#### **Legislative Summary Report**

# **Behavioral Health and Health Care**



This Legislative Summary Report highlights Behavioral Health and Health Care policy measures that received a public hearing in a policy committee during the **2024** regular legislative session. The report is organized by subtopics and includes the measure number; the measure status: enacted [ $\checkmark$ ] or not enacted [ $\times$ ]; and a brief description of the measure.

#### **Behavioral Health and Health Care Subtopics:**

- Access and Affordability
- Behavioral Health and Substance Use
- Health Insurance (Including PEBB and OEBB)
- Medicaid (Oregon Health Plan and Coordinated Care Organizations)

- Other (Omnibus)
- Pharmacy and Prescription Drugs
- Providers and Professions
- Public Health

## **Access and Affordability**

SB 1508



The measure prohibits the Health Evidence Review Commission (HERC) from relying on quality of life measures (e.g., Quality Adjusted Life Years) to determine coverage of services by the Oregon Health Plan (OHP). It caps out-of-pocket costs for insulin at \$35 for a 30-day supply and \$105 for a 90-day supply.

SB 1565 A



For children with very high medical and behavioral health needs, the measure would have prohibited the Oregon Department of Human Services (ODHS) from restricting the number of care attendant service hours provided by a parent caregiver except by choice of the parent provider, the agency that employs the parent provider, any applicable collective bargaining agreement, or the client child.

2024 REGULAR SESSION

#### **Behavioral Health and Substance Use**

SB 1507 A The measure would have appropriated funds for additional positions within the Office of the Public Guardian and Conservator (OPG).

**Note:** Funding for the Office of the Public Guardian was enacted as part of SB 5701.

SB 1547 A

The measure would have required health plans to cover medically necessary treatment for cannabis use disorder for minors. It would have directed the Oregon Health Authority (OHA) to create a program where people with opioid addiction could get help through a hotline. The measure would have created an advisory committee to make recommendations to OHA on how to make it easier for emergency medical workers and military medics to get licensed to provide emergency medical services.

The measure requires the Oregon Health Authority (OHA) to conduct a study to determine the funding required by community mental health programs (CMHPs) and to convene a group of behavioral health partners to evaluate laws, rules, and contracts affecting behavioral health providers.

The measure authorizes the Oregon Health Authority (OHA) to provide electronic notification to a health care practitioner when the practitioner's patient has experienced an overdose.

The measure requires the System of Care Advisory Council to convene a subcommittee on the youth behavioral health workforce.

#### **Health Insurance (Including PEBB and OEBB)**

The measure would have established the Health Insurance Mandate Review Advisory Committee (HIMRAC). It would have required HIMRAC to develop and implement a process for reviewing and producing a report that complies with statutory requirements for documenting a proposed measure's potential social and financial effects.

The measure requires an insurer offering a health plan that provides pharmacy benefits to include all amounts paid by the enrollee or paid on behalf of the enrollee by another person, to the cost of a covered prescription drug when calculating the enrollee's contribution to an out-of-pocket maximum in specified circumstances.



# Medicaid (Oregon Health Plan and Coordinated Care Organizations)

SB 1569

X

The measure would have required the Oregon Health Plan to cover cognitive assessment and care planning for its members who experience signs or symptoms of cognitive impairment.

#### Other (Omnibus)

HB 4010



The measure makes unrelated policy changes to several areas, including:

- Specifying that the addition of flavoring to a drug does not count as compounding;
- Exempting the Oregon State Hospital from staffing requirements of House Bill 2697 (2023);
- Clarifying the definition of "primary care provider" for purposes of assignment by insurance carriers;
- Removing the requirement that counselors and therapists submit professional disclosure statements; and
- Updating the title of "physician assistant" to "physician associate."

Note: This measure is an omnibus bill that includes other provisions.

HB 4011 A



The measure would have made unrelated policy changes and fund appropriations to several areas, including:

- Prohibiting health benefit plans from imposing cost-sharing on cervical cancer examinations;
- Requiring the Oregon Health Plan to cover continuous glucose monitors in specified circumstances;
- Requiring dental laboratories to be registered with the Health Licensing Office;
- Appropriating funds to help recruit and retain nurse educators and behavioral health providers; and
- Establishing the Harm Reduction Clearinghouse Project in the Oregon Health Authority

**Note:** This measure was an omnibus bill that included other provisions.



## **Pharmacy and Prescription Drugs**

SB 1506

**/** 

The measure permits pharmacists to test for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and prescribe, dispense, and administer treatment, including drug therapy, for SARS-CoV-2. It also requires the Oregon Health Plan, health insurers, the Public Employees' Benefit Board (PEBB), and Oregon Educators Benefit Board (OEBB) to reimburse for testing, treatment, and pharmacist services. The measure sunsets the permission to test and treat on June 30, 2026.

HB 4012



The measure prohibits health benefit plans from requiring a clinicianadministered drug to be dispensed at limited pharmacies for drugs administered by an enrollee's oncology clinic to treat a symptom, complication, or consequence of cancer. It also clarifies the circumstances permitting a health benefit plan to require a health care provider to be reimbursed for clinician-administered drugs as a medical benefit.

HB 4028 A



The measure would have prohibited a drug manufacturer, as defined in Oregon law, from denying or restricting access to 340B drugs by a pharmacy or drug outlet contracted with a covered entity.

HB 4149



The measure requires pharmacy benefit managers (PBMs) to be licensed by the Department of Consumer and Business Services (DCBS). It requires PBMs to submit contracts with pharmacies to DCBS upon request and changes processes for appealing PBM reimbursements and auditing pharmacies. The measure changes requirements for how health insurance policies providing prescription drug coverage interact with pharmacies and reimburse 340B drugs.

#### **Providers and Professions**

SB 1578



The measure directs the Oregon Health Authority (OHA) to contract with a nonprofit to establish and maintain a management system to schedule appointments and process billing for health care interpreters.

Note: Governor Tina Kotek issued a signing letter for SB 1578 – see letter.

SB 1594 A



The measure would have established the Task Force on Improving the Safety of Behavioral Health Workers, would have appropriated \$4.7 million to the Oregon Health Authority (OHA) to support behavioral health apprenticeship and training programs, and would have appropriated an additional \$1 million to the United We Heal Trust for grants to improve the safety of workers in behavioral health settings.

**Note:** Provisions of the bill were enacted as part of HB 4002.



HB 4003 The measure requires the Oregon Department of State Police (OSP) to study the causes and ways to address the shortage of medical examiners in Oregon.

HB 4071 A The measure would have established a 20-member Task Force on Health Professional Licensing.

The measure would have added to requirements for hospitals related to hospital worker safety, made assault of a hospital worker a felony, and established a hospital worker safety grant program to be administered by the Oregon Health Authority.

**Note:** The measure is also included in the Legislative Summary Report on Criminal Justice.

The measure would have required hospital to set predictive schedules for nursing staff and pay those staff for time spent on call or standby. It also would have required hospitals to report specified financial data to the Oregon Health Authority and to the public.

The measure would have appropriated \$3.2 million from the General Fund to the Oregon Health Authority to provide the nonfederal matching share for the Nurse-Family Partnership home visiting services program.

Note: Funding for the program was enacted as part of HB 5204.

The measure would have updated Oregon's corporate practice of medicine standards to keep decisions regarding the administration of a health care business separate from decisions regarding the delivery of health care. It also would have restricted noncompetition agreements and disciplinary actions by a health care business against physicians.

The measure would have excluded specified facility types from having to obtain a certificate of need (CON) from the Oregon Health Authority (OHA) prior to an offering or development. It also would have removed the requirement that the Director of OHA take least costly settings policy into account when reviewing applications for CON.

# **Public Health**

SB 1503 The measure establishes the Task Force on Community Safety and Firearm Suicide Prevention, staffed by the Department of Justice (DOJ).

The measure allows an adopted person aged 21 or older to request to change or add a biological parent's name on their original birth record by filling out an application to the Center of Health Statistics, as an alternative to obtaining a court order.



HB 4070 A

X

The measure would have directed the Oregon Health Authority (OHA) to adjust grants awarded to school-based health centers (SBHCs) for inflation. It would have required OHA to issue grants to 10 districts for planning and operating SBHCs and to implement a grant program to increase and improve school-based mental health services.

HB 4081

**/** 

The measure modernizes Oregon's emergency medical services (EMS) system by establishing a program and advisory board, supported by the advice and technical expertise of advisory committees, to support regional advisory boards responsible for the development and oversight of regional EMS plans. It also directs the new EMS program to establish and maintain an EMS data system.

HB 4104



The measure designates the fourth Wednesday in February of each year as Hypertrophic Cardiomyopathy Awareness Day.

**Note:** The measure is also included in the Legislative Summary Report on General Government.

HB 4136



The measure makes changes to laws regulating the use of nonresident and temporary nurses. It requires the Oregon Health Authority (OHA) to enter an agreement with Lane County to help improve access to health care in the greater Eugene area. The measure requires OHA to review access to urgent and immediate health care services and report to the legislature by September 15, 2024.

#### Staff

Daniel Dietz, Legislative Analyst Brian Nieubuurt, Legislative Analyst

#### Legislative Policy and Research Office

Oregon State Capitol | (503) 986-1813 | www.oregonlegislature.gov/lpro

Please note that the Legislative Policy and Research Office provides centralized, nonpartisan research and issue analysis for Oregon's legislative branch. The Legislative Policy and Research Office does not provide legal advice. Legislative Summary Reports contain general information that is current as of the date of publication. Subsequent action by the legislative, executive, or judicial branches may affect accuracy.

