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То:	Human Services Subcommittee
From:	MaryMichelle Sosne, Legislative Fiscal Office
Date:	May 28, 2025
Subject:	SB 824 – Relating to health insurance Work Session Recommendations

The measure requires health benefit plans to include additional data in their annual report to the Department of Consumer and Business Services. The additional information includes:

- The number of denials for medical, surgical, and behavioral health benefits; the percentage of denials appealed; and the percentage of denials upheld.
- The percentage of payments for medical, surgical, and behavioral health benefits made to in-network providers and the percentage paid to out-of-network providers.
- The median maximum reimbursement rate for each time-based office visit billing code, broken down by behavioral health provider type and medical provider type.
- The reimbursement rate for time-based office visits in each geographic region, and the percentage of the Medicare rate the reimbursement rate represents paid to behavioral health providers, physicians, physician associates, and licensed nurse practitioners.
- The specific findings and conclusions of the carrier demonstrating compliance with Oregon statutes relating to behavioral health treatment and the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008.

The measure is expected to have a minimal but absorbable fiscal impact on the Department of Consumer and Business Services.

Final Subcommittee Action

LFO recommends that SB 824 be moved to the Ways and Means Full Committee.

MOTION: I move SB 824 to the Full Committee with a do pass recommendation. (vote)

Carriers

