

**REVENUE:** May have revenue impact, statement not yet issued

**FISCAL:** May have fiscal impact, statement not yet issued

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<b>Action:</b>	Do Pass as Amended and Be Printed Engrossed and Be Referred to the Committee on Ways and Means by Prior Reference
<b>Vote:</b>	5 - 0 - 2
<b>Yeas:</b>	Monnes Anderson, Morrisette, Morse, Bates, Westlund
<b>Nays:</b>	0
<b>Exc.:</b>	Kruse, Winters
<b>Prepared By:</b>	Ilana Weinbaum, Administrator
<b>Meeting Dates:</b>	4/9, 4/11, 4/16, 4/18, 4/23, 4/25

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**WHAT THE MEASURE DOES:** Creates the Healthy Oregon Act and identifies principles on which the act is based. Establishes the Oregon Health Fund Program (“Program”) and goals. Establishes the Oregon Health Trust Board (“Board”) to administer the Program and specifies qualifications for Board members, term limits and administrative processes. Directs the Governor to appoint an executive director to establish administrative framework, set up operational space and hire necessary staff. Limits the term of original executive director and requires board to appoint a director to serve at its pleasure. Establishes the Oregon Health Fund (“Health Fund”) and specifies possible sources of contributions. Requires Board to establish federal subcommittee to examine and recommend exemptions from federal law that impede achievement of act and to request Oregon’s congressional delegation to hold hearings on federal policies through the state and in Washington, D.C. Requires Board to develop a comprehensive plan to achieve the goals of the act, based on recommendations of finance, delivery, benefits and eligibility subcommittees. Requires delivery subcommittee to develop requirements for entities that will contract with board to provide coverage to Program participants. Directs the Oregon Health Policy Commission, the Office of Oregon Health Policy and Research (OHPR), the Health Service Commission and the Medicaid Advisory Committee to compile data and conduct research to inform decision-making of the subcommittees. Requires Board to report to the legislature by February 29, 2008 on the subcommittees’ progress. Requires Board to hold public hearings on the comprehensive plan and to present the finalized comprehensive plan to the Governor, Speaker of the House of Representatives and President of the Senate by October 1, 2008. Requires all Oregon residents, not covered by an insurance plan or eligible for public benefits, to participate in the Program and allows all other Oregonian residents or persons whose primary employment is located in the state to choose to participate. Requires OHPR to develop a plan for evaluating the implementation and outcomes of the comprehensive plan. Requires Board to establish a statewide toll-free telephone number to provide information to persons experiencing barriers to access. Brings OHPR and the Oregon Prescription Drug Program under the Board and transfers associated funds to the Health Fund. Appropriates money from the General Fund to the Health Fund. Establishes operative dates for sections of the act. Declares emergency, effective on passage.

**ISSUES DISCUSSED:**

- Successes and failures of current health care system
- Comprehensive health plan should build on employer-based system and proven programs around the state
- Roles for existing state agencies in developing and implementing the comprehensive health care reform plan
- Membership and roles of Oregon Health Trust Fund Board and subcommittees
- Ways in which current federal laws impede state’s ability to achieve universal access to care
- Need to achieve balance between providing proper guidance to board and allowing enough flexibility for experts to be innovative in developing details of comprehensive health reform plan

**EFFECT OF COMMITTEE AMENDMENT:** Replaces original measure.

**BACKGROUND:** SB 329 was the result of the work of the Interim Senate Commission on Health Care Access and Affordability. The commission's proposal was based on the consensus that incremental change cannot solve Oregon's health care crisis and that comprehensive reform is required. The Senate Special Committee on Health Care Reform considered this proposal, along with various comprehensive health care reform plans proposed by other stakeholders and public testimony, and combined various ideas into SB 329 A, the Healthy Oregon Act. The Healthy Oregon Act is based on the principles of equity, equitable financing, population benefit, shared responsibility, education, efficiency, explicit decision-making, transparency, economic sustainability, aligned financial incentives, wellness, community-based, and coordination.