

HEALTH CARE



This Legislative Summary Report highlights Health Care policy measures that received a public hearing during the 2021 Regular Legislative Session. The report is organized by sub-topics and includes the measure number; the measure status: enacted [✓] or not enacted [✗]; and a brief description of the measure.

Health Care policy sub-topics:

- COVID-19
- Health Care Access and Affordability
- Health Care Providers and Professions
- Health Equity
- Health Insurance (Including PEBB and OEBC)
- Medicaid (Oregon Health Plan and Coordinated Care Organizations)
- Pharmaceuticals
- Public Health
- Other Legislation

COVID-19

- SB 674 ✗ Would have required the Oregon Health Authority (OHA) to establish hospital procedures to enable family members to visit hospitalized patients during a pandemic.
- HB 3057 ✓ Allows the OHA to disclose protected health information for public health purposes during the COVID-19 pandemic.

Health Care Access and Affordability

- SB 65 ✓ Transfers the duties, functions, and powers related to the Compact of Free Association Premium Assistance Program and Marketplace from the Department of Consumer and Business Services to Oregon Health Authority.
- SB 428 ✓ Extends sunset on Task Force on Universal Health Care to January 2, 2023 and extends deadline to submit report to Legislative Assembly to September 30, 2022.
- SB 557 A ✗ Would have created a dental coverage program in Oregon Health Authority for low-income Compact of Free Association citizens who reside in Oregon and lack access to affordable dental coverage.
- SB 584 A ✗ Would have required the Department of Human Services to administer a Medicaid buy-in program for employed individuals with disabilities.

Health Care Access and Affordability, cont'd

- SB 629 ✓ Authorizes telepharmacy services to increase availability of clinical telepharmacy services in rural areas largely through remote dispensing pharmacies.
- SB 697 ✗ Would have continued expanded coverage of, and reimbursement for, telemedicine services by regulated commercial insurers.
- SB 706 A ✗ Would have supported outreach efforts to enroll low-income Compact of Free Association citizens in the Oregon Health Plan.
- SB 800 ✓ Establishes the Oregon Essential Workforce Health Care Program to provide health care to employees of qualified facility operators participating in the state's Medicaid program.
- SJR 12 ✓ Refers to voters an amendment to the State Constitution to ensure affordable health care for Oregon residents (Hope Amendment).
- HB 2010 ✓ Directs Oregon Health Authority to collaborate with Department of Consumer and Business Services to create an implementation plan for a public health plan to offer more affordable coverage to individuals and small businesses.
- HB 2081 ✓ Authorizes Oregon Health Authority to implement the Health Care Cost Growth Target Program (See [SB 889](#), 2019) to control the rising costs of health care.
- HB 2164 A ✗ Would have expanded Medicaid coverage to all adult residents 26 years or younger and their parents regardless of immigration status.
- HB 2360 ✓ Prohibits nonprofit hospitals and health systems from requiring an individual to apply for Medicaid as part of the financial assistance eligibility screening process.
- HB 2362 ✓ Directs Oregon Health Authority to examine and monitor the competitiveness of the health care market, and approve or deny mergers, acquisitions, and affiliations among hospitals, insurers, and provider organizations.
- HB 2508 ✓ Expands coverage of, and reimbursement for, telemedicine services in Medicaid and regulated commercial insurers, including behavioral services.
- HB 2517 ✓ Modifies utilization management protocols among insurers, providers, and enrollees, including the use of prior authorization and step therapy.
- HB 2591 ✓ Requires Oregon Health Authority appropriate grant funds to 10 school or education service districts to address school-based health services needs in their respective communities.
- HB 2623 ✓ Limits the amount of cost-sharing health benefit plans may impose on the coverage of insulin to treat diabetes.

Health Care Access and Affordability, cont'd

- HB 2981 ✓ Requires Oregon Health Authority to administer a program to provide palliative care services for Medicaid members enrolled in coordinated care organizations.
- HB 3352 ✓ Expands Medicaid eligibility to adult residents 19 years or older regardless of immigration status and other qualifying criteria and appropriates \$100 to implement program, including outreach and education. (See [HB 2164 A](#)).
- HB 3381 ✗ Would have directed Oregon Health Authority to collaborate with Department of Consumer and Business Services to design health benefit plans available on the Marketplace for public employees beginning with the 2023 plan year.

Health Care Providers and Professions

- SB 39 ✓ Modifies provisions in the Oregon Nurse Practice Act, including updating the definition of "practice of nursing" and clarifying renewal deadlines.
- SB 40 ✓ Requires nursing license applicants to have graduated from a program that includes a clinical component.
- SB 98 ✓ Gives the Oregon Board of Medical Imaging additional disciplinary options and allows the Board to consider additional reasons a licensee or permittee may be unfit.
- SB 99 ✓ Allows the Board of Medical Imaging to utilize a designee to perform inspections of medical imaging and X-ray machine operators.
- SB 100 ✓ Allows the Board of Medical Imaging to issue subpoenas over the signature of the board executive director in addition to the board chairperson.
- SB 110 ✓ Repeals the sunset on the Early Discussion and Resolution program.
- SB 124 ✓ Adds a certified speech-language pathology assistant to membership of the State Board of Examiners for Speech-Language Pathology and Audiology.
- SB 143 ✗ Would have extended the sunset for the Rural Practitioner Tax Credit to 2028.
- SB 438 ✓ Expands the types of health care providers authorized to receive the results of an inmate's court-ordered communicable disease test to include physician assistants.
- SB 567 ✓ Prohibits discrimination in health care based on a patient's race, color, national origin, sex, sexual orientation, gender identity, age, or disability.

Health Care Providers and Professions, cont'd

- SB 610 ✗ Would have created a provider incentive program for psychology doctoral students and licensed psychologists who complete courses that provide cultural competency training.
- SB 640 ✗ Would have established the Indian Health Scholarship Program to provide free tuition and fees to Indian health professional students in exchange for a commitment to work at a tribal service site after graduation.
- SB 684 ✗ Would have established the Task Force on the Oregon Medical Board to review and report on the powers and duties of the Board.
- SB 705 A ✗ Would have increased representation on the Oregon Medical Board by physician assistants from one to three members and increases public membership from three to four members.
- SB 781 ✓ Expedites patient access to results of clinical lab tests and confirm state law with the federal 21st Century Cures Act (2016).
- HB 2072 ✓ Increases licensing fees for home health agencies.
- HB 2075 ✓ Allows Oregon Health Authority to establish a vendor license and annual fees for individuals engaged in the business of radiation devices and equipment and increases the biennial registration fees for the devices and equipment.
- HB 2078 ✓ Repeals Oregon Health Authority's Common Credentialing Program; updates pain management training for health care practitioners; and modifies the definition of temporary employee for Public Employees' Benefit Board coverage eligibility.
- HB 2113 ✓ Expands the geographic diversity requirements to all 14 members of the Oregon Medical Board.
- HB 2464 ✗ Would have allowed a person employed by a health care facility to practice surgical technology if that person was enrolled in, or had completed, a specified apprenticeship program.
- HB 2528 ✓ Creates dental therapy licensure in Oregon through the Oregon Board of Dentistry and specifies licensure requirements and scope of practice for dental therapists.
- HB 2619 ✓ Establishes licensure for individuals to practice genetic counseling in Oregon.
- HB 2622 ✓ Requires hospitals and ambulatory surgical centers to use a smoke evacuation system to safeguard against any adverse health effects of surgical smoke.

Health Care Providers and Professions, cont'd

- HB 2627 ✓ Authorizes expanded practice dental hygienists to perform interim therapeutic restorations.
- HB 2910 ✓ Authorizes the Oregon Health Authority to request federal approval to assess a fee on emergency medical services providers to enhance federal financial participation in the cost of providing ground emergency medical services in Oregon.
- HB 2970 ✓ Clarifies scope of practice for estheticians; clarifies qualifications for a residential care facility administrator license; and adds a dental practice ownership exception for nonprofit corporations that provide dental services to seniors and individuals who need assistance standing or walking.
- HB 3011 ✓ Appropriates funds to support Oregon Health Authority's oversight and enforcement of hospital nurse staffing plans. (**NOTE:** Measure was amended to support budget action not related to introduced policy)
- HB 3016 ✓ Modifies requirements for hospital nurse staffing plans during a national or state emergency declaration.
- HB 3036 ✓ Modifies the practice of physician assistants (PAs) by replacing supervision requirements with standards for collaboration with qualified health care providers, ensuring PAs practice at the top of their scope of practice to increase access to care for Oregon residents.

Health Equity

- SB 70 ✓ Directs the Oregon Health Authority to work with the regional health equity coalitions (RHECs) to ensure service to priority populations throughout Oregon.
- HB 2088 ✓ Establishes a new traditional health worker type for tribal traditional health workers and adds tribal traditional health workers to the Traditional Health Workers Commission.
- HB 2359 ✓ Requires health care providers to work with health care interpreters (HCI) from the HCI registry administered by Oregon Health Authority (OHA) to ensure patients are served in languages other than English. Requires OHA to conduct a study for developing a model for creating an online registry for provider.
- HB 3159 ✓ Expands the types of equity data health care providers and insurers are required to collect and report to Oregon Health Authority from patients to include race, ethnicity, preferred spoken and written languages, disability status, sexual orientation, and gender identity.

Health Equity, cont'd

- HB 3231 ✗ Would have established licenses for qualified individuals to provide signed language interpretation services.

Health Insurance (Including PEBB and OEBC)

- SB 2 ✓ Clarifies permitted prior authorization and other utilization review requirements on the coverage of proton beam therapy for the treatment of cancer.
- SB 3 ✓ Requires health benefit plans to cover emergency medical services transports.
- SB 168 ✗ Would have required health benefit plans to cover fertility and reproductive endocrinology services.
- SB 355 ✗ Would have delayed the sunset on the requirement that regulated insurers in Oregon provide reimbursement for applied behavior analysis services. (See [SB 358](#))
- SB 358 ✓ Delays the sunset of the requirement that health insurers reimburse for applied behavior analysis services and modifies provisions related to behavioral analysis professionals.
- SB 699 ✓ Prohibits grandfathered health benefit plans from imposing preexisting condition exclusions.
- SB 748 ✓ Requires the Public Employees' Benefit Board, Oregon Educators Benefit Board, and individual and small group insurance plans to provide insurance coverage to adult disabled children of insureds under specified circumstances.
- SB 772 ✗ Would have required individual and group health benefit plans to reimburse naturopathic physicians at the same rate as physicians if the services provided by the naturopathic physician were covered by the plan when provided by a physician. (See [HB 2673](#))
- HB 2044 ✗ Would have provided statutory authority to Department of Consumer and Business Services (DCBS) to access the All Payer All Claims database and would have modified reporting requirements and protections in DCBS' Prescription Drug Price Transparency program.
- HB 2046 ✓ Updates consumer protections for state-regulated insurance plans, including enrollee grace periods and initial premium payment due dates. Aligns state health insurance regulations with federal Affordable Care Act law.
- HB 2328 ✗ Would have provided additional specification on the prohibition on provider discrimination, including clarifying practices that would constitute unlawful discrimination against a health care provider by an insurer.

Health Insurance (Including PEBB and OEBB), cont'd

- HB 2390 ✗ Would have required health benefit plans to cover treatment of pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections and pediatric acute-onset neuropsychiatric syndrome.
- HB 2541 ✗ Would have expanded the scope of practice for optometrists in Oregon.
- HB 2673 ✗ Would have required individual and group health benefit plans to reimburse naturopathic physicians at the same rate as physicians if the services provided by the naturopathic physician were covered by the plan when provided by a physician. (See [SB 772](#))
- HB 3108 A ✗ Would have implemented the Universal Access to Primary Care Work Group's recommendations for increasing access to, and affordability of, comprehensive primary care by requiring cost free coverage of annual primary care visits and prohibiting imposition of coverage requirements that restrict access to primary care.

Medicaid (Oregon Health Plan and Coordinated Care Organizations)

- SB 641 ✗ Would have directed the Oregon Health Authority to seek federal approval to fund health care coverage for youth in detention awaiting adjudication if eligible for Medicaid.
- HB 2977 ✗ Would have appropriated funds to Oregon Health Authority for the dental director position.
- HB 3353 ✓ Requires coordinated care organizations, with federal approval, to increase spending on services and programs that advance health equity.

Pharmaceuticals

- SB 12 A ✗ Would have required Oregon Health Authority to study possibilities for public employees to obtain pharmaceuticals from Mexico and Canada.
- SB 439 ✗ Would have required insurers to reduce a patient's cost sharing for prescription drugs by 85 percent of rebates received by health insurers.
- SB 457 ✗ Would have modified membership, duties, and responsibilities of the Pharmacy and Therapeutics Committee and Health Evidence Review Commission and would have modified required coverage of prescription drugs by the Oregon Health Plan (Medicaid)
- SB 558 ✓ Prohibits insurance policies and prescription drug coverage contracts from requiring prescriptions to be filled at a mail order pharmacy, or not allowing

Pharmaceuticals, cont'd

prescriptions to be filled at a local pharmacy, when the patient is also enrolled in Medicaid.

- SB 560 A  Would have required insurers to count payments made by another person on behalf of an enrollee when calculating out-of-pocket maximum and other cost-sharing accumulators.
- SB 711  Requires Department of Consumer and Business Services to study the disparities in the cost of hormone replacement drugs based on sex and report the findings to the legislature by September 15, 2022.
- SB 763  Establishes pharmaceutical representative licensure through Department of Consumer and Business Services and specifies duties and responsibilities for licensed pharmaceutical representative.
- SB 764 A  Would have required court to presume that a resolution agreement that ends a dispute over an alleged infringement of a patent, or a violation of other protection for a protected drug, has anticompetitive effects if alleged infringer receives item of value or agrees to limit or stop researching, developing, manufacturing, marketing or selling a competing drug.
- SB 844  Establishes a Prescription Drug Affordability Board in Oregon to review specified prescription drug prices and annually report price trends, products reviewed, and recommendations to make prescription drugs more affordable.
- SB 848 A  Would have established the Office of Pharmaceutical Purchasing in Oregon Health Authority to support collaborative purchasing of pharmaceuticals in the state.
- HB 2074  Increases annual prescription monitoring program fees for individuals licensed by the Oregon Board of Pharmacy to prescribe controlled substances from \$25 to \$35.
- HB 2376  Would have required certain health care professionals to offer a prescription for naloxone if a patient was also prescribed opioids to reduce the risk of an opioid overdose.
- HB 2648  Allows Oregon pharmacies to dispense pseudoephedrine (e.g., Sudafed) without a prescription if the pharmacy uses an electronic tracking system and the individual provides valid identification.
- HB 2958  Requires commercial health insurers to cover antiretroviral prescription drugs and allows pharmacists to prescribe and dispense these drugs.

Public Health

- SB 64 ✓ Modifies aspects of programs in Oregon Health Authority's Public Health Division, including tobacco prevention, lead-based paint protection, and school-based health center promotion.
- SB 96 ✓ Authorizes the Oregon Liquor Control Commission to regulate the testing and labeling of inhalant delivery systems that include industrial hemp-derived vapor items.
- SB 587 ✓ Prohibits the sale of tobacco products and inhalant delivery systems in Oregon unless the retailer is licensed by the Department of Revenue.
- SB 719 A ✗ Would have required Oregon Health Authority and local public health administrators to release aggregate information about reportable disease investigations upon receipt of a public records request if the release did not identify individual cases or sources of information.
- HB 2076 ✗ Would have established the Emergency Health Care Systems Program in Oregon Health Authority.
- HB 2077 ✓ Grants Oregon Health Authority's Lead-Based Paint Program additional authority to clean up lead-based paint hazards.
- HB 2261 ✓ Prohibits the remote sale of inhalant delivery systems in Oregon.
- HB 2421 A ✗ Would have created the Oregon Kidney Disease Prevention and Education Task Force.
- HB 2965 ✓ Extends the deadline for local health authorities to submit plans to Oregon Health Authority to modernize public health in Oregon.
- HB 2987 ✗ Would have expanded the list of diseases for which newborns are tested in Oregon.
- HB 3107 A ✗ Would have funded Oregon Health Authority to test newborns for spinal muscular atrophy in Oregon.
- HR 6 ✓ Declares racism as a public health crisis in Oregon.

Other Legislation

- SB 700 A ✗ Would have established the Oregon Brain Injury Board to provide services to individuals with brain injuries and to support research and education related to brain injuries.
- SB 741 ✓ Repeals the obsolete reporting requirements and sunset of the Central Oregon Health Council.