OFFICE OF THE SECRETARY OF STATE

LAVONNE GRIFFIN-VALADE SECRETARY OF STATE

CHERYL MYERS
DEPUTY SECRETARY OF STATE
AND TRIBAL LIAISON



ARCHIVES DIVISION

STEPHANIE CLARK DIRECTOR

800 SUMMER STREET NE SALEM, OR 97310 503-373-0701

FILED 12/19/2023 8:37 AM

ARCHIVES DIVISION SECRETARY OF STATE

& LEGISLATIVE COUNSEL

PERMANENT ADMINISTRATIVE ORDER

ID 52-2023

CHAPTER 836

DEPARTMENT OF CONSUMER AND BUSINESS SERVICES

INSURANCE REGULATION

FILING CAPTION: Adoption of rule to allow for copayment on primary care visits

EFFECTIVE DATE: 01/01/2024

AGENCY APPROVED DATE: 12/05/2023

CONTACT: Jennifer Romadka-Healy 350 Winter St NE Filed By:

971-374-3618 Salem,OR 97301 Jennifer Romadka-Healy

jennifer.romadka@dcbs.oregon.gov Rules Coordinator

ADOPT: 836-053-0027

REPEAL: Temporary 836-053-0027 from ID 48-2023

NOTICE FILED DATE: 10/25/2023

RULE SUMMARY: Allow for copayment on primary care visits.

CHANGES TO RULE:

836-053-0027

Copayments for Certain Primary Care Visits

(1) As used in this section, "primary care" means outpatient behavioral health services, non-specialty medical services or the coordination of health care for the purpose of:¶

(a) Promoting or maintaining behavioral and physical health and wellness; and \(\bigset{\text{q}} \)

(b) Diagnosis, treatment or management of acute or chronic conditions caused by disease, injury or illness.¶

(2) An individual or group policy or certificate of health insurance that is not offered on the health insurance exchange and that reimburses the cost of hospital, medical or surgical expenses, other than coverage limited to expenses from accidents or specific diseases and limited benefit coverage, shall, in each plan year, reimburse the cost of at least three primary care visits for behavioral health or physical health treatment.¶

(3) The coverage under subsection (2) of this section: ¶

(a) May not be subject to copayments, coinsurance or deductibles in excess of \$5, except as provided in ORS 742.008; and ¶

(b) Is in addition to one annual preventive primary care visit that must be covered without cost-sharing. ¶
(4) An insurer that offers a qualified health plan on the health insurance exchange must offer at least one plan in each metal tier offered by the insurer that provides the coverage described in subsections (2) and (3) of this section. ¶

(5) This section does not apply to health benefit plans offered to public employees by insurers that contract with the Public Employees' Benefit Board or the Oregon Educators' Benefit Board.

Statutory/Other Authority: ORS 731.244, Oregon House Bill 3008 (2023)

Statutes/Other Implemented: Oregon House Bill 3008 (2023), Or Laws 2022, ch 37, sec 6