

FISCAL IMPACT OF PROPOSED LEGISLATION**Measure: HB 2234 – B**Seventy-Eighth Oregon Legislative Assembly – 2015 Regular Session
Legislative Fiscal Office***Only Impacts on Original or Engrossed
Versions are Considered Official***

Prepared by: Kim To
Reviewed by: Linda Ames, Matt Stayner
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Measure Description:

Requires Oregon Health Authority and insurers to reimburse community assessment centers for child abuse medical assessment and related services.

Government Unit(s) Affected:

Department of Consumer and Business Services (DCBS), 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:

House Bill 2234 requires the Oregon Health Authority (OHA) to reimburse community assessment centers for services the centers provide to a child in conducting a child abuse medical assessment, including forensic interviews and mental health treatment. The bill directs OHA to adopt billing and payment mechanism to ensure that reimbursement is proportionate to the scope and intensity of the services provided. In addition, the bill requires private health insurance plans to provide payment to or reimburse community assessment centers for services the centers provide to a child in conducting a child abuse medical assessment, including forensic interviews and mental health treatment. The bill contains an emergency clause and takes effect on passage.

Department of Consumer and Business Services (DCBS)

With passage of this bill, DCBS staff would need to conduct rulemaking, educate internal and external stakeholders about the new requirements, and revise product standards. In addition, staff will be needed to track, investigate and prosecute complaints associate with these new requirements. DCBS anticipates carrying out this work with existing staff and resources.

However, the potential impact of this bill is indeterminate. The bill mandates new benefit coverage. If the services provided are not already required to be covered under other provisions of the health benefit plan, such as for treatment of mental or nervous conditions, this may be a new mandate. The Affordable Care Act (ACA) requires the state to fund the costs of any new state mandates for health coverage. Additionally, when that new mandate is part of a Qualified Health Plan, the state is required to pay for the resulting increase in cost to the plan that is subsidized by federal tax credits.

Note that Oregon has not adopted any new mandates; therefore there is no established process in place for covering new state mandates, and Legislative action might be required to clarify the process. It is unknown whether the state would be required to (1) pay the difference in premium between the plan premium with the new mandate versus without the mandate; or 2) the state would be required to actually pay the costs of the benefit provided when accessed by the insured. Furthermore, the source of funding to cover the costs of new mandates has not been identified.

Oregon Health Authority (OHA)

Passage of this bill is anticipated to have no fiscal impact to the Oregon Health Authority. Services required by this bill are currently covered by the Oregon Health Plan, and the billing codes required by the bill already exist.