

Regulatory Affairs
Antoinette Awuakye
(503) 553-1521 Voice
(503) 225-5431 Facsimile
antoinette.awuakye@cambiahealth.com

Reply to:P.O. Box 1271 (M/S E12B)
Portland, OR 97207-1271

October 22, 2025

Brooke Hall
Senior Policy Analyst
Department of Consumer and Business Services, Division of Financial Regulation
P.O. Box 14480
Salem, OR 97309

SENT VIA EMAIL

RE: Comments on Updated Draft Rules as of August 20, 2025 Implementing SB 824 (2025) – Annual Behavioral Health Parity Report: Quantitative Data

Dear Ms. Hall:

I am submitting comments on behalf of Cambia Health Solutions. Cambia Health Solutions, which operates Regence BlueCross BlueShield of Oregon (Regence) and BridgeSpan Health plans is a not-for profit health insurer dedicated to improving the health and well-being of our members and the communities we serve. As the state's largest health insurer, we provide high-value, affordable health care to nearly one million Oregonians across a network of 39,000 providers at 705 sites across the state. In keeping with our values as a tax-paying nonprofit, 90% of every premium dollar goes to pay our members' medical claims and expenses.

Thank you for the opportunity to provide comments on the updated draft rules implementing SB 824 (2025), which restores the quantitative data reporting elements of the annual Behavioral Health Parity Report.

Our comments focus on Section (3)(H) and (i) which removes language related to reporting provider contracted rates and claims rates incurred. While we support removal of contracted rates from the rules since the DFR had not previously collected this data, only incurred claims, due to system challenges, we strongly recommend that reporting on incurred claims be reinstated in the rules for these reasons. First, aligning the reporting template with the rules is essential for consistent implementation across all insurers. Second, DFR has previously collected incurred claims data, making this a logical continuation of established practice, and third, it provides clear alignment between the rules and the template reducing confusion and ensuring compliance.

We understand that the DFR reserves the right to request contracted claim data in the future and appreciate that such request will be discussed in detail with insurers in advance. Should any future request become permanent, we expect both the template and rules will be updated simultaneously to maintain alignment.



We respectively request that the DFR restore reporting on claims incurred to the rules to ensure proper alignment between the regulatory requirements and the reporting template. This alignment is crucial for consistent implementation across the industry.

We appreciate the DFR's collaborative approach through the RAC process and look forward to your decisions on this matter.

Thank you for your consideration of our comments.

Sincerely,

Antoinette Awuakye

Sr. Public and Regulatory Affairs Specialist

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