

HB 3086-2  
(LC 3436)  
3/31/25 (EKJ/ps)

Requested by Representative LEVY E

**PROPOSED AMENDMENTS TO  
HOUSE BILL 3086**

On page 1 of the printed bill, line 2, after “243.144” insert “and section 2, chapter 35, Oregon Laws 2024”.

On page 2, delete lines 10 through 13 and insert:

**“SECTION 3.** Section 2, chapter 35, Oregon Laws 2024, is amended to read:

“(1) As used in this section:

“(a)(A) ‘Generic equivalent’ means a drug that meets applicable standards of strength, quality and purity according to the United States Pharmacopeia or other nationally recognized compendium and that, compared to a brand name drug:

“(i) Has an identical amount of the same active chemical ingredients and the same dosage form; and

“(ii) If administered in the same amounts, will provide comparable therapeutic effects.

“(B) ‘Generic equivalent’ does not include a drug that is listed by the United States Food and Drug Administration as having unresolved bioequivalence concerns according to the administration’s most recent publication of approved drug products with therapeutic equivalence evaluations.

“(b)(A) ‘Health plan’ means:

“(i) An individual or group health benefit plan, as defined in ORS 743B.005;

1 “(ii) A plan providing coverage for a specific disease or condition only;

2 “(iii) A medical services contract; or

3 “(iv) Another similar certificate, policy, contract or arrangement or any  
4 endorsement or rider that covers all or a portion of the cost of an  
5 individual’s health care and that is subject to regulation by the Department  
6 of Consumer and Business Services.

7 “(B) ‘Health plan’ does not include coverages provided by:

8 “(i) Medicare;

9 “(ii) The state medical assistance program;

10 “(iii) The federal government to federal employees;

11 “(iv) TRICARE;

12 “(v) Workers’ compensation;

13 “(vi) Limited benefit coverage;

14 “(vii) Accident only, credit, disability or long term care insurance; or

15 “(viii) A health benefit plan offered by [*the Public Employees’ Benefit*  
16 *Board or*] the Oregon Educators Benefit Board through a commercial insurer,  
17 health care service contractor or a third party administrator.

18 “(c) ‘High deductible health plan’ means a health plan described in 26  
19 U.S.C. 223.

20 “(d) ‘Person’ includes:

21 “(A) An individual;

22 “(B) A trust;

23 “(C) An estate;

24 “(D) A partnership;

25 “(E) A corporation;

26 “(F) An association;

27 “(G) A joint stock company;

28 “(H) An insurance company;

29 “(I) A state;

30 “(J) A political subdivision, instrumentality or municipal corporation of

1 a state; or

2 “(K) A nonprofit organization.

3 “(e) ‘Pharmacy benefit manager’ means a pharmacy benefit manager, as  
4 defined in ORS 735.530, that manages pharmacy benefits for a health plan.

5 “(f) ‘Preventive services’ has the meaning given that term in 42 U.S.C.  
6 1395x.

7 “(2) To the extent permitted by federal law, an insurer offering a health  
8 plan that provides pharmacy benefits and a pharmacy benefit manager shall  
9 include all amounts paid by an enrollee or paid by another person on behalf  
10 of an enrollee toward the cost of a covered prescription drug when calcu-  
11 lating the enrollee’s contribution to an out-of-pocket maximum, deductible,  
12 copayment, coinsurance or other cost-sharing requirement applied to the  
13 drug if:

14 “(a) The drug does not have a generic equivalent; or

15 “(b) The drug has a generic equivalent and the enrollee has:

16 “(A) Obtained prior authorization from the insurer or pharmacy benefit  
17 manager;

18 “(B) Complied with a step therapy protocol; or

19 “(C) Received approval from the insurer or pharmacy benefit manager  
20 through the insurer’s or the pharmacy benefit manager’s exceptions, appeal  
21 or review process.

22 “(3) For high deductible health plans, the provisions of subsection (2) of  
23 this section apply only to preventive services until the enrollee has satisfied  
24 the minimum deductible under 26 U.S.C. 223(c)(2).

25 **“SECTION 4. The amendments to ORS 243.144 and section 2, chapter**  
26 **35, Oregon Laws 2024, by sections 1 to 3 of this 2025 Act apply to benefit**  
27 **plans issued, renewed or extended on or after January 1, 2026.**

28 **“SECTION 5. This 2025 Act takes effect on the 91st day after the**  
29 **date on which the 2025 regular session of the Eighty-third Legislative**  
30 **Assembly adjourns sine die.”.**

