

Benefit and Provider mandates in Oregon Statute
Mandated disease and condition, and provider reimbursement benefits in Oregon statute, January 2006

	Mandate	Description	Statute	Effective Date.	Subject to Repeal & date	Federal	Insurance Type		Policy type		
							Commercial insurer	HCSC	Small group	Large group	Individual
	Diseases and conditions										
1	Alcoholism – Individual (mandatory offering)	At the request of the insured, coverage for expenses arising from treatment for alcoholism.	ORS 743.412	1981	No, pre-1985	No	Yes	Yes	No	No	Yes
2	Chemical dependency/mental conditions	Group health insurance coverage for treatment of chemical dependency and mental or nervous conditions at the same level as those imposed for treatment of other medical conditions & subject to treatment limitations that are more restrictive.	ORS 743.556	1/2007	Yes, 2013	No	Yes	Yes	Yes	Yes	No
3	Pregnancy/childbirth reimbursement	All health benefit plans must provide payment or reimbursement for pregnancy care expenses.	ORS 743.693	1999	No	No	Yes	Yes	Yes	Yes	Yes
4	Prohibits excluding a particular drug coverage solely because it is not FDA approved for a medical condition	No insurance policy providing coverage for a prescription drug to a resident of this state shall exclude coverage because the drug is not FDA approved for a prescribed medical condition if the Oregon Health Resources Committee determines the use is effective.	ORS 743.697	10/1997	No	No	Yes	Yes	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	Yes	Yes	Yes
6	Inborn errors of metabolism reimbursement	All individual & group health insurance policies providing coverage shall include coverage for treatment of inborn errors.	ORS 743.726	1997	Yes, 7/2009	No	Yes	Yes	Yes	Yes	Yes
7	Mammography screening & schedule	Every health insurance policy that covers hospital, medical, or surgical expenses shall provide coverage of mammograms.	ORS 743.727	1993	No	No	Yes	Yes	Yes	Yes	Yes
8	Mandated coverage for clinical breast examinations	Requires health insurance policies to cover clinical breast examinations annually for women of 18 years or older; at any time when recommended by a woman's health care provider	HB 2498 (ch 482, OL 2005)	1/1/2006	No	No	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	No	No	Yes	Yes	Yes	Yes	Yes

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10	Emergency services coverage	All insurers offering a health benefit plan shall provide coverage without prior authorization.	ORS 743.699	1997	No	No	Yes	Yes	Yes	Yes	Yes
11	Mandated coverage for prostate examinations	Health insurance policies to cover prostate cancer screening examinations for men who are 50 years who are at high risk for prostate cancer	SB 1026 (ch 477, OL 2005)	1/1/2006	Yes, 2012	No	Yes	Yes	Yes	Yes	Yes
12	Coverage for colorectal cancer screening	Requires health insurance policies to cover colorectal cancer screening examinations and laboratory tests	SB 501 (ch 765, OL 2005)	1/1/2006	Yes 8/2012	No	Yes	Yes	Yes	Yes	Yes
13	Diabetes	All individual & group health insurance policies providing coverage shall include coverage for diabetes self-management programs.	ORS 743.694	2001	Yes, 2007	No	Yes	Yes	Yes	Yes	Yes
14	Reimbursement for mastectomy-related services	All insurers offering a health benefit shall provide payment, coverage or reimbursement for mastectomy-related services as determined by the attending physician and enrollee to be part of the enrollee's course or plan of treatment	ORS 743-691	2003	No	Yes	Yes	Yes	Yes	Yes	Yes
15	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	6/1997	No	Yes	Yes	Yes	Yes	Yes	Yes
16	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 see Sec. 1 (ch 418, OL 2005) & Sec. 2 (ch 137, OL 2003)	10/1999	No	No	Yes	Yes	Yes	Yes	Yes
	<u>Provider reimbursements</u>										
17	State hospital reimbursement	No policy shall exclude from payment or reimbursement losses for service rendered at a State of Oregon or any approved mental health program.	ORS 743.701	9/1971	No, pre-1985	No	Yes	Yes	Yes	Yes	Yes
18	Optometrists	Ensures consumer access to optometrists when a health insurer contracts with an independent practice association (IPA) to provide eye care services under a policy	ORS 743.703 & 750.065	1967	No	No	Yes	Yes	Yes	Yes	Yes
19	Psychologists	Reimbursement for services provided by psychologist.	ORS 743.709	9/1975	No, pre-1985	No	Yes	Yes	Yes	Yes	Yes
20	Nurse practitioners	Reimbursement for services of certified nurse practitioner, including prescribing or dispensing drugs.	ORS 743.712	7/1979	No, pre-1985	No	Yes	Yes	Yes	Yes	Yes

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21	Registered Nurse First Assistant	Reimbursement for professional services performed by a RN	HB 3329 (ch 628, OL 2005)	1/2006	Yes, 2012	No	Yes	Yes	Yes	Yes	Yes
22	Reimbursement for services of denturist	Notwithstanding any policy provisions of dental insurance, the insured under such policy shall be entitled to reimbursement for such service.	ORS 743.713	12/1978 (rev. 93)	No, pre-1985	No	Yes	No	Yes	Yes	Yes
23	Clinical social workers services are reimbursed upon referral by a physician or psychologist.	The insured under the policy shall be entitled to payment or reimbursement for services of clinical social worker.	ORS 743.714	7/1981 (rev. 89)	No, pre-1985	Yes (except Kaiser)	Yes	No	Yes	Yes	Yes
24	Ambulance care & transport coverage	Any insurance policy shall provide that payments will be made to the provider.	ORS 743.718	9/1987	Attorney General opinion	No	Yes	Yes	Yes	Yes	Yes
25	Dental surgeons	Reimbursement for certain surgical services performed by dentist.	ORS 743.719	9/1971	No, pre-1985	No	Yes	Yes	Yes	Yes	Yes
26	Physicians Assistants	Reimbursement for claim submitted by physician assistant.	ORS 743.725	1997	Yes, 10/4/2009	No	Yes	Yes	Yes	Yes	Yes

Health-care service contractor - 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, 2006