

PRELIMINARY STAFF MEASURE SUMMARY

CARRIER:

Senate Committee on Senate Health Care

REVENUE: No revenue impact**FISCAL: No fiscal impact****Action:****Vote:****Yeas:****Nays:****Exc.:****Prepared By:** Zena Rockowitz, Administrator**Meeting Dates:** 3/18

WHAT THE MEASURE DOES: Requires that health care practitioner is not required to submit credentialing information to the Oregon Health Authority (OHA) and submission of credentialing information is not condition of authorization to practice until: OHA has established an operational electronic system and date has passed by which OHA requires type of practitioner required to submit information. Directs OHA to consult with advisory workgroup about date. Requires that notice of rule must be provided at least six months before effective date by electronic mail to advisory workgroup and health care regulatory boards. Alters dates for OHA to report on implementation of electronic system to interim committees of Legislative Assembly by October 2016 and Legislative Assembly on or before February 2016.

ISSUES DISCUSSED:**EFFECT OF COMMITTEE AMENDMENT:**

BACKGROUND: The Oregon Medical Board (OMB) licenses physicians and other health care providers. Hospitals, insurers and health plans credential providers to work in their institutions or provide care to patients on their plans. Since most of the information that OMB staff verify is then re-verified by credentialing staff, the Oregon Common Credentialing Program was created under the Oregon Health Authority (OHA) in 2013 by Senate Bill 604 A. The law directs OHA to establish a single, mandatory electronic database that organizations seeking to credential providers must access to obtain the information. Due to the complexity of this process, OHA is developing a solution by procuring information technology and quality management services. OHA has drafted a request for proposal scheduled for release in April 2015. Proponents of the bill want more flexibility in the operational date of this program due to time constraints and ability for providers to give feedback.