

DRAFT

SUMMARY

Allows vision care insurer to restrict or limit vision care provider's choice of supplier for covered services and allows insurer to require vision care provider to participate in one vision care insurance plan or discount card program.

A BILL FOR AN ACT

Relating to vision care insurance; amending ORS 743B.406.

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

SECTION 1. ORS 743B.406 is amended to read:

743B.406. (1) As used in this section:

(a) "Contractual discount" means a percentage reduction, required under a contract with an insurer, in a vision care provider's usual and customary rate for vision care services and materials **provided to individuals enrolled in vision care insurance.**

(b) "Discount card" means a card or other purchasing mechanism or device that is not insurance or a discount medical plan, as defined in ORS 742.420, that purports to offer discounts or access to discounts in health-related purchases from health care providers.

(c) "Materials" includes, but is not limited to:

(A) Lenses;

(B) Devices containing lenses;

(C) Contact lenses;

(D) Prisms;

(E) Lens treatments and contact lens coatings;

(F) Orthopedic or prosthetic devices to correct, relieve or treat defects

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.

or abnormal conditions of the human eye or adnexa; and

(G) Vision training.

(d) "Vision care insurance" means a health benefit plan or a policy or certificate of insurance that covers vision care services and materials.

(e) "Vision care provider" includes:

(A) A person licensed to practice optometry under ORS chapter 683; and

(B) A physician licensed under ORS chapter 677 to practice medicine or osteopathy who has completed a residency program in ophthalmology.

(f) "Vision care services" means services provided by a vision care provider within the scope of the provider's license to practice optometry or ophthalmology.

(2) A contract between a vision care provider and an entity that offers vision care insurance or a vision care discount card may not:

(a) *[Limit or specify the fee that a vision care provider may charge for]* **With respect to** vision care services or materials that are not reimbursed, in whole or in part, by the vision care insurance or discount card:

(A) Limit or specify the fee that a vision care provider may charge;
or

(B) Directly or indirectly restrict or limit a vision care provider's choice of suppliers of materials.

[(b) Require a vision care provider to participate in one vision care insurance plan or discount card program as a condition for participating in another insurance plan.]

[(c)] **(b)** Change the terms, the contractual discount or the reimbursement rates, under vision care insurance or a vision care discount card, without a signed acknowledgment that the vision care provider agrees to the changes.

[(d) Directly or indirectly restrict or limit a vision care provider's choice of suppliers of materials.]

(3) This section does not prohibit the use of a discount card by a patient of a vision care provider if:

(a) The enrollment of the vision care provider is:

1 (A) Completely voluntary; and

2 (B) Not conditioned upon the vision care provider's participation in any
3 other discount card program with different provider terms and conditions or
4 in another insurance plan; and

5 (b) The discount card program does not reimburse the vision care provider
6 for the cost of the vision care services that were discounted.

7 **(4) This section does not prohibit an entity that offers vision care**
8 **insurance from entering into an agreement with a vision care provider**
9 **to offer a contractual discount on vision care services or materials**
10 **that are not reimbursed, in whole or in part, by the vision care in-**
11 **surance if the agreement is:**

12 (a) Completely voluntary; and

13 (b) Not a condition of participation in the insurer's network of
14 providers.