence;**  
5       **“(v) Vaginal atrophy;**  
6       **“(vi) Premature menopause;**  
7       **“(vii) Surgical scar pain;**  
8       **“(viii) Sexual dysfunction;**  
9       **“(ix) Complications from surgeries, including hysterectomy,**  
10      **orchiectomy, penectomy, vaginoplasty, phalloplasty and**  
11      **oophorectomy; and**  
12      **“(x) Osteoporosis, osteopenia or osteoarthritic conditions following**  
13      **treatment with hormones known to adversely affect bone develop-**  
14      **ment.**  
15      **“(d) Deny or limit gender transition treatment unless a physical or**  
16      **behavioral health care provider with applicable experience prescribing**  
17      **or delivering the gender transition treatment requested has first re-**  
18      **viewed and approved the denial of or the limitation on the treatment.**  
19      **“(4) A coordinated care organization must:**  
20      **“(a) Contract with a network of gender transition treatment pro-**  
21      **viders that is sufficient in numbers and geographic locations to meet**  
22      **the network adequacy standards prescribed by ORS 414.609 (1); and**  
23      **“(b)(A) Ensure that gender transition treatment services are ac-**  
24      **cessible to all of the coordinated care organization’s members without**  
25      **unreasonable delay; or**  
26      **“(B) Ensure that all members have geographical access to non-**  
27      **contracting providers of gender transition treatment services without**  
28      **unreasonable delay.**  
29      **“(5) The authority shall monitor coordinated care organization**  
30      **compliance with the requirements of this section and may adopt rules**

1 **necessary to carry out the provisions of this section.”.**

2 On page 20, after line 10, insert:

3  
4 **“(Statute of Limitations)**

5  
6 **“SECTION 38a.** ORS 12.110 is amended to read:

7 “12.110. (1) An action for assault, battery, false imprisonment, or for any  
8 injury to the person or rights of another, not arising on contract, and not  
9 especially enumerated in this chapter, shall be commenced within two years;  
10 provided, that in an action at law based upon fraud or deceit, the limitation  
11 shall be deemed to commence only from the discovery of the fraud or deceit.

12 “(2) An action upon a statute for a forfeiture or penalty to the state or  
13 county shall be commenced within two years.

14 “(3) An action for overtime or premium pay or for penalties or liquidated  
15 damages for failure to pay overtime or premium pay shall be commenced  
16 within two years.

17 “(4)(a) **Except as provided in paragraph (b) of this subsection,** an  
18 action to recover damages for injuries to the person arising from any med-  
19 ical, surgical or dental treatment, omission or operation shall be commenced  
20 within two years from the date when the injury is first discovered or in the  
21 exercise of reasonable care should have been discovered.

22 “(b)(A) [*However,*] Notwithstanding the provisions of ORS 12.160, **and**  
23 **except as provided in subparagraph (B) of this paragraph,** every [*such*  
24 *action*] **action to recover damages for injuries to the person arising**  
25 **from any medical, surgical or dental treatment, omission or operation**  
26 shall be commenced within five years from the date of the treatment, omis-  
27 sion or operation upon which the action is based or, if there has been no  
28 action commenced within five years because of fraud, deceit or misleading  
29 representation, then within two years from the date such fraud, deceit or  
30 misleading representation is discovered or in the exercise of reasonable care

1 should have been discovered.

2 **“(B) Notwithstanding the provisions of ORS 12.160, an action to re-**  
3 **cover damages for injuries caused by a gender-affirming health care**  
4 **service or an omission related to a gender-affirming health care ser-**  
5 **vice shall be commenced within 10 years from the date of the service**  
6 **or omission upon which the action is based or, if there has been no**  
7 **action commenced within 10 years because of fraud, deceit or mis-**  
8 **leading representation, then within two years from the date such**  
9 **fraud, deceit or misleading representation is discovered or in the ex-**  
10 **ercise of reasonable care should have been discovered.**

11 **“(5) An action, arising from a nuclear incident, as defined in 42 U.S.C.**  
12 **2014(q), that involves the release of radioactive material, excluding releases**  
13 **from acts of war, that causes bodily injury, sickness or death, shall be com-**  
14 **menced:**

15 **“(a) Within two years from the time an injured person discovers or rea-**  
16 **sonably could have discovered the injury and the causal connection between**  
17 **the injury and the nuclear incident; or**

18 **“(b) Within two years from any substantial change in the degree of injury**  
19 **to the person arising out of a nuclear incident.”.**

20 On page 37, after line 17, insert:

21

22 **“DETRANSITIONER ADVISORY COMMITTEE**

23

24 **“SECTION 47. (1) The Oregon Health Authority shall establish a**  
25 **Detransitioner Advisory Committee to advise the authority with re-**  
26 **spect to gender transitioning and detransitioning health care services.**  
27 **The advisory committee shall consist of at least nine members ap-**  
28 **pointed by the authority. The members must include one individual**  
29 **who is a transitioned male, one individual who is a transitioned fe-**  
30 **male, two physicians, one of whom must specialize in endocrinology**



1 and have experience providing detransitioner care, one psychologist  
2 experienced in detransitioner care, one pediatrician, a licensed pro-  
3 fessional counselor who has experience providing detransitioner care  
4 and two members of the public.

5 “(2) The advisory committee shall develop, and may revise as nec-  
6 essary, an informed consent document that explains the health and  
7 medical risks of gender transitioning and detransitioning. The in-  
8 formed consent document must be provided to a patient who is seeking  
9 a gender-affirming health care service. The authority may collaborate  
10 as necessary with a health professional regulatory board that regulates  
11 a health care provider who provides gender-affirming health care ser-  
12 vices to carry out this subsection.”.

13 In line 21, delete “47” and insert “48”.

14 In line 33, delete “48” and insert “49”.

15 On page 38, delete lines 29 through 45 and delete page 39 and insert:

16 **“SECTION 50. ORS 109.610, 109.660, 167.820, 435.200 and 435.435 are**  
17 **repealed.**

18 **“SECTION 51. (1) Section 18 of this 2023 Act is repealed on January**  
19 **2, 2026.**

20 **“(2) Section 29 of this 2023 Act is repealed on January 2, 2026.**

21

22 **“APPROPRIATIONS**

23

24 **“SECTION 52. In addition to and not in lieu of any other appropri-**  
25 **ation, there is appropriated to the Office of Rural Health, for the**  
26 **biennium beginning July 1, 2023, out of the General Fund, the amount**  
27 **of \$\_\_\_\_\_, which may be expended for carrying out section 29 of this**  
28 **2023 Act.**

29

30 **“MISCELLANEOUS**

1       **“SECTION 53. (1) Section 20 of this 2023 Act applies to health ben-**  
2 **efit plans issued, renewed or extended on or after January 1, 2024.**

3       **“(2) Section 24 of this 2023 Act applies to medical assistance pro-**  
4 **vided and to contracts with coordinated care organizations for periods**  
5 **beginning on or after January 1, 2024.**

6       **“(3) The amendments to ORS 243.144 and 243.877 by sections 25 and**  
7 **26 of this 2023 Act apply to health benefit plans offered by the Public**  
8 **Employees’ Benefit Board or the Oregon Educators Benefit Board that**  
9 **are issued, renewed or extended on or after January 1, 2024, and for**  
10 **self-insured health benefit plans in effect for periods beginning on or**  
11 **after January 1, 2024.**

12       **“(4) Sections 31 and 35 of this 2023 Act and the amendments to ORS**  
13 **677.190, 677.225, 677.320, 678.111, 685.110 and 689.405 by sections 32, 33,**  
14 **36 to 38 and 48 of this 2023 Act apply to reproductive and gender-**  
15 **affirming health care services provided on or after the effective date**  
16 **of this 2023 Act.**

17       **“(5) The amendments to ORS 12.110 by section 38a of this 2023 Act**  
18 **apply to causes of action arising on or after the effective date of this**  
19 **2023 Act.**

20       **“(6) The repeal of ORS 167.820 by section 50 of this 2023 Act and the**  
21 **amendments to ORS 161.005 by section 48 of this 2023 Act apply to acts**  
22 **committed on or after the effective date of this 2023 Act.**

23       **“SECTION 54. The unit captions used in this 2023 Act are provided**  
24 **only for the convenience of the reader and do not become part of the**  
25 **statutory law of this state or express any legislative intent in the**  
26 **enactment of this 2023 Act.**

27       **“SECTION 55. Section 14 of this 2023 Act becomes operative on**  
28 **January 1, 2026.**

29       **“SECTION 56. This 2023 Act being necessary for the immediate**  
30 **preservation of the public peace, health and safety, an emergency is**

1 **declared to exist, and this 2023 Act takes effect on its passage.”.**

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