## House Bill 2540

Sponsored by Representative DIEHL (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: Makes certain health insurers credit certain costs to an enrollee's health plan. (Flesch Readability Score: 60.7).

Requires certain health insurers to credit any amount an enrollee pays directly to a provider toward out-of-pocket costs and deductibles in certain circumstances.

1	A BILL	FOR	AN	ACT

- 2 Relating to medical out-of-pocket costs.
- 3 Be It Enacted by the People of the State of Oregon:
  - SECTION 1. Section 2 of this 2025 Act is added to and made a part of ORS 743B.280 to 743B.285.
  - SECTION 2. (1) An insurer offering a health benefit plan as defined in ORS 743B.005 shall credit any amount an enrollee pays directly to a health care provider to the enrollee's deductible and annual out-of-pocket expenses if:
  - (a) The health care item or service is medically necessary and covered under the enrollee's health benefit plan;
    - (b) The enrollee does not submit the claim to the insurer; and
  - (c) The amount paid to the health care provider is less than the average discounted rate for the item or service paid to an in-network health care provider with the same license.
  - (2) An insurer shall establish a process for an enrollee to submit a claim for the credit described in subsection (1) of this section, including the necessary documentation the enrollee is required to submit in support of the claim.
  - SECTION 3. Section 2 of this 2025 Act applies to a health benefit plan issued, renewed or extended on or after the effective date of this 2025 Act.

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