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Legislative Clinicians’ Caucus Applauds
Bipartisan Health Care Policy Achievements
of the 2022 Short Session

SALEM, OR - Last week, the Oregon Legislature concluded its 2022 short session with historic investments in healthcare infrastructure and workforce development. The Legislative Clinicians' Caucus applauds their colleagues for supporting these critical investments to support healthcare providers and families across the state.

Access to Care
This session, the Oregon Legislature made investments to increase access to healthcare for low-income communities across the state. SB 1529 requires insurers to provide three primary care or behavioral healthcare visits annually without a co-pay, removing the often prohibitive point-of-service cost-sharing for patients for these three visits.

In 2020, the federal government declared a Public Health Emergency and required states to keep people on Medicaid regardless of changes to their income during the emergency period. The Public Health Emergency is currently set to end in April 2022, triggering a requirement for states to redetermine Medicaid eligibility for current enrollees. HB 4035 establishes goals for OHA as they work through the redetermination process, including maintaining continuity of care and
minimizing disruption. It also creates a task force to establish a bridge program that will provide affordable health insurance for Oregonians at the edge of Medicaid eligibility.

The Legislature also passed HB 4052 which aims to address the racial disparities in healthcare outcomes by establishing a pilot program for two culturally and linguistically specific mobile health units for individuals who are Black, Indigenous, people of color, or members of tribes. This is an important first step in addressing the public health crisis of racism.

“I originally ran for office to protect Medicaid coverage for vulnerable populations, expand access to primary care and behavioral healthcare, and be a voice for nurses,” said Rep. Rachel Prusak (D-West Linn). “As a nurse practitioner I see the emotional toll lack of health insurance has on people. I also see the toll the pandemic had on our nurses. I’m proud of the work we did in the short session to expand access to care and protect our healthcare workers.”

Public Health
Oregon has been modernizing its public health system for several years, and SB 1554 will study the public health response to the COVID-19 pandemic through this lens. Independent consultants will evaluate various elements of this response including resource utilization, emergency management coordination with the public health system, enforcement of evidence-based practices, public health workforce challenges, and epidemiological and capacity issues, among others. This study will culminate in three reports, with the final report and recommendations due September 1, 2023.

HB 4150 creates a Community Information Exchange (CIE) Workgroup to coordinate physical, mental, and social health service delivery across the state. Implementation of a statewide CIE in Oregon will allow community-based organizations, state agencies, health systems, county health departments, social service agencies, and technology partners to coordinate efforts to assess and address the social determinants of health.

“A statewide Community Information Exchange will revolutionize how effectively and efficiently we can care for every Oregonian,” said Rep. Maxine Dexter (D-NW Portland and NE Washington County). “This bill will allow us to make sure we do the research and outreach that is necessary to lay the groundwork for a secure, functional, and equitable CIE.”

Behavioral Health
HB 4045 funds existing evidence-based hospital-based violence intervention programs and creates a path for Medicaid reimbursement for this work.

“Community violence is costing our state and our communities dearly. Every part of Oregon has been touched by gun violence, suicide, and domestic violence,” Rep. Lisa Reynolds (D-Portland)
said. “We have an opportunity to stop the cycle of trauma and violence by investing in evidence-based intervention programs.”

The Legislature also took action to address public health needs related to drug use and community violence prevention. **HB 4098** establishes the Opioid Settlement Prevention, Treatment, and Recovery Board within OHA to direct class action settlement revenue from several opioid distributors.

**Workforce Development**

The COVID-19 pandemic has placed increased stress on Oregon’s already overburdened healthcare system, resulting in a worsening of healthcare staffing issues. This session, the Legislature took action to address the needs of healthcare workers, passing **HB 4003**, which will meet some of the immediate needs of our nurses and healthcare system and help build up Oregon’s nursing workforce for the future. The bill also increases the scope of emergency nursing licenses, gives nurses access to mental health supports, and creates a nursing student program with licensure requirements. This is one step in addressing the workforce shortages in nursing.

The Legislature also worked to address staffing issues in behavioral health by passing **HB 4004** which will distribute $132 million in grant funds to behavioral health providers for staff compensation to maintain our workforce and improve recruitment.

**HB 4096** allows an out-of-state licensed healthcare practitioner to provide voluntary, uncompensated care in Oregon for up to 30 days. This bill will help alleviate staffing issues and allow volunteer healthcare workers to serve populations that might not otherwise have access.

The state Legislature also approved $45 million for the Oregon Health and Sciences University's 30-30-30 plan to address the state's healthcare workforce shortage by 2030. The program aims to increase graduates in their clinical programs by 30% or around 2,000 additional nurses, clinical psychologists, physician assistants, nutritionists, and public health professionals within the next decade. This allocation also creates an Opportunity Fund to increase student diversity to 30% with loan repayment, tuition assistance, and other retention incentives.

**Dental Health**

Oral health is essential for overall health, but many Oregonians lack access to dental healthcare. This session, the Legislature passed **HB 4095** which establishes the Veterans Dental Program to provide dental care for low-income veterans. Currently, the VA provides limited dental benefits, leaving most veterans unable to access dental care. This bill will provide dental care to low-income veterans regardless of their VA status. “As a dentist I know how difficult it has been for our veterans to afford a dental visit,” said Rep. Cedric Hayden (R-Roseburg). “I am pleased
with the legislature's unanimous support for our veterans' expanded access to their oral healthcare needs.”

As the COVID-19 pandemic has made abundantly clear, a comprehensive approach to tackling the systemic issues of our healthcare systems is needed in order to ensure the health and safety of our communities. With these investments in provider workforce, statewide systems, and at-risk communities, Oregon is strategically laying the groundwork for addressing the healthcare challenges of the future.

“The health policy proposals & budget allocations we accomplished in 2022 advance important work throughout our state, particularly for those living with mental illness, those with economic insecurity, BIPOC, and rural communities,” stated Sen. Elizabeth Steiner Hayward (D-Portland).

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