



SENATE MAJORITY OFFICE

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Senate Votes To Maintain Health Care Funding, Draw Federal Tax Dollars Back to Oregon

Assessment on hospitals and insurance companies qualifies the state for a 3 to 1 match

SALEM, OR – The Oregon Senate voted today to renew funding for the Oregon Health Plan, the program that makes health care affordable for 1.4 million Oregonians. An assessment on hospitals and insurers qualifies the state to receive matched funding at a rate of 3 to 1 in federal tax dollars returning to Oregon. The bill extends the funding source through 2032.

“The Oregon Health Plan is critical for the health of Oregonians and the strength of our health care economy,” said **Senate Committee on Revenue Chair Mark Meek (D – Happy Valley)**. “That’s why a coalition of health systems, medical care providers, and community advocates in Oregon all backed this investment in our state’s Medicaid program.”

The bill, SB 2010, extends Oregon’s Hospital and Insurance Assessments, very common tools for funding Medicaid programs. Every other state except Alaska uses some form of provider charge to help pay for their state’s portion of the costs. Oregon’s provider assessment program was first adopted in Oregon in 2003, when the House was controlled by a 10-seat Republican majority and the Senate was evenly split.

“The Oregon Health Plan is health insurance for half of Oregon’s children, and it is a major source of support for local hospitals and clinics,” said **Senate Health Care Committee Chair Deb Patterson (D – Salem)**. “The Senate’s vote today puts our state in the best financial position to continue the program.”

The bill passed in a vote of 22 to 5 and now goes to Governor Tina Kotek for signing. The legislation passed the Oregon House of Representatives February 27.

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