# SB 824 -2 STAFF MEASURE SUMMARY

# **Senate Committee On Health Care**

**Prepared By:** Daniel Dietz, LPRO Analyst

**Sub-Referral To:** Joint Committee On Ways and Means

Meeting Dates: 4/3, 4/8

# WHAT THE MEASURE DOES:

The measure requires the Department of Consumer and Business Services shall study federal laws and regulations affecting health insurance.

Fiscal impact: Fiscal impact issued Revenue impact: No revenue impact

### **ISSUES DISCUSSED:**

### **EFFECT OF AMENDMENT:**

- -2 Replaces the measure. Requires insurance carriers, to report annually to the Department of Consumer and Business Services (DCBS):
- The number of denials of benefits, the percentage of denials that were appealed, and the percentages of appeals upheld and denied.
- The maximum allowable reimbursement rate for office visits in each geographic region, as a percentage of the Medicare rate.
- Rates for office visits by different provider types, including specified medical and behavioral health providers.

Makes confidential all documents provided to the Department of Consumer and Business Services, pursuant to the measure, and not subject to public disclosure.

#### **BACKGROUND:**

According to the Centers for Medicare and Medicaid Services, the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) is a federal law that generally prevents group health plans and health insurance issuers that provide mental health or substance use disorder benefits from imposing less favorable benefit limitations on those benefits than on medical/surgical benefits. Oregon requires insurance carriers to conduct an annual analysis of processes, strategies, and specific evidentiary standards used to approve behavioral health benefits, with an annual report to the Department of Consumer and Business Services.

Senate Bill 824 requires insurance carriers in Oregon to report on denials of benefits and on reimbursement rates paid for office visits in different geographic regions in the state.