Benefit and Provider mandates in Oregon Statute

Mandated disease and condition, and provider reimbursement benefits and provisions in Oregon statute on January 2004 (Rev. 2/04)

				•		Insurance type			Policy type		
Mandate	Description	Statute	Date adopted	Subject to Repeal (Yes/No) & date	Federal mandate	Commercial insurer	HCSC*	Self-ins	Small group	Large group	Individual
Diseases and conditions		000 740 440	1077.0	1005		.,	.,				.,
1 Alcoholism – Individual (mandatory offering)	Coverage for alcoholism treatment, at the request of the insured.	ORS 743.412	1977 & 1981	No, pre-1985	No	Yes	Yes	No	No	No	Yes
2 Chemical dependency/mental conditions	Group health insurance coverage for treatment of chemical dependency, including alcoholism, and for mental or nervous conditions.	ORS 743.556	10/99	No	No	Yes	Yes	No	Yes	Yes	No
3 Pregnancy/childbirth reimbursement	All health benefit plans must provide payment or reimbursement for expenses with pregnancy care.	ORS 743.693	Oct-99	Yes, 10/2005	No	Yes	Yes	No	Yes	Yes	Yes
4 Particular drug coverage	No insurance policy providing coverage for a prescription drug to a resident of this state shall exclude coverage.	ORS 743.697	Oct-97	No	No	Yes	Yes	No	Yes	Yes	Yes
5 Maxillofacial prosthesis	All group health insurance policies providing hospital, medical, or surgical expense benefits include coverage for maxillofacial prosthetic services considered necessary for adjunctive treatment.	ORS 743.706	1981	No, pre-1985	No	Yes	Yes	No	Yes	Yes	Yes
6 Diethylstilbestrol prescribed for mother	Prohibits denial or cancellation of health insurance because of diethylstilbestrol use by mother of insured prior to insured's birth.	ORS 743.710	1979	No, pre-1985	No	Yes	Yes	No	Yes	Yes	Yes
7 Inborn errors of metabolism reimbursement	All individual & group health insurance policies providing coverage shall include coverage for treatment of inborn errors.	ORS 743.726	Jul-97; rev. 7/2003	Yes, 7/2009	No	Yes	Yes	No	Yes	Yes	Yes
8 Mammography screening and schedule	Every health insurance policy that covers hospital, medical, or surgical expenses shall provide coverage of mammograms.	ORS 743.727	1993 (amended 1999)	Yes 7/1/05	No	Yes	Yes	Yes	Yes	Yes	Yes
9 Pelvic/pap smear exam and schedule	All policies providing health insurance shall include coverage for pelvic examinations and pap smear examinations.	ORS 743.728	1993 (amended 1999)	Yes 7/1/05	No	Yes	Yes	Yes	Yes	Yes	Yes
Cancer Rights Act (breast reconstruction)	All group health benefit plans must include the benefit provisions of the federal Women's' Health and Cancer Rights Act of 1998.	ORS 743.737(15), 743.754(9), & 743.766(9)	,	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes
11 Newborns' & Mothers' Health Protection Act (minimum maternity stay)	The department shall enforce insurer compliance with the federal Newborns' and Mothers' Health Protection Act.	ORS 743.823	Jun-97	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes

Benefit and provider mandates in Oregon Statute

12 Emergency eye care	Any insurer that offers a health benefit plan that provides eye care services shall allow any enrollee to receive emergency eye services.	ORS 743.842	Oct-99	Yes, 11/2006	No	Yes	Yes	No	Yes	Yes	Yes
13 HIV, AIDS, and ARC	No inquiry in an application for health or life insurance coverage shall be directed toward determining the applicant's sexual orientation.	ORS 746.240 & OAR 836- 050-0240 to 836-050- 0250	1988	No	No	Yes	Yes	No	Yes	Yes	Yes
Provider reimbursements	,										
14 Choice of drug outlets and pharmacies	An insured may limit the drug outlets or pharmacists.	ORS 731.485	1993	No	No	Yes	Yes	No	Yes	Yes	Yes
15 State hospital reimbursement		ORS 743.701	Sep-71	No, pre-1985	No	Yes	Yes	No	Yes	Yes	Yes
16 Optometrists	Reimbursement for services of optometrist.	ORS 743.703 & 750.065	Sep-67	No, pre-1985	No	Yes	Yes	No	Yes	Yes	Yes
17 Psychologists	Reimbursement for services provided by psychologist.		Sep-75	No, pre-1985	No	Yes	Yes	No	Yes	Yes	Yes
18 Nurse practitioners	Reimbursement for services of certified nurse practitioner, including prescribing or dispensing drugs.	ORS 743.712	Jul-79	No, pre-1985	No	Yes	Yes	No	Yes	Yes	Yes
19 Denturists	Notwithstanding any policy provisions of dental insurance, the insured under such policy shall be entitled to reimbursement for such service.	ORS 743.713	12/78 (rev. 93)	No, pre-1985	No	Yes	No	No	Yes	Yes	Yes
20 Clinical social workers	The insured under the policy shall be entitled to have payment or reimbursement made to the uninsured.		7/81(rev. 89)	No, pre-1985	No	Yes	No	No	Yes	Yes	Yes
21 Ambulance care & transport coverage	Any insurance policy shall provide that payments will be made to the provider.	ORS 743.718	Sep-87	No	No	Yes	Yes	No	Yes	Yes	Yes
22 Dental surgeons	Reimbursement for certain surgical services performed by dentist.	ORS 743.719	Sep-71	No, pre-1985	No	Yes	Yes	No	Yes	Yes	Yes
23 Physicians Assistants	Reimbursement for claim submitted by physician assistant.	ORS 743.725	Oct-97; rev. 10/2003	Yes, 10/2009	No	Yes	Yes	No	Yes	Yes	Yes
24 Emergency services coverage	All insurers offering a health benefit plan shall provide coverage without prior authorization.	ORS 743.699	Oct-97; rev. 10/2003	Yes, 10/2009	No	Yes	Yes	No	Yes	Yes	Yes

[|] prior authorization. | 10/2003 | | least the legal name for a health-maintenance organization (HMO) or other type of health-insurance plan that contracts with doctors, hospitals, and other medical providers to offer medical services on a pre-paid basis.

Data compiled by the Department of Consumer and Business Services, 2004