

# House Bill 2292

Sponsored by Representative GRAYBER; Representatives MCDONALD, NELSON, PHAM H, Senator PHAM K  
(Presession filed.)

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: Tells some health insurers and Medicaid plans to cover more drugs and treatment for HIV. (Flesch Readability Score: 73.1).

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.

## A BILL FOR AN ACT

1  
2 Relating to treatment of human immunodeficiency virus; creating new provisions; and amending ORS  
3 743B.425.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1. Section 2 of this 2025 Act is added to and made a part of the Insurance Code.**

6 **SECTION 2. (1) An insurer that offers a health benefit plan, as defined in ORS 743B.005,**  
7 **that reimburses the cost of counseling, prevention services or screening for sexually trans-**  
8 **mitted infections, shall provide coverage for human immunodeficiency virus prevention drugs**  
9 **and services necessary for the commencement and continuation of human immunodeficiency**  
10 **virus prevention drugs, including but not limited to office visits, testing, vaccinations and**  
11 **monitoring services.**

12 **(2) The coverage must be provided without any cost-sharing, coinsurance or deductible**  
13 **applicable to the services.**

14 **(3) This section is exempt from ORS 743A.001.**

15 **SECTION 3. ORS 743B.425 is amended to read:**

16 743B.425. (1) An insurer offering a health benefit plan as defined in ORS 743B.005 may not:

17 (a) Require prior authorization:

18 (A) During the first 60 days of treatment, including medication therapy, prescribed for opioid  
19 or opiate withdrawal; or

20 (B) For post-exposure prophylactic antiretroviral drugs **or therapies** or [*at least one*] preexpo-  
21 sure prophylactic antiretroviral [*drug*] **drugs**;

22 (b) Restrict the reimbursement for medication therapies, preexposure prophylactic antiretroviral  
23 drugs or post-exposure prophylactic antiretroviral drugs to in-network pharmacists or pharmacies;  
24 or

25 (c) Subject to ORS 742.008, require a deductible, copayment, coinsurance or other cost-sharing,  
26 **or impose an annual or lifetime benefit limit** for the coverage of human immunodeficiency virus  
27 post-exposure prophylactic drugs or therapies prescribed following a possible exposure to human  
28 immunodeficiency virus.

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted.  
New sections are in **boldfaced** type.

1 (2) This section is not subject to ORS 743A.001.

2 (3) This section does not prohibit prior authorization for opioids or opiates prescribed for pur-  
3 poses other than medication therapy or treatment of opioid or opiate abuse or addiction.

4 (4) Subsection (1)(b) of this section does not apply to a health maintenance organization as de-  
5 fined in ORS 750.005.

6 **SECTION 4. Section 5 of this 2025 Act is added to and made a part of ORS chapter 414.**

7 **SECTION 5. (1) As used in this section:**

8 (a) “Prior authorization” has the meaning given that term in ORS 743B.001.

9 (b) “Step therapy” has the meaning given that term in ORS 743B.001.

10 (2) **Notwithstanding ORS 414.325, the Oregon Health Authority and a coordinated care**  
11 **organization may not require prior authorization or step therapy for drugs prescribed for a**  
12 **medical assistance recipient for the treatment or prevention of human immunodeficiency**  
13 **virus if:**

14 (a) **The drug has been approved by the United States Food and Drug Administration for**  
15 **the treatment or prevention of human immunodeficiency virus; and**

16 (b) **The prescribing provider has determined that the drug is medically necessary.**

17 (3) **Nothing in this section prevents the authority from performing drug utilization review**  
18 **that may be necessary for patient safety or for ensuring the prescribed drug is medically**  
19 **accepted as required by section 1927 of the Social Security Act of 1935 (42 U.S.C. 1396r-8).**

20 **SECTION 6. Section 2 of this 2025 Act and the amendments to ORS 743B.425 by section**  
21 **3 of this 2025 Act apply to health benefit plans offered, renewed or extended on or after the**  
22 **effective date of this 2025 Act.**

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