

SB 824 A STAFF MEASURE SUMMARY

Joint Committee On Ways and Means

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Meeting Dates: 5/28

WHAT THE MEASURE DOES:

The measure requires insurance carriers to report annually to the Department of Consumer and Business Services (DCBS) on rates and denials for medical and behavioral health claims.

Detailed summary:

Requires annual reports to include

- 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 DCBS, pursuant to the measure, and not subject to public disclosure.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

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 A 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.