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HOUSE COMMITTEE ON BEHAVIORAL HEALTH AND HEALTH CARE

Oregon State Capitol
900 Court Street NE, Room 453, Salem, Oregon 97301
Phone: 503-986-1509
Email: hbhbc.exhibits@oregonlegislature.gov

AGENDA

Posted: FEB 03 09:59 AM

TUESDAY

Date: February 11, 2025
Time: 3:00 PM
Room: HR C

Please note: This meeting is scheduled from 3:00-6:30 pm

Public Hearing

HB 2292

Requires health benefit plans and medical assistance managed plans to provide coverage with no cost-sharing for additional treatment for human immunodeficiency virus and prohibits requiring prior authorization.

HB 2536

Prohibits health benefit plans from requiring step therapy prior to covering a prescription drug for the treatment of metastatic cancer and associated conditions.

HB 2959 **

**Subsequent Referral(s) to Ways and Means

Requires health insurance coverage of specified fertility services and treatments with exemption for certain insurers.

HB 3064 **

**Subsequent Referral(s) to Ways and Means

Requires certain health insurers, the Oregon Educators Benefit Board and the Public Employees' Benefit Board to cover treatment for perimenopause, menopause and postmenopause.

HB 2023

Establishes certain health insurance coverage for applied behavior analysis therapy for certain intellectual and developmental disability diagnoses with the same requirements for coverage as autism spectrum disorder diagnoses.

HB 2013

Includes outpatient facilities that employ certified alcohol and drug counselors as providers for the purposes of mental health treatment insurance coverage.

HB 2041

Requires insurers to reimburse mental health professionals at the same rate as physicians and other mental health professionals for the same services.

HB 3439

Requires individual and group health benefit plans and benefit plans offered by the Public Employees' Benefit Board and the Oregon Educators Benefit Board to reimburse services

AGENDA (cont.) February 11, 2025

provided by naturopathic physicians within the scope of their practice if the services are reimbursed when provided by licensed physicians, physician associates or nurse practitioners.

HB 2943 ** **Subsequent Referral(s) to Ways and Means
Directs a hospital to conduct HIV and syphilis screening when an individual undergoes a blood test or analysis as part of medical care received within an emergency department, unless the individual declines a test.

HB 3242
Requires health insurers to pay providers who are joining an in-network practice the same as in-network providers during the credentialing period.

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