Seventy-Eighth Oregon Legislative Assembly - 2015 Regular Session STAFF MEASURE SUMMARY Joint Committee On Ways and Means MEASURE: SB 695 B CARRIER: Rep. Hayden

Fiscal:	Fiscal impact issued	
Revenue:	No Revenue Impact	
Action Date:	06/24/15	
Action:	Do Pass.	
Meeting Dates:	06/24	
Vote:		
House		
	Yeas:	12 - Buckley, Gomberg, Huffman, Komp, McLane, Nathanson, Rayfield, Read, Smith, Whisnant, Whitsett, Williamson
<u>Senate</u>		
	Yeas:	12 - Burdick, Devlin, Girod, Hansell, Johnson, Monroe, Roblan, Shields, Steiner Hayward,
		Thomsen, Whitsett, Winters
Prepared By:	Linda Ames	, Budget Analyst

WHAT THE MEASURE DOES:

Repeals sunset on authority of Oregon Health Authority (OHA) to contract with prepaid managed care health services organizations to provide care to medical assistance recipients. Defines prepaid managed care health services organization as managed dental care, mental health or chemical dependency organization that contracts with OHA or coordinated care organization on prepaid, capitated basis. Directs OHA to study effectiveness of dental care organizations in providing dental care and integration of dental care organizations into coordinated care organizations. Allows contract with private entity to conduct study. Requires OHA to report effects to interim committee of Legislative Assembly and appropriates \$150,000 for biennium. Declares emergency, effective on passage.

ISSUES DISCUSSED:

• Removal of funding

EFFECT OF COMMITTEE AMENDMENT:

No amendment.

BACKGROUND:

House Bill 3650 (2011) and Senate Bill 1580 (2012) established the Oregon Integrated and Coordinated Health Care Delivery System to enroll individuals in the Oregon Health Plan (Medicaid program recipients) into coordinated care organizations. There are certain exceptions to enrollment in coordinated care organizations (e.g., people under age 18 years who are medically fragile) and about 50,000 members who are enrolled in prepaid managed care health services organizations. The legislation created a 2017 sunset on these organizations to provide medical care assistance on a prepaid capitated basis, which includes dental care organizations. Although these entities contract for the Oregon Health Plan enrollees, they do not hold an insurer certification from the Department of Consumer and Business Services.