

**A-Engrossed**  
**Senate Bill 298**

Ordered by the Senate March 21  
Including Senate Amendments dated March 21

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Senator Margaret Carter)

**SUMMARY**

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

*[Prohibits group health insurers from imposing treatment limitations, limits on total payments or financial requirements on coverage for chemical dependency, including alcoholism, and for mental or nervous conditions unless similar limitations or requirements are imposed on coverage of other medical conditions.]*

*[Takes effect January 1, 2007.]*

**Prohibits Department of Human Services from imposing period of uninsurance as condition of eligibility for medical assistance or Oregon State Children's Health Insurance Program if individual's prior coverage under group health insurance policy was terminated as result of certain conditions.**

**Prohibits Insurance Pool Governing Board from imposing period of uninsurance as condition of eligibility to enroll in Family Health Insurance Assistance Program if individual's prior coverage under group health insurance policy was terminated as result of certain conditions.**

**Declares emergency, effective on passage.**

**A BILL FOR AN ACT**

Relating to limitations on health insurance coverage; and declaring an emergency.

**Be It Enacted by the People of the State of Oregon:**

**SECTION 1. (1) When an individual described in ORS 414.706 (5) applies for medical assistance under ORS 414.705 to 414.750, the Department of Human Services may not impose as a condition of eligibility a period of time during which the individual has not been covered by private health insurance if:**

**(a) The individual is otherwise eligible for medical assistance; and**

**(b) The individual's prior coverage under a group health insurance policy was terminated:**

**(A) At the death of a certificate holder of the group health insurance policy or upon dissolution of marriage with, or legal separation from, a certificate holder; and**

**(B) Within the six months preceding the date of the application.**

**(2) As used in this section, "certificate holder" has the meaning given that term in ORS 731.069.**

**SECTION 2. (1) When an individual applies to enroll in the Family Health Insurance Assistance Program established in ORS 735.720 to 735.740, notwithstanding ORS 735.720 (1)(c), the Insurance Pool Governing Board may not impose as a condition of eligibility a period of time during which the individual has not been covered by private health insurance if:**

**(a) The individual is otherwise eligible to enroll in the program; and**

**(b) The individual's prior coverage under a group health insurance policy was terminated:**

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 (A) At the death of a certificate holder of the group health insurance policy or upon  
2 dissolution of marriage with, or legal separation from, a certificate holder; and

3 (B) Within the six months preceding the date of application.

4 (2) As used in this section, "certificate holder" has the meaning given that term in ORS  
5 731.069.

6 SECTION 3. (1) When an individual under 19 years of age whose family income is no more  
7 than 185 percent of the federal poverty guidelines qualifies for medical assistance under the  
8 Oregon State Children's Health Insurance Program under Title XXI of the Social Security  
9 Act, the Department of Human Services may not impose as a condition of eligibility a period  
10 of time during which the individual has not been covered by private health insurance if:

11 (a) The individual is otherwise eligible for medical assistance; and

12 (b) The individual's prior coverage under a group health insurance policy was terminated:

13 (A) At the death of a certificate holder of the group health insurance policy or upon  
14 dissolution of marriage with, or legal separation from, a certificate holder; and

15 (B) Within the six months preceding the date of the application.

16 (2) As used in this section, "certificate holder" has the meaning given that term in ORS  
17 731.069.

18 SECTION 4. Sections 1 to 3 of this 2005 Act apply to an application for assistance sub-  
19 mitted on or after the effective date of this 2005 Act.

20 SECTION 5. This 2005 Act being necessary for the immediate preservation of the public  
21 peace, health and safety, an emergency is declared to exist, and this 2005 Act takes effect  
22 on its passage.  
23