

**REVENUE:** No revenue impact

**FISCAL:** Fiscal statement issued

---

<b>Action:</b>	Without Recommendation as to Passage, but with Amendments and Be Printed Engrossed and Be Referred to the Committee on Ways and Means
<b>Vote:</b>	9 - 0 - 1
<b>Yeas:</b>	Barnhart, Berger, Beyer, Esquivel, Freeman, Garrett, Holvey, Wingard, Kotek
<b>Nays:</b>	0
<b>Exc.:</b>	Olson
<b>Prepared By:</b>	Cheyenne Ross, Administrator
<b>Meeting Dates:</b>	2/6

---

**WHAT THE MEASURE DOES:** Approves Oregon Health Authority (OHA) proposals for Coordinated Care Organizations (CCOs). Permits OHA and the Department of Consumer and Business Services (DCBS) to enter into agreements regarding disclosure of information held by DCBS for specified use by OHA. Prohibits CCOs from discriminating in participation or reimbursement of health care providers. Requires quarterly reporting by OHA to legislature during period of transition to a coordinated care model. Updates statutory references and makes other technical changes. Declares emergency, effective on passage.

**ISSUES DISCUSSED:**

- Provisions of measure

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

**BACKGROUND:** The Oregon Integrated and Coordinated Health Care Delivery System was created in 2011 through House Bill 3650, to replace managed care systems over a period of transition, for recipients of medical assistance. Under the new system, Coordinated Care Organizations (CCOs) will replace the current managed care organizations, mental health organizations, and dental care organizations for Medicaid and Oregon Health Plan recipients. Legislative approval is required for the Oregon Health Authority to obtain necessary federal approval of changes to Medicaid and to ensure eligibility for related grant funding. House Bill 4153, as amended, provides that legislative approval.