



# Oregon SB 1529 Fact Sheet

## Overview

The Oregon senate bill (SB) 1529 has introduced new requirements for the administration of healthcare benefits targeted to enhance access to care and improve outcomes.

## In-scope new and renewing business

The new legislation impacts all new and renewing fully insured business situated in the state of Oregon and is effective for new groups January 1, 2024 and existing groups upon their renewal after Jan. 1, 2024, for both Small Business (groups up to size 50) and Large Group (51+) inclusive of all medical plans:

- All Choice and Choice Plus
- All NexusACO® Plans
- All UnitedHealthcare Navigate® Plans
- Core and Core Essential
- Options PPO
- Select and Select Plus
- Tiered benefit plans

Renewal group example: an existing employer group with a December 2023 renewal cycle wouldn't get the benefit until December, 2024.

## New health care benefit requirements for all employer sponsored health plans in Oregon include:

### 1. Waiving the cost-share for the first 3 PCP visits for Small Business; \$5 for Large Group

All payers must cover the cost of the first 3 primary care physician (PCP) visits,\* including visits for behavioral health provided by the PCP:

- **Small Business (groups up to size 50)** plans have been updated to include \$0 for the first three PCP visits. This is in addition to the annual wellness visits that are already covered at 100%. This \$0 PCP benefit will come into effect on Jan. 1, 2024. We will target the 2025 portfolio cycle to update our plans to reflect the amended ruling released in June 2023 and apply the \$5 PCP copay (first three visits) at that time.
- **Large Group (51+)** plans have been updated to include \$5 for the first 3 PCP visits. This is in addition to the annual wellness visits that are already covered at 100%. This benefit will come into effect on Jan. 1, 2024.

## Impacts to plan coverage

SB 1529 – Coverage for the first 3 PCP office visits	Small Business—Jan. 1, 2024	Large Group—Jan. 1, 2024
<b>First 3 PCP visits</b> Non-HSA plans	<ul style="list-style-type: none"> <li>• There is no cost, \$0 for the first 3 PCP visits</li> <li>• Once the 3 PCP visits have been received, benefits will default to the standard copay</li> </ul>	<ul style="list-style-type: none"> <li>• The copay is \$5 per visit for the first 3 PCP visits</li> <li>• Once the 3 PCP visits have been received, benefits will default to the standard copay</li> </ul>
<b>First 3 PCP visits</b> HSA plans	There is no cost, \$0 for the first 3 PCP visits remaining after deductible has been met	The copay is \$5 per visit for the first 3 PCP visits remaining after deductible has been met
<b>Outpatient behavioral health</b>	Covered at 100% to comply with the Federal mental health parity law	Covered at plan level

## 2. PCP assignment

Under this bill, all payers must assign a PCP for their members. This requirement applies to all fully insured PCP-centered and open-access plans across all segments filed in the state of Oregon.

- UnitedHealthcare will inform members and their care providers when a PCP has been assigned. Members can change their designated PCP at any time.
- Benefit summaries and other plan materials will include language specific to these new benefits and member cost-share information.

### Impacts to Open Access plans (Choice and Choice Plus, Core and Core Essential, Options PPO)

1. All Oregon sitused groups will need to allow for a PCP selection process during Open Enrollment.
2. If the beneficiary or a parent of a minor beneficiary has not selected a primary care provider by the 90th day of the plan year, one will be assigned. When a PCP is assigned, the member and assigned PCP will be notified of the assignment.

### Impacts to PCP-centered plans (Navigate, NexusACO, Select and Select Plus)

1. All PCP-centered plans have existing requirements for PCP selection which will not change. The existing day-limits to plans (will stay as is):
  - a. Navigate (all plans): PCP selection is required to proceed with enrollment/installation
  - b. NexusACO R plans: PCP selection is required to proceed with enrollment/installation
  - c. NexusACO OA plans: 60-day window before auto-assignment
2. If enrollees or their covered family members do not make a PCP selection, one will be assigned. When a PCP is assigned, the member and assigned PCP will be notified of the assignment.

## Member impacts

1. Employees of employers located in Oregon must select a PCP or one will be assigned to them.
2. Customizable open enrollment materials are available to inform enrollees of the new benefits for PCP office visits and they will be prompted to choose a PCP with their plan selection. Ask your UnitedHealthcare representative for helpful resources for enrollees/members.

## Important things for members to know about selecting a PCP

The selected PCP:

- Must be a general practice, family practice, pediatrician or internal medicine provider\* \*
- Must be accepting new patients (if you are not a current patient)
- Must be located in a town or city near where the subscriber lives or works
- Can be selected for the entire family, or each covered member 18 years and older can select their own

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\*Telehealth services provided by the in-person PCP virtually, as well as Virtual Primary Care services performed by National providers is in scope and will also be included in this benefit.

\*\*Some states allow you to choose a specialist, like an OB/GYN, as your PCP. Contact your employer for more information.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health Plan coverage provided by or through UnitedHealthcare of Oregon, Inc.