HB 3396-A22 (LC 2044) 6/24/15 (LHF/ps)

## PROPOSED AMENDMENTS TO A-ENGROSSED HOUSE BILL 3396

On page 1 of the printed A-engrossed bill, line 2, after "ORS" delete the rest of the line and delete line 3 and insert "348.570 and 677.141 and section 5, chapter 913, Oregon Laws 2009; repealing ORS 348.303, 413.018, 413.127, 413.233, 442.535, 442.540, 442.545, 442.573, 442.574, 676.550, 676.552, 676.554 and 5 676.556; and declaring an emergency.

6 "Whereas the State of Oregon spends approximately \$30 million each year
7 on various incentive programs for health care professionals; and

8 "Whereas the incentive programs are effective but it is unclear whether 9 the programs produce the best results for the tax dollars spent on the pro-10 grams; and

11 "Whereas taxpayers deserve to have confidence that their tax dollars are 12 being spent in the most thoughtful way possible; and

13 "Whereas Oregonians and health care professionals in rural and medically 14 underserved areas need assurances that critical health care programs will 15 not be shut down without effective programs to replace them; and

Whereas this 2015 Act is intended to initiate a close look at how tax dollars are spent to ensure that taxpayers enjoy the best value possible; and "Whereas this 2015 Act is not intended to allow for incentive programs to be shut down before the programs can be retooled or replaced with more effective programs; now, therefore,".

Delete lines 5 through 24 and delete pages 2 through 4 and insert:

22 "SECTION 1. The Health Care Provider Incentive Fund is estab-

lished in the State Treasury, separate and distinct from the General
 Fund. Interest earned by the Health Care Provider Incentive Fund
 shall be credited to the fund. Moneys in the fund are continuously
 appropriated to the Oregon Health Authority to carry out section 2 of
 this 2015 Act.

6 "<u>SECTION 2.</u> (1) There is created in the Oregon Health Authority 7 a health care provider incentive program for the purpose of assisting 8 qualified health care providers who have committed to serving medical 9 assistance recipients in rural or medically underserved areas of this 10 state. The authority shall prescribe by rule:

"(a) Participant eligibility criteria, including the types of qualified
 health care providers who may participate in the program;

"(b) The terms and conditions of participation in the program, in cluding the duration of the term of any service agreement;

15 "(c) The types of incentives that may be provided;

16 "(d) If the funds allocated to the program from the Health Care 17 Provider Incentive Fund established under section 1 of this 2015 Act 18 are insufficient to provide assistance to all of the applicants who are 19 eligible to participate in the program, the priority for the distribution 20 of funds, based on guidance from the Health Care Workforce Com-21 mittee; and

"(e) The financial penalties imposed on an individual who fails to
 comply with terms and conditions of participation.

"(2) The authority may enter into contracts with one or more public or private entities to administer the program or parts of the program. "<u>SECTION 3.</u> (1) The Oregon Health Policy Board shall study and evaluate the effectiveness of financial incentives offered by the state to recruit and retain qualified health care providers in rural and medically underserved areas.

30 "(2) On the basis of the study, the board shall develop recommen-

1 dations with respect to:

"(a) The continuation, restructuring, consolidation or repeal of the
 incentives;

"(b) The priority for distribution of incentive funds allocated to the
program from the Health Care Provider Incentive Fund established
under section 1 of this 2015 Act to qualified health care providers; and
"(c) New financial incentive programs.

8 "(3) The recommendations must address, but need not be limited
9 to:

"(a) Financial assistance programs for students in both the publicly
 funded and private institutions in this state that provide post-graduate
 training in medical fields;

"(b) Loans, grants or other financial incentives to hospitals and
 teaching health centers for the purpose of establishing or expanding
 residency programs, including recommendations for the eligibility cri teria, repayment provisions, interest rates and other requirements for
 financial incentives;

"(c) Low-interest loans, short-term emergency funding or grants for
 type A, B and C hospitals that are at risk of closure due to financial
 instability;

"(d) Direct subsidies or bonus payments to qualified health care
 providers for services provided in rural and medically underserved
 areas;

"(e) Creation of a retirement plan to offer to licensed or certified providers as an incentive to provide services in rural and medically underserved areas and to medically underserved populations in this state;

"(f) The criteria for tax credits, including adding means testing or
 time limits;

30 "(g) Opportunities that are available to secure private or public,

1 local or federal matching funds; and

"(h) The definitions of rural area, medically underserved area and
qualified health care provider.

"(4) In developing recommendations under this section, the Oregon
Health Policy Board may consult with the Graduate Medical Education
Consortium, the Oregon Healthcare Workforce Institute, the Office
of Rural Health, the Oregon Center for Nursing or other appropriate
entities.

9 "(5) The Oregon Health Policy Board may contract with a public 10 or private entity to assist in the development of recommendations.

"(6) The Oregon Health Policy Board shall report on the progress 11 in developing recommendations under this section to the interim 12 committees of the Legislative Assembly related to health during the 13 interim committee meetings in November 2015 and to the committees 14 of the Legislative Assembly related to health during the 2016 regular 15 session. The board shall report its final recommendations to the in-16 terim committees of the Legislative Assembly, in the manner pre-17 scribed by ORS 192.245, no later than September 1, 2016. 18

"SECTION 4. In addition to and not in lieu of any other appropriation, there is appropriated to the Oregon Health Authority, for the biennium beginning July 1, 2015, out of the General Fund, the amount of \$180,000, which may be expended for carrying out section 3 of this 2015 Act.

<sup>24</sup> "<u>SECTION 5.</u> ORS 348.570 is amended to read:

"348.570. (1) There is established in the State Treasury a fund, separate
and distinct from the General Fund, to be known as the Oregon Student
Assistance Fund for investment as provided by ORS 293.701 to 293.857 and
for the payment of the expenses of the Higher Education Coordinating
Commission in carrying out the purposes of ORS 348.210 to 348.250, 348.285,
348.505 to 348.615, 348.696 and 348.992. Interest earned by the fund shall be

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"(2) There is established in the State Treasury a fund, separate and dis- $\mathbf{2}$ tinct from the General Fund, to be known as the Alternative Student Loan 3 Program Fund for investment as provided by ORS 293.701 to 293.857 and for 4 the payment of expenses of the commission in carrying out the purposes of  $\mathbf{5}$ ORS 348.625 to 348.695. This fund, including the interest earnings on the 6 fund, if any, is continuously appropriated to the commission for those pur-7 poses for which such funds were provided to, received or collected by the 8 9 commission.

"[(3)(a) There is established in the General Fund an account to be known as the Nursing Services Account. Funds in the account shall be used for the payment of expenses of the Nursing Services Program created in ORS 442.540.]

14 "[(b) The account shall consist of:]

<sup>15</sup> "[(A) Funds appropriated to the commission for deposit into the account;]

"[(B) Collections and penalties received by the Executive Director of the
 Office of Student Access and Completion under ORS 442.545; and]

"[(C) Any donations or grants received by the commission for purposes of
 the Nursing Services Program.]

20 "[(c) Any funds in the account that are not expended in any biennium shall 21 be retained in the account and may be expended in subsequent biennia.]

<sup>22</sup> "[(4)] (3) There is established in the State Treasury a fund, separate and <sup>23</sup> distinct from the General Fund, to be known as the Foster Youth Scholar-<sup>24</sup> ship Fund. Moneys received from appropriations, donations and grants shall <sup>25</sup> be credited to the fund. Moneys in the fund are continuously appropriated <sup>26</sup> to the commission for the purposes of investment, as provided by ORS 293.701 <sup>27</sup> to 293.857, and for carrying out the provisions of ORS 348.270 (1)(b). Interest <sup>28</sup> earned by the fund shall be credited to the fund.

<sup>29</sup> "[(5)] (4) There is established in the State Treasury a fund, separate and <sup>30</sup> distinct from the General Fund, to be known as the ASPIRE Program Fund. Moneys received from donations and grants shall be credited to the ASPIRE Program Fund. Moneys in the fund are continuously appropriated to the commission for the purposes of investment, as provided by ORS 293.701 to 293.857, and for carrying out the provisions of ORS 348.500. Interest earned by the fund shall be credited to the fund.

6 "[(6)(a)] (5)(a) There is established in the State Treasury the Nursing 7 Faculty Loan Repayment Fund, separate and distinct from the General Fund. 8 Interest earned on the Nursing Faculty Loan Repayment Fund shall be 9 credited to the fund. Moneys in the fund are continuously appropriated to 10 the commission for carrying out ORS 348.440 to 348.448. The Nursing Faculty 11 Loan Repayment Fund consists of:

"(A) Moneys appropriated to the commission for the Nursing Faculty
 Loan Repayment Program created in ORS 348.444; and

14 "(B) Grants, gifts or donations received by the commission for the pro-15 gram.

"(b) Any unexpended funds in the fund at the end of a biennium shall beretained in the fund and may be expended in subsequent biennia.

<sup>18</sup> "SECTION 6. ORS 677.141 is amended to read:

"677.141. (1) A physician issued a license under ORS 677.139 is subject to all the provisions of this chapter and to all the rules of the Oregon Medical Board. A physician issued a license under ORS 677.139 has the same duties and responsibilities and is subject to the same penalties and sanctions as any other physician licensed under this chapter.

<sup>24</sup> "(2) A physician issued a license under ORS 677.139 may not:

<sup>25</sup> "(a) Act as a dispensing physician as defined in ORS 677.010;

26 "(b) Administer controlled substances for the treatment of intractable 27 pain to a person located within this state;

"(c) Employ a physician assistant as defined in ORS 677.495 to treat a
 person located within this state; or

30 "[(d) Participate in the primary care provider loan repayment program

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1 created in ORS 413.233; or]

2 "[(e)] (d) Assert a lien for services under ORS 87.555.

"(3) A physician licensed under ORS 677.139 shall comply with all patient
confidentiality requirements of this state, except as those requirements are
expressly prohibited by the law of any other state of the United States where
a person's medical records are maintained.

"SECTION 7. Section 25, chapter 913, Oregon Laws 2009, as amended by
section 10, chapter 750, Oregon Laws 2013, is amended to read:

"Sec. 25. (1) Except as provided in subsection (2) of this section, a credit
may not be claimed under ORS 315.613 for tax years beginning on or after
January 1, [2016] 2018.

"(2) A taxpayer who meets the eligibility requirements in ORS 315.613 for
the tax year beginning on or after January 1, [2013] 2017, and before January
1, [2014] 2018, shall be allowed the credit under ORS 315.613 for any tax year:
"(a) That begins on or before January 1, [2023] 2027; and

"(b) For which the taxpayer meets the eligibility requirements of ORS315.613.

<sup>18</sup> "<u>SECTION 8.</u> ORS 413.018, 442.535, 442.540 and 442.545 are repealed.

"SECTION 9. ORS 348.303, 413.127, 413.233, 442.573, 442.574, 676.550,
 676.552, 676.554 and 676.556 are repealed.

"SECTION 10. Section 3 of this 2015 Act is repealed on January 2,
2017.

"<u>SECTION 11.</u> Sections 1, 2 and 13 of this 2015 Act and the amend ments to ORS 677.141 by section 6 of this 2015 Act become operative
 on January 1, 2018.

26 "SECTION 12. The repeal of ORS 348.303, 413.127, 413.233, 442.573,
 27 442.574, 676.550, 676.552, 676.554 and 676.556 by section 9 of this 2015 Act
 28 becomes operative January 2, 2018.

"<u>SECTION 13.</u> (1) Service agreements under ORS 442.574 and 348.303
 that are in effect on the operative date of this section shall remain in

1 effect for the term specified in the agreement.

"(2) Individuals participating in the primary care provider loan repayment program on the operative date of this section shall continue
to participate for the duration of the term of the individual's commitment made pursuant to ORS 413.233.

"(3) Nothing in the repeal of ORS 348.303, 413.233 and 442.574 relieves
a person of a liability, duty or obligation accruing under or with respect to ORS 348.303, 413.233 and 442.574. Payments made by participants to discharge an obligation arising under ORS 348.303 (6) or (7),
413.233 (2)(e) or 442.574 shall be deposited to the Health Care Provider
Incentive Fund established in section 1 of this 2015 Act.

"(4) The duties, rights and obligations of the Office of Rural Health
 under ORS 442.574 are transferred to the Oregon Health Authority.

"(5) Any unexpended balances of moneys in the Primary Health Care Loan Forgiveness Program Fund are transferred to the Health Care Provider Incentive Fund established under section 1 of this 2015 Act and shall be used by the Oregon Health Authority to carry out section 2 of this 2015 Act and to administer the service agreements entered into pursuant to ORS 442.574 that remain in effect under subsection (1) of this section.

"SECTION 14. The Office of Rural Health and the Oregon Health
Authority shall take any actions before January 1, 2018, that are necessary in order to carry out the provisions of section 13 of this 2015
Act on and after January 1, 2018.

"<u>SECTION 15.</u> This 2015 Act being necessary for the immediate
 preservation of the public peace, health and safety, an emergency is
 declared to exist, and this 2015 Act takes effect on its passage.".

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