

Senate Bill 439

Sponsored by Senator STEINER HAYWARD (Presession filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Establishes Task Force on Oregon's Primary Care Workforce.

Sunsets task force on date of convening of 2014 regular session of Legislative Assembly.

Transfers Primary Care Services Program from Office of Rural Health to Oregon Health Authority. Requires authority to establish by rule annual cap on payments to practitioners under program.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to primary care; creating new provisions; amending ORS 442.550, 442.555, 442.560 and
3 442.570; and declaring an emergency.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1. (1) The Task Force on Oregon's Primary Care Workforce is established,**
6 **consisting of nine members appointed as follows:**

7 (a) **The President of the Senate shall appoint three members.**

8 (b) **The Speaker of the House of Representatives shall appoint three members.**

9 (c) **The Governor shall appoint three members with expertise in the effective delivery of**
10 **primary care and in health care workforce issues.**

11 (2) **The task force shall study:**

12 (a) **The effectiveness of the Primary Care Services Program in addressing the shortage**
13 **of providers of primary care in this state that is anticipated to occur with the implementa-**
14 **tion of the Patient Protection and Affordable Care Act (P.L. 111-148) in 2014, and other possi-**
15 **ble solutions to address the shortage; and**

16 (b) **The best use of the \$2 million that the Centers for Medicare and Medicaid Services**
17 **is requiring the state to expend as a condition of receiving federal financial participation in**
18 **the costs of operating the Oregon Integrated and Coordinated Health Care Delivery System**
19 **established by ORS 414.620.**

20 (3) **A majority of the voting members of the task force constitutes a quorum for the**
21 **transaction of business.**

22 (4) **Official action by the task force requires the approval of a majority of the voting**
23 **members of the task force.**

24 (5) **The task force shall elect one of its members to serve as chairperson.**

25 (6) **If there is a vacancy for any cause, the appointing authority shall make an appoint-**
26 **ment to become immediately effective.**

27 (7) **The task force shall meet at times and places specified by the call of the chairperson**
28 **or of a majority of the voting members of the task force.**

29 (8) **The task force may adopt rules necessary for the operation of the task force.**

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted.
New sections are in **boldfaced** type.

1 **(9) The task force shall report its findings and recommendations to the Governor and to**
 2 **the Legislative Assembly in the manner provided by ORS 192.245 no later than October 1,**
 3 **2013.**

4 **(10) The Oregon Health Authority shall provide staff support to the task force.**

5 **(11) Members of the task force are not entitled to compensation, but may be reimbursed**
 6 **for actual and necessary travel and other expenses incurred by them in the performance of**
 7 **their official duties in the manner and amounts provided for in ORS 292.495. Claims for ex-**
 8 **penditures shall be paid out of funds appropriated to Oregon Health Authority for purposes of**
 9 **the task force.**

10 **(12) All agencies of state government, as defined in ORS 174.111, are directed to assist**
 11 **the task force in the performance of its duties and, to the extent permitted by laws relating**
 12 **to confidentiality, to furnish such information and advice as the members of the task force**
 13 **consider necessary to perform their duties.**

14 **SECTION 2.** ORS 442.550 is amended to read:

15 442.550. As used in ORS 442.550 to 442.570:

16 (1) “Barriers to accessing health care” means being enrolled in Medicare or the state medical
 17 assistance program or not having health insurance coverage.

18 (2) “Dentist” means any person licensed to practice dentistry under ORS chapter 679.

19 (3) “Naturopathic physician” means any person who holds a degree of Doctor of Naturopathic
 20 Medicine and who is licensed to practice medicine under ORS chapter 685.

21 (4) “Nurse practitioner” means any person licensed under ORS 678.375.

22 (5) “Pharmacist” means any person licensed as a pharmacist under ORS chapter 689.

23 (6) “Physician” means any person who holds a degree of Doctor of Medicine or Doctor of
 24 Osteopathy and who is licensed to practice medicine under ORS chapter 677.

25 (7) “Physician assistant” means any person licensed under ORS 677.495 and 677.505 to 677.525.

26 (8) “Qualifying loan” means any loan made to a student of naturopathic medicine, medical stu-
 27 dent, physician assistant student, dental student, pharmacy student or nursing student under:

28 (a) Common School Fund loan program under ORS 348.040 to 348.090;

29 (b) Programs under Title IV parts B, D and E, of the Higher Education Act of 1965, as amended;
 30 and

31 (c) The Health Professions Student Loan, Nursing Student Loan, Health Education Assistance
 32 Loan and Primary Care Loan programs administered by the United States Department of Health and
 33 Human Services.

34 (9) “Qualifying practice site” means:

35 (a) A rural hospital as defined in ORS 442.470;

36 (b) A rural health clinic as defined in 42 U.S.C. 1395x(aa)(2);

37 (c) A pharmacy that is located in a medically underserved rural community in Oregon or a
 38 federally designated health professional shortage area and that is not part of a group of six or more
 39 pharmacies under common ownership;

40 (d) Another practice site in a medically underserved rural community in Oregon; or

41 (e) An urban practice site at which the practitioner applying for or receiving loan repayments
 42 under ORS 442.550 to 442.570 attests a willingness to serve patients with barriers to accessing
 43 health care in at least the same proportion to the practitioner’s total number of patients as the
 44 number of individuals with barriers to accessing health care residing in the county where the
 45 practice site is located, as determined by the [Office of Rural Health] **Oregon Health Authority,**

1 represents to the total number of residents in the county.

2 **SECTION 3.** ORS 442.555 is amended to read:

3 442.555. (1) There is created **in the Oregon Health Authority** the Primary Care Services Pro-
4 gram, to be administered by the [*Office of Rural Health*] **authority or by a third party contracting**
5 **with the authority**, pursuant to rules adopted by the [*office*] **authority**. The purpose of the program
6 is to provide loan repayments on behalf of naturopathic physicians, physicians, physician assistants,
7 dentists, pharmacists and nurse practitioners who agree to practice in a qualifying practice site.

8 (2) To be eligible to participate in the program, a prospective naturopathic physician, physician,
9 physician assistant, dentist, pharmacist or nurse practitioner shall submit an application to the [*of-*
10 *fice*] **authority**. Applicants who are selected for participation according to criteria adopted by the
11 [*office*] **authority** shall sign a primary care service agreement stipulating that the applicant agrees
12 to abide by the terms stated in ORS 442.560.

13 (3) Subject to available resources, the [*office*] **authority** may enter into primary care service
14 agreements with prospective naturopathic physicians, physicians, physician assistants, dentists,
15 pharmacists and nurse practitioners. The [*office*] **authority** may give preference to prospective
16 naturopathic physicians, physicians, physician assistants, dentists, pharmacists and nurse practi-
17 tioners who agree to practice in a qualifying practice site or a community that has contributed funds
18 to the Primary Care Services Fund.

19 (4) The [*office*] **authority** shall adopt criteria to be applied to determine medically underserved
20 rural communities and qualifying practice sites for purposes of ORS 442.550 to 442.570 and for the
21 purposes of compliance with 42 U.S.C. 1395x(aa)(2), defining rural health clinics.

22 (5) A qualifying practice site shall submit an application to the [*office*] **authority** to request a
23 designation as a qualifying practice site. The [*office*] **authority** shall make a list of qualifying prac-
24 tice sites available to prospective naturopathic physicians, physicians, physician assistants, dentists,
25 pharmacists and nurse practitioners.

26 **SECTION 4.** ORS 442.560 is amended to read:

27 442.560. (1) Prospective naturopathic physicians, physicians, physician assistants, dentists,
28 pharmacists and nurse practitioners who wish to participate in the Primary Care Services Program
29 shall agree to practice in a qualifying practice site in Oregon for at least three full years following
30 completion of any residency requirements or the execution of the primary care service agreement,
31 whichever comes later.

32 (2) For not less than three and not more than six years, the [*Office of Rural Health*] **Oregon**
33 **Health Authority** shall annually pay each participant in the Primary Care Services Program an
34 amount equal to one-third of the outstanding balances on qualifying loans made to the participant
35 up to [*a maximum of \$25,000 each year*] **an annual maximum to be established by the authority**
36 **by rule**. To the greatest extent practicable, 75 percent of the moneys available for the program shall
37 be paid to participants practicing in rural areas and 25 percent of the moneys available for the
38 program shall be paid to participants practicing in urban areas.

39 (3) If the participant does not complete the full service obligation under subsection (1) of this
40 section, the participant shall be liable for the amount of all payments made under subsection (2) of
41 this section and any penalty assessed according to criteria adopted by the [*office*] **authority**. Any
42 amounts determined to be due under this section shall be collected by the Collections Unit in the
43 Department of Revenue under ORS 293.250.

44 (4) The [*office*] **authority** shall adopt criteria for waiver of all or part of the fees and penalties
45 owed to the [*office*] **authority** due to circumstances that prevent the participant from fulfilling the

1 service obligation.

2 **SECTION 5.** ORS 442.570 is amended to read:

3 442.570. [(1)] There is established in the State Treasury a fund, separate and distinct from the
4 General Fund, to be known as the Primary Care Services Fund. Moneys in the Primary Care Ser-
5 vices Fund are continuously appropriated to the Oregon Department of Administrative Services for
6 allocation to the Office of Rural Health for investments as provided by ORS 293.701 to 293.820, for
7 expenses and payments by the office in carrying out the purposes of ORS 315.613, 315.616, 315.619,
8 353.450, 442.470, 442.503, [and 442.550 to 442.570] **442.561, 442.562, 442.563, 442.564, 442.566 and**
9 **442.568.** Interest earned by the fund shall be credited to the fund.

10 [(2) *The office shall seek matching funds from the federal government and from communities that*
11 *benefit from placement of participants under ORS 442.550 to 442.570. The office shall establish a pro-*
12 *gram to enroll interested communities in this program and deposit moneys from the matching funds and*
13 *from the Primary Care Services Program in the Primary Care Services Fund. In addition, the office*
14 *shall explore other funding sources including federal grant programs.*]

15 **SECTION 6.** The amendments to ORS 442.550, 442.555, 442.560 and 442.570 by sections 2
16 to 5 of this 2013 Act become operative July 1, 2013.

17 **SECTION 7.** (1) The duties, functions and powers of the Office of Rural Health relating
18 to the Primary Care Services Program are imposed upon, transferred to and vested in the
19 Oregon Health Authority on the operative date specified in section 6 of this 2013 Act.

20 (2) The office shall deliver to the authority all records and property within the jurisdic-
21 tion of the office that relate to the duties of administering the Primary Care Services Pro-
22 gram.

23 (3) The transfer of the Primary Care Services Program to the authority does not affect
24 any action, proceeding or prosecution involving or with respect to the program begun before
25 and pending at the time of the transfer, except that the authority is substituted for the Of-
26 fice of Rural Health in the action, proceeding or prosecution.

27 (4) Nothing in the transfer of the Primary Care Services Program from the office to the
28 authority relieves a person of a liability, duty or obligation accruing under or with respect
29 to the program. The authority may undertake the collection or enforcement of any such li-
30 ability, duty or obligation.

31 (5) The rights and obligations of the office legally incurred under contracts, leases and
32 business transactions executed, entered into or begun before the operative date specified in
33 section 6 of this 2013 Act accruing under or with respect to the Primary Care Services Pro-
34 gram are transferred to the authority. For the purpose of succession to these rights and
35 obligations, the authority is a continuation of the office and not a new entity.

36 **SECTION 8.** Section 1 of this 2013 Act is repealed on the date of the convening of the 2014
37 regular session of the Legislative Assembly as specified in ORS 171.010.

38 **SECTION 9.** This 2013 Act being necessary for the immediate preservation of the public
39 peace, health and safety, an emergency is declared to exist, and this 2013 Act takes effect
40 on its passage.

41