



***Regulatory Affairs***

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**Reply to:**

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Ethan Baldwin

Senior Policy Analyst

Department of Consumer and Business Services, Division of Financial Regulation

P.O. Box 14480

Salem, OR 97309

**SENT VIA EMAIL**

**RE: Second Comments on SB 699 (2025) – Prosthetic and Orthotics Rules**

Dear Mr. Baldwin:

Thank you for the opportunity to provide comments again on the Division of Financial Regulation's (DFR) rules implementing SB 699 (2025). The legislation requires coverage of prosthetic and orthotic devices:

*"that are determined to be medically necessary and the most appropriate model that meets the medical needs of the insured for purposes of performing physical activities, including but not limited to running, biking, swimming and strength training, and that maximizes the insured's whole-body health, including lower and upper limb functions."*

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.

We appreciate the clarification provided during the August 13, 2025 Rule Advisory Committee (RAC) meeting regarding which version of the draft rules was under consideration. Having previously submitted comments on August 8, 2025 based on an earlier version, we are now providing feedback on the current draft posted following the RAC meeting.

**Response to DFRs Rule Drafting Approach**

We recommend removing the phrase "Any additional" from subsection (2)(b) for the following reasons. First, the phrase "Any additional" does not appear in the underlying statute and creates ambiguity about the legislature's intent. Second, removing the language ensures the rule directly reflects the statutory requirement without introducing interpretative uncertainty. Third, the proposed revision maintains the full scope of required coverage while eliminating potential confusion. Therefore, the language should read:



(a) .....; “and

(b) ~~Any additional d~~Devices that are determined to be medically necessary and the most appropriate model that meets the medical needs of the insured for purposes of performing physical activities, including but not limited to running, biking, swimming and strength training, and that maximizes the insured’s whole-body health, including lower and upper limb function.”

Additional Feedback

We appreciate DFR’s confirmation of two important points:

1. **Application of Medical Necessity Standards:** Payors may continue applying their medical necessity criteria as they do today, with SB 699 not altering these determination processes. Disputes remain subject to standard appeal procedures.
2. **Coverage Scope:** Orthotic and prosthetic coverage is limited to the body parts as defined in statute.

We appreciate DFR’s collaborative approach to this rulemaking and believe these revisions will ensure clear, effective implementation of SB 699. Thank you.

Sincerely,

A handwritten signature in blue ink, reading "A. Awuakye". The signature is fluid and cursive, with the first letter "A" being particularly large and stylized.

Antoinette Awuakye  
Sr. Public and Regulatory Affairs Specialist