

HB 2564-1  
(LC 368)  
2/17/25 (EKJ/ps)

Requested by HOUSE COMMITTEE ON BEHAVIORAL HEALTH AND HEALTH CARE (at the request of Department of Consumer and Business Services)

**PROPOSED AMENDMENTS TO  
HOUSE BILL 2564**

1 On page 2 of the printed bill, delete lines 23 through 45 and delete pages  
2 3 and 4 and insert:

3 “**SECTION 2.** ORS 743.019 is amended to read:

4 “743.019. (1) When an insurer files a schedule or table of premium rates  
5 for individual or small employer health benefit plans under ORS 743.018, the  
6 Department of Consumer and Business Services shall open a 30-day public  
7 comment period on the rate filing that begins on the date the insurer files  
8 the schedule or table of premium rates. The department shall post all of the  
9 comments received to the department’s website without delay.

10 “(2) After the close of the public comment period described in subsection  
11 (1) of this section, the department shall issue a [*preliminary decision*] **pro-**  
12 **posed order** to approve, disapprove or modify a rate filing. The department  
13 shall notify the insurer of, and make available to the public, the [*preliminary*  
14 *decision*] **proposed order**, including:

15 “(a) An explanation of the findings and rationale that are the basis for  
16 the [*preliminary decision*] **proposed order**; and

17 “(b) Any actuarial or other analyses, calculations or evaluations relied  
18 upon by the department in arriving at the [*preliminary decision*] **proposed**  
19 **order**.

20 “(3) The department shall provide the insurer or any person adversely  
21 affected or aggrieved by the [*preliminary decision*] **proposed order** the op-

1 portunity to meet with the department to discuss and respond to the [*pre-*  
2 *liminary decision*] **proposed order**. However, an insurer or other person may  
3 not substitute new facts or data for the facts or data submitted by the  
4 insurer in the filing. The meeting shall:

5 “(a) Include a department employee who reviewed the rate filing; and

6 “(b) Comply with the requirements of ORS 192.610 to 192.705.

7 “(4)(a) The department shall issue a [*proposed*] **final** order, no later than  
8 30 days after the department issues a [*preliminary decision*] **proposed order**  
9 under subsection (2) of this section, to approve, disapprove or modify the rate  
10 filing based on the [*information submitted during the public comment period*]  
11 **meeting held under subsection (3) of this section.**

12 “(b) In issuing the [*proposed*] **final** order, the department may not con-  
13 sider new facts or data that are offered as a substitute for the facts or data  
14 submitted by the insurer in the filing.

15 “(c) The department shall mail the [*proposed*] **final** order to the insurer  
16 and post the [*proposed*] **final** order to the department’s website.

17 “(d) The [*proposed*] **final** order must include:

18 “(A) An explanation of the findings and rationale that are the basis for  
19 the [*proposed*] **final** order, including any actuarial or other analyses, calcu-  
20 lations or evaluations relied upon by the department in its findings or ra-  
21 tionale; and

22 “(B) Notice of the right of the insurer or any person adversely affected  
23 or aggrieved by the [*proposed*] **final** order to [*request a review by*] **petition**  
24 the Director of the Department of Consumer and Business Services **for re-**  
25 **consideration**, in accordance with subsection [(6)] **(5)** of this section, no  
26 later than 10 days after the date that the [*proposed*] **final** order was issued.

27 “[*(5) If the insurer or person adversely affected or aggrieved by the proposed*  
28 *order does not timely request a review of the proposed order by the director,*  
29 *the director shall issue a final order as described in subsection (6)(d) of this*  
30 *section.*]

1        “[~~(6)~~] **(5)** If the insurer or a person adversely affected or aggrieved by the  
2 *[proposed]* **final** order timely *[requests a review by the director of the*  
3 *proposed]* **petitions the director to reconsider the final** order:

4        “(a) The requester may not substitute new facts or data for the facts and  
5 data that were submitted by the insurer in the filing, but may provide a  
6 brief, memorandum or analysis based on the evidence contained in the filing  
7 or received and considered by the department during the public comment  
8 period;

9        “(b) The director may not delegate the decision-making authority for the  
10 request for review to any other individual;

11        “(c) The director shall issue a final order **upon reconsideration** no later  
12 than 30 days after the *[request for review]* **petition for reconsideration** is  
13 received by the director; and

14        “(d) The final order **upon reconsideration** shall *[include]*:

15        “(A) **Include** an explanation of the findings and rationale that are the  
16 basis for the final order; and

17        “(B) *[Notice of the right to a contested case hearing in accordance with*  
18 *ORS chapter 183]* **Be mailed to the insurer and posted on the**  
19 **department’s website.**

20        “[~~(7)(a)~~] **(6)(a)** If, following the issuance of a final order **or final order**  
21 **upon reconsideration** under subsection [~~(6)(c)~~] **(4) or (5)** of this section but  
22 before the effective date of the premium rates approved by the final order,  
23 an event occurs that materially affects the director’s decision to approve the  
24 rates, the director may open a new public comment period for a period of  
25 time that the director determines is necessary to receive comments concern-  
26 ing the event. Based upon the event and the public comments received, the  
27 director shall affirm the final order **or final order upon reconsideration**  
28 by providing a written explanation of the basis for affirming the final order  
29 **or final order upon reconsideration** or issue a new proposed order, as de-  
30 scribed in subsection [~~(4)~~] **(2)** of this section.

1       “(b) In the consideration of public comments or the event described in  
2 paragraph (a) of this subsection or in issuing any new proposed order, the  
3 director:

4       “(A) May not consider new facts or data that are offered as a substitute  
5 for the facts or data submitted by the insurer in the original filing.

6       “(B) May consider supplemental facts or data reasonably related to the  
7 event described in paragraph (a) of this subsection.

8       “**(7) A final order or final order upon reconsideration issued pursu-**  
9 **ant to this section is subject to review under ORS 183.484.**

10       “(8) Subsections (2) to [(7)] **(6)** of this section do not require the depart-  
11 ment to perform any actuarial or other analyses, calculations or evaluations.

12       “(9) The department may adopt rules modifying the procedures described  
13 in subsections (2) to [(7)] **(6)** of this section, but only to the extent necessary  
14 to comply with 42 U.S.C. 300gg-94.”.

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