



Health Net Health Plan of Oregon, Inc.
13221 SW 68th Pkwy, Suite 315
Tigard, OR 97223

Notice of Changes to Coverage Terms for Large Business Groups Effective on and after January 1, 2023

The Health Net Health Plan of Oregon, Inc. (Health Net) Group Plan Benefits and Group Medical and Hospital Service Agreement (“Agreement”) issued in 2022 will be amended to include the changes that appear in this notice for compliance with new laws, regulatory requirements and/or to address Health Net administrative or policy changes. The following modifications apply to Oregon Commercial Large Business Group plans and will appear in the 2023 Agreement.

Additional changes, not confirmed at the time of this mailing, may be required. Please ensure that employees enrolled in the Health Net plan are informed of the changes described in this notice.

Unless specifically noted otherwise, the following changes apply to all commercial products, including EPO, PPO, Flex Net, CommunityCare and Triple Option.

Global Changes

1. The Health Net address has been updated to align with the current mailing address, 13221 SW 68th Pkwy, Suite 315 Tigard, Oregon 97223.
2. All references to “Registered” and “Non-registered” have been removed from the term “Domestic Partner” throughout the Plan Contract.

Legislative/Regulatory Changes

1. **No Surprises Act/Surprise Billing Regulations** – Language has been added or revised in accordance with the Federal No Surprises Act and ORS 743B.287 that protects members from balance billing from out-of-network providers for emergency care.

2. **Domestic Partner** – The definition of “Domestic Partner” was revised in accordance with ORS 106.310(1) and will now read as follows:

“**Domestic Partner**” means a person who is in a “domestic partnership” with the Subscriber. In accordance with Oregon State law a domestic partner is defined as described below:

- A domestic partnership is defined as “a civil contract entered into in person between two individuals of the same sex who are at least 18 years of age, who are otherwise capable and at least one of whom is a resident of Oregon.”
- Any time that coverage is extended to a spouse it must also extend to a domestic partner.

The Subscriber is required to provide notice of termination of the relationship to the Subscriber Group.

3. **Contraceptive Methods** – As required by ORS 743A.067(2)(j)(C) or 743A.067(4), all references to the requirement for a written prescription for over-the-counter contraceptives have been removed.

4. **Opioid Use Disorder Medications** – Opioid use disorder medication information has been added in accordance with OAR 836-053-0017 under the “Prescription Drug Benefits” section and will read as follows:
- **Opioid Use Disorder Medications.** Preferred buprenorphine products are covered at the Tier 1 Copayment and/or Coinsurance without requiring authorization. Non-preferred buprenorphine products do not require authorization for first 30 days of use. Naloxone nasal spray is covered at Tier 1 with a quantity limit of 2 boxes (4 nasal sprays) every month.
5. **External Review** – The language regarding the signed waiver requirements has been revised and the section (excerpt) will now read as follows:
- *To be eligible for external review, the Member must (i) have exhausted the Internal Appeals process shown above; and (ii) provide us a signed Authorization to Use and Disclose Health Information (waiver) to release medical records to the IRO. The waiver with instructions and a return address and fax number is provided directly to the Member with an adverse appeal determination. Members can also obtain a copy of the waiver on the Health Net website at www.healthnetoregon.com or call our Customer Contact Center at the phone number listed on the back of membership card to request a copy of the waiver.*
 - We will provide the IRO information regarding the Adverse Benefit Determination, as well as a signed waiver from the Member granting the IRO access to medical records, no later than 5 business days after receipt of the notice from the DFR.

Language Clarifications

1. A description of a PPO plan has been added to the first page of the Contract to help members understand their benefit plan.

For more information regarding this Notice of Changes to Coverage Terms, please contact your Health Net Account Manager.