



SENATE MAJORITY OFFICE

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Senate votes to expand access to health care

SB 250: Prohibits discrimination in health benefit plans

SALEM – The Oregon Senate aligned the state’s health insurance regulations with the federal Affordable Care Act, expanding access to healthcare and prohibiting discrimination by benefit plans.

[Senate Bill 250](#) – which passed with a 25-4 vote today on the Senate floor – prohibits health benefit plans from discriminating on the basis of actual or perceived race, color, national origin, sex, sexual orientation, gender identity, age or disability, in addition to other expansions of care designed to benefit Oregon’s consumers.

“No one should be denied health plan benefits because of their color, sexual orientation, age or any other reason where it is illegal to discriminate,” Sen. Laurie Monnes Anderson (D-Gresham) said. “When a person signs up for health insurance they should be confident and comfortable that the health coverage they need will be covered, whether it’s because of a condition they already had or chemical dependency. Health insurance isn’t worth much if it doesn’t cover much. This bill expands what health insurers will cover in Oregon.”

In addition to banning discrimination, the bill requires most health benefit plans to cover chemical dependency coverage. Most individual plans, under the bill, will be required to issue plans without preexisting condition exclusions, waiting periods or different terms or conditions based on health status. It also allows insurance carriers to cap the number of enrollees in an individual health plan if the Oregon Department of Consumer and Business Services finds that

issuing the plan to more individuals would have an adverse effect on the carrier's ability to fulfill its obligations.

The Department of Consumer and Business Services is the state's primary regulator of insurance companies. In 2015, the division regulated health insurers covering about 1 million Oregonians in individual, small group, large group, associations and trusts markets. An estimated 710,000 Oregonians were covered by self-insured employers, which are regulated by the federal government under the 1974 Employee Retirement Income Security Act.

The federal Patient Protection and Affordable Care Act – which was enacted in 2010 – contained several provisions affecting Medicare and Medicaid, as well as the employer and individual insurance markets. Many of these went into effect in 2014, with the goal to increase the number of Americans with health insurance. Key provisions include the individual insurance mandate, pre-existing condition protections, essential health benefit coverage requirements and insurance premium subsidies. This bill aligns aspects of the Oregon Insurance Code with the Affordable Care Act.

Senate Bill 250 now goes to the House of Representatives for consideration.

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