77th OREGON LEGISLATIVE ASSEMBLY – 2014 Regular Session **MEASURE: HB 4108 A CARRIER:**

STAFF MEASURE SUMMARY

House Committee on Health Care

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 by Prior Reference

9 - 0 - 0 Vote:

> Clem, Conger, Harker, Kennemer, Keny-Guyer, Lively, Thompson, Weidner, Greenlick Yeas:

Nays: Exc.: 0

Prepared By: Sandy Thiele-Cirka, Administrator

Meeting Dates: 2/3, 2/5

WHAT THE MEASURE DOES: Requires Oregon Health Authority (OHA) to contract with community-based organizations (CCOs) to operate pilot projects that would provide used durable medical equipment to medical assistance recipients. Appropriates \$50,000 to OHA to provide grants to CCOs operating the pilot projects. Sunsets pilot projects January 2, 2018. Adds liability insurance requirement to the pilot program and limits the state liability. Adds Umatilla County to counties that may apply for the grant. Increases grant amount from \$50,000 to \$75,000. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Potential savings to the state and consumers
- Increasing demands for durable medical equipment
- Current resource center in Pendleton, Oregon
- Successful programs in other states
- Importance of accreditations for reuse program(s)
- Proposed amendments

EFFECT OF COMMITTEE AMENDMENT: Adds liability insurance requirement to pilot program and limits state liability. Adds Umatilla County to counties that may apply for grant. Increases grant amount from \$50,000 to \$75,000.

BACKGROUND: Durable medical equipment (DME) is any equipment that provides therapeutic benefits to a patient in need due to a medical condition and/or illness. DME includes, but is not limited to wheelchairs (manual and electric), traction equipment, canes, crutches, walkers, kidney machines, ventilators, oxygen monitors, lifts, etc. Used DME is often refurbished and issued to new clients, allowing the same equipment to serve several patients over time. Some states have enacted DME recycling programs, and proponents assert that such programs reduce the costs of providing DME to medical assistance recipients.