



MEMORANDUM

February 12, 2014

To: MLAC Committee Members

From: Theresa Van Winkle, MLAC Administrator

Subject: House Bill 4104 -2 Amendment

The following is an overview of the House Bill 4104 -2 amendment, which was adopted by the House Business and Labor Committee on February 12, 2014.

- Replaces the original measure language.
- Provides that when a workers' compensation claim has not yet been accepted or denied, the health benefit plan must expedite pre-authorization and guarantee payment of expenses for medical services provided prior to claim acceptance or denial according to the terms, conditions, and benefits of the health benefit plan.
- Provides that when a workers' compensation claim has been accepted, the workers' compensation insurer must pay for any medical services related to the compensable conditions that were provided prior to claim acceptance. This includes reimbursing any medical expenses, co-payments, and deductibles paid by the health benefit plan or the injured worker for such medical services.
- Provides that when a workers' compensation claim has been denied, the health benefit plan must pay for medical services provided prior to claim denial according to the terms, conditions, and benefits of the plan. After payment by the health benefit plan, the workers' compensation insurer must pay any balance remaining for services provided prior to claim denial up to the workers' compensation fee schedule. Any payments issued by the workers' compensation insurer under this bullet (i.e. on denied claims), may be recovered as an overpayment by the workers' compensation insurer as provided under ORS 656.268 (14).
- Clarifies that, for the purpose of interim medical benefits, self-insured benefit plans and health benefit plans offered by the Oregon Educators Benefit Board and the Public Employees' Benefit Board are considered health benefit plans.
- Establishes enforcement of these provisions within the state's Insurance Code.