

## HOUSE AMENDMENTS TO HOUSE BILL 4155

By COMMITTEE ON HEALTH CARE

February 17

1       On page 1 of the printed bill, line 2, after "provisions;" delete the rest of the line and delete line  
2 and insert "and amending ORS 731.292, 731.804 and 743B.005.".

3       On page 2, delete lines 7 through 12 and insert:  
4       "(3) The coverage required by subsection (2) of this section:  
5       "(a) Includes, but is not limited to:  
6       "(A) A minimum of three completed oocyte retrievals with unlimited embryo transfers in ac-  
7 cordance with guidelines of the American Society for Reproductive Medicine, or a successor or-  
8 ganization, using single embryo transfer if recommended by a licensed treating practitioner and  
9 medically effective.  
10      "(B) Six completed egg retrievals per lifetime, with unlimited embryo transfers in accordance  
11 with the guidelines of the American Society for Reproductive Medicine, using single embryo transfer  
12 when recommended and medically appropriate.  
13      "(C) Assisted hatching.  
14      "(D) Cryopreservation and thawing of embryos.  
15      "(E) Embryo biopsy.  
16      "(F) Fresh and frozen embryo transfers.  
17      "(G) Storage of embryos.  
18      "(H) In vitro fertilization, including in vitro fertilization using donor eggs, sperm or embryos,  
19 and in vitro fertilization in which the embryo is transferred to a gestational carrier or surrogate.  
20      "(I) Intracytoplasmic sperm injection.  
21      "(J) Storage of oocytes, sperm and tissue.  
22      "(K) Intrauterine insemination.  
23      "(L) Cryopreservation of ovarian tissue.  
24      "(M) Cryopreservation of testicular tissue.  
25      "(N) Cryopreservation and thawing of eggs and sperm.  
26      "(O) Consultation and diagnostic testing.  
27      "(P) Medications.  
28      "(Q) Ovulation induction.  
29      "(R) Surgery, including microsurgical sperm aspiration.  
30      "(S) Medical and laboratory services that reduce excess embryo creation through egg  
31 cryopreservation and thawing.".  
32      After line 26, insert:  
33      "(6) This section does not require a health benefit plan offered by an insurer described in ORS  
34 743A.067 (7)(e) to reimburse the cost of:  
35       "(a) Embryo transfer procedures as part of the coverages described in subsection (3)(a)(A) and

1 (B) of this section; and

2       “(b) Procedures described in subsection (3)(a)(C) to (I) of this section.

3       “(7) The coverage requirements described in this section do not apply to health benefit plans  
4 offered by the Oregon Educators Benefit Board and Public Employees' Benefit Board, unless the  
5 Oregon Educators Benefit Board or Public Employees' Benefit Board elect to provide the  
6 coverage.”.

7       In line 27, delete “(6)” and insert “(8)”.

8       Delete lines 28 through 45.

9       On page 3, delete lines 1 through 7.

10      In line 8, delete “4” and insert “3”.

11      On page 6, delete lines 19 through 45.

12      On page 7, delete lines 1 through 39 and insert:

13      “**SECTION 4.** (1) The Department of Consumer and Business Services shall administer a  
14 program to provide reimbursement for the costs of procedures described in section 2 (6) of  
15 this 2026 Act that are incurred by individuals enrolled in health benefit plans described in  
16 ORS 743A.067 (7)(e). The department shall establish application processes for the program  
17 and contract with a third party administrator or health insurance carrier to process claims  
18 for enrollees in the program.

19      “(2) The department may adopt rules necessary to carry out the provisions of this sec-  
20 tion.

21      “**SECTION 5.** The Family Building Fund is established in the State Treasury, separate  
22 and distinct from the General Fund, consisting of moneys collected from the portion of as-  
23 sessments imposed under ORS 731.804 (3) for the costs of administering the program de-  
24 scribed in section 4 of this 2026 Act. Interest earned by the Family Building Fund shall be  
25 credited to the fund. Moneys in the Family Building Fund are continuously appropriated to  
26 the Department of Consumer and Business Services to carry out the provisions of section 4  
27 of this 2026 Act.

28      “**SECTION 6.** ORS 731.292 is amended to read:

29      “731.292. (1) Except as provided in subsections (2), (3), [and] (4) **and** (5) of this section, all fees,  
30 charges and other moneys received by the Department of Consumer and Business Services or the  
31 Director of the Department of Consumer and Business Services under the Insurance Code shall be  
32 deposited in the fund created by ORS 705.145 and are continuously appropriated to the department  
33 for the payment of the expenses of the department in carrying out the Insurance Code.

34      “(2) All taxes and penalties paid pursuant to the Insurance Code shall be paid to the director  
35 and after deductions of refunds shall be paid by the director to the State Treasurer, at the end of  
36 every calendar month or more often in the director's discretion, for deposit in the General Fund to  
37 become available for general governmental expenses.

38      “(3) All premium taxes received by the director pursuant to ORS 731.820 shall be paid by the  
39 director to the State Treasurer for deposit in the State Fire Marshal Fund.

40      “(4) Assessments received by the department under sections 3 and 5, chapter 538, Oregon Laws  
41 2017, and penalties received by the department under section 6, chapter 538, Oregon Laws 2017,  
42 shall be paid into the State Treasury and credited to the Health System Fund established under  
43 section 2, chapter 538, Oregon Laws 2017.

44      “(5) **Assessments received by the department under ORS 731.804 (3) shall be paid to the**  
45 **Family Building Fund established under section 5 of this 2026 Act.**

1       “**SECTION 7.** ORS 731.292, as amended by section 16, chapter 4, Oregon Laws 2025, is amended  
2 to read:

3       “731.292. (1) Except as provided in subsections [(2) and (3)] **(2), (3) and (4)** of this section, all  
4 fees, charges and other moneys received by the Department of Consumer and Business Services or  
5 the Director of the Department of Consumer and Business Services under the Insurance Code shall  
6 be deposited in the fund created by ORS 705.145 and are continuously appropriated to the department  
7 for the payment of the expenses of the department in carrying out the Insurance Code.

8       “(2) All taxes and penalties paid pursuant to the Insurance Code shall be paid to the director  
9 and after deductions of refunds shall be paid by the director to the State Treasurer, at the end of  
10 every calendar month or more often in the director’s discretion, for deposit in the General Fund to  
11 become available for general governmental expenses.

12       “(3) All premium taxes received by the director pursuant to ORS 731.820 shall be paid by the  
13 director to the State Treasurer for deposit in the State Fire Marshal Fund.

14       **“(4) Assessments received by the department under ORS 731.804 (3) shall be paid to the  
15 Family Building Fund established under section 5 of this 2026 Act.**

16       “**SECTION 8.** ORS 731.804 is amended to read:

17       “731.804. (1) Except as otherwise provided in this section, each authorized insurer doing business  
18 in this state shall pay assessments that the Director of the Department of Consumer and  
19 Business Services determines are necessary to support the legislatively authorized budget of the  
20 Department of Consumer and Business Services with respect to functions of the department under  
21 the Insurance Code. The director shall determine the assessments according to one or more percentage  
22 rates established by the director by rule. The director shall specify in the rule when assessments  
23 shall be made and payments shall be due. The premium-weighted average of the percentage  
24 rates may not exceed nine-hundredths of one percent of the gross amount of premiums  
25 received by an insurer or the insurer’s insurance producers from and under the insurer’s policies  
26 covering direct domestic risks, after deducting the amount of return premiums paid and the amount  
27 of dividend payments made to policyholders with respect to such policies. In the case of reciprocal  
28 insurers, the amount of savings paid or credited to the accounts of subscribers shall be deducted  
29 from the gross amount of premiums. In establishing the percentage rate or rates, the director shall  
30 use the most recent premium data approved by the director. In establishing the amounts to be collected  
31 under this subsection, the director shall take into consideration the expenses of the department  
32 for administering the Insurance Code and the fees collected under subsection (2) of this  
33 section. When the director establishes two or more percentage rates:

34       “(a) Each rate shall be based on such expenses of the department ascribed by the director to  
35 the line of insurance for which the rate is established.

36       “(b) Each rate shall be applied to the gross amount of premium received by an insurer or its  
37 insurance producers for the applicable line of insurance as provided in this subsection.

38       “(2) The director may collect fees for specific services provided by the department under the  
39 Insurance Code according to a schedule of fees established by the director by rule. The director may  
40 collect such fees in advance. In establishing the schedule for fees, the director shall take into consideration  
41 the cost of each service for which a fee is imposed.

42       “(3)(a) Notwithstanding the provisions of ORS 743A.067 (7)(e) and 743A.067 (9), for the purpose  
43 of mitigating inequity in the health insurance market, the director may assess a fee on any insurer  
44 that offers a health benefit plan, as defined in ORS 743B.005, that is exempt from a provision of ORS  
45 chapter 743A or other provision of the Insurance Code that requires specified coverage by health

1 benefit plans.

2       “(b) Any fees collected under paragraph (a) of this subsection must be the actuarial equivalent  
3 of costs attributed to the provision and administration of the required coverage by an insurer that  
4 is not exempt.

5       “(c) Nothing in this section limits the authority of the director to enforce the provisions of ORS  
6 chapter 743A if an insurer unlawfully fails to comply.

7       “(d) Notwithstanding ORS 646A.628, fees paid in accordance with paragraph (a) of this sub-  
8 section shall be deposited in the [*General Fund to become available for general governmental*  
9 **expenses] Family Building Fund established under section 5 of this 2026 Act.**

10     “(4) Establishment and amendment of the schedule of fees under subsection (2) of this section  
11 are subject to prior approval of the Oregon Department of Administrative Services and shall be  
12 within the budget authorized by the Legislative Assembly as that budget may be modified by the  
13 Emergency Board.

14     “(5) The director may not collect an assessment under subsection (1) of this section from any  
15 of the following persons:

16       “(a) A fraternal benefit society complying with ORS chapter 748.

17       “(b) Any person or class of persons designated by the director by rule.

18       “(6) The director may not collect an assessment under subsection (1) of this section with respect  
19 to premiums received from any of the following policies:

20       “(a) Workers’ compensation insurance policies.

21       “(b) Wet marine and transportation insurance policies.

22       “(c) Any category of policies designated by the director by rule.”.

23      Delete lines 42 through 45 and delete page 8.

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