

## SENATE AMENDMENTS TO A-ENGROSSED HOUSE BILL 2772

By COMMITTEE ON RULES

June 24

1 On page 1 of the printed A-engrossed bill, delete lines 6 through 26 and delete page 2 and insert:  
2 **“SECTION 2. (1) As used in this section, ‘guaranteed association’ means an association**  
3 **that:**

4 **“(a) The Director of the Department of Consumer and Business Services has determined**  
5 **under ORS 743.524 meets the requirements described in ORS 743.522 (2); and**

6 **“(b) Is a statewide nonprofit organization representing the interests of individuals li-**  
7 **censed under ORS chapter 696.**

8 **“(2) A carrier may offer a health benefit plan to a guaranteed association if the plan**  
9 **provides health benefits covering 500 or more members or dependents of members of the**  
10 **association.**

11 **“(3) When a carrier offers coverage to a guaranteed association under subsection (2) of**  
12 **this section, the carrier shall offer coverage to all members of the association and all de-**  
13 **pendents of the members of the association without regard to the actual or expected health**  
14 **status of any member or any dependent of a member of the association.**

15 **“(4) A carrier offering a health benefit plan under subsection (2) of this section shall es-**  
16 **tablish premium rates as follows:**

17 **“(a) For the initial 12-month period of coverage, the carrier shall submit to the director**  
18 **a certified statement that the premium rates charged to the guaranteed association are**  
19 **actuarially sound. The statement must be signed by an actuary certifying the accuracy of**  
20 **the rating methodology as established by the American Academy of Actuaries.**

21 **“(b) For any subsequent 12-month period of coverage, according to a rating methodology**  
22 **as established by the American Academy of Actuaries.**

23 **“(5) A member of a guaranteed association may apply for coverage offered by a carrier**  
24 **under subsection (2) of this section only:**

25 **“(a) If the member has been an active member of the association for no less than 30 days;**

26 **“(b) During an annual open enrollment period offered by the association; and**

27 **“(c) After meeting any additional eligibility requirements agreed upon by the association**  
28 **and the carrier.**

29 **“(6) Notwithstanding subsection (5) of this section, if a member or a dependent of a**  
30 **member of a guaranteed association terminates coverage under the health benefit plan, the**  
31 **member or dependent shall be excluded from coverage for 12 months from the date of ter-**  
32 **mination of coverage. The member may enroll for coverage of the member or the dependent**  
33 **during an annual open enrollment period following the expiration of the exclusion period.”.**

34