



PERMANENT ADMINISTRATIVE ORDER

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CHAPTER 836
DEPARTMENT OF CONSUMER AND BUSINESS SERVICES
INSURANCE REGULATION

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FILING CAPTION: Additions to Essential Health Benefits for Plan Years Beginning on and after January 1, 2022

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ADOPT: 836-053-0017

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RULE SUMMARY: Identifies four additional benefits that health benefit plans that are subject to Oregon's essential health benefits must cover beginning in 2022.

CHANGES TO RULE:

836-053-0017

Additions to Essential Health Benefits for Plan Years Beginning on and after January 1, 2022

(1) In addition to any other benefits required under state or federal law, a health benefit plan required to provide essential health benefits within the meaning of ORS 731.097 must, at a minimum, provide coverage for the following items and services:¶¶

(a) Up to 20 visits per year for spinal manipulation if within the scope of license of the healthcare provider; ¶¶

(b) Up to 12 visits per year for acupuncture; ¶¶

(c) Coverage of Buprenorphine or brand equivalent products for medication-assisted treatment of opioid use disorder without prior authorization, dispensing limits, fail first policies, or lifetime limits; and ¶¶

(d) At least one intranasal opioid reversal agent for initial prescriptions of opioids with dosages of 50 or more morphine milligram equivalents (MME).¶¶

(2) The requirements of this rule apply to health benefit plans issued or renewed on or after January 1, 2022.

Statutory/Other Authority: ORS 731.097

Statutes/Other Implemented: ORS 731.097