

REVENUE: No revenue impact
FISCAL: Fiscal statement issued

Action:	Do Pass as Amended and Be Printed Engrossed and Be Referred to the Committee on Ways and Means
Vote:	4 - 0 - 1
Yeas:	Knopp, Kruse, Shields, Monnes Anderson
Nays:	0
Exc.:	Steiner Hayward
Prepared By:	Sandy Thiele-Cirka, Administrator
Meeting Dates:	2/21, 4/16

WHAT THE MEASURE DOES: Requires coordinated care organization (CCO) and community advisory council to adopt health improvement plan. Specifies strategies to be included in plan. Specifies entities to be involved with development of health improvement plan. Authorizes Oregon Health Authority (OHA) provide incentive grants. Directs CCOs submit report to OHA, and OHA to compile information and present to Legislative Assembly by December 31, 2014. Sunsets on convening of 2015 Legislative Assembly. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Importance of school-based health centers (SBHCs) and coordination with coordinated care organizations (CCOs)
- Medical records integration
- Local community involvement
- SBHCs and patient centered-primary care home
- Positive impacts of SBHCs
- Health care reform and education system reform
- Proposed amendments

EFFECT OF COMMITTEE AMENDMENT: Replaces original measure.

BACKGROUND: Coordinated Care Organizations (CCOs) have been directed by the Oregon Health Authority (OHA) to reduce the health care cost curve by 6 percent over the next 4 years. Many of the efforts to achieve these savings will be focusing on individuals who over-utilize emergency rooms, and/or adults with serious chronic or mental health conditions. Supporters assert that many prevention programs and children’s health programs have been in place for a long time and have a proven record of success, and are concerned that these programs will not be a focus of the CCOs in many areas.

Senate Bill 436-A requires CCOs and the community advisory council to adopt community health improvement plans. Additionally, the measure specifies the plan goals and local programs that are associated with children, families that should be involved.

FISCAL IMPACT OF PROPOSED LEGISLATION

Measure: SB 436 - A

Seventy-Seventh Oregon Legislative Assembly – 2013 Regular Session
Legislative Fiscal Office

*Only Impacts on Original or Engrossed
Versions are Considered Official*

Prepared by: Kim To
Reviewed by: Linda Ames
Date: 4/22/2013

Measure Description:

Requires coordinated care organizations, by December 1, 2017, to maximize use of school-based health centers and to coordinate care with certain programs and entities.

Government Unit(s) Affected:

Oregon Health Authority (OHA)

Local Government Mandate:

This bill does not affect local governments' service levels or shared revenues sufficient to trigger Section 15, Article XI of the Oregon Constitution.

Analysis:

Senate Bill 436 specifies the requirements for community health improvement plans adopted by coordinated care organizations and their community advisory council. The bill authorizes the Oregon Health Authority (OHA) to provide incentive grants to coordinated care organizations for the purpose of contracting with individuals or organizations to help coordinate integration strategies identified in the community health improvement plans. The bill requires each coordinated care organization to report to OHA on the progress of the integration strategies. OHA is directed to compile the information and report to the legislature by December 31, 2014. The bill sunsets on the convening of the 2015 Legislative Assembly. The bill contains an emergency clause and takes effect on passage.

This bill is anticipated to have a fiscal impact on the Oregon Health Authority. However, the full impact is indeterminate, at this time. The bill authorizes the Oregon Health Authority (OHA) to provide incentive grants to coordinated care organizations for the purpose of contracting with individuals or organizations to help coordinate integration strategies identified in the community health improvement plans. Should this bill become law, OHA anticipates establishing one full-time limited duration Program Analyst 2 position to work with incentive grantees. OHA estimate the Personal Services, and related Services and Supplies for this position to be \$151,199 Total Funds. At this time, OHA cannot predict the number or amount of incentive grants that could be provided to coordinated care organizations under the provisions of this bill.