78th Oregon Legislative Assembly - 2016 Regular Session STAFF MEASURE SUMMARY Joint Committee On Ways and Means

MEASURE: HB 4030 A CARRIER: Sen. Steiner Hayward

Fiscal:	Fiscal impact issued	
Revenue:	No Revenue Impact	
Action Date:	02/23/16	
Action:	Do Pass The A-Eng Bill.	
Meeting Dates:	02/23	
Vote:		
<u>Senate</u>		
	Yeas:	9 - Bates, Devlin, Hansell, Johnson, Monroe, Roblan, Shields, Steiner Hayward, Thomsen
	Nays:	1 - Girod
	Exc:	2 - Whitsett, Winters
House		
	Yeas:	12 - Buckley, Gomberg, Huffman, Komp, McLane, Nathanson, Rayfield, Read, Smith, Whisnant,
		Whitsett, Williamson
Prepared By:	Linda Ames	, Budget Analyst

WHAT THE MEASURE DOES:

Requires Oregon Health Authority (OHA) to amend Medicaid state plan to implement programs to increase medical assistance reimbursement paid to public providers of emergency medical services or other providers who contract with a local government. Specifies requirements of the programs. Directs OHA to convene a workgroup to develop recommendations for emergency medical services reimbursement to be in alignment with Oregon's Integrated and Coordinated Health Care Delivery System. Specifies membership and what the recommendations are to include. Specifies to report to the 2017 Legislative Assembly. Specifies that OHA develop and implement two programs to improve reimbursement for emergency medical services providers. Directs OHA to modify the proposed amendments to the Medicaid state plan if Centers for Medicare and Medicaid Services denies approval of the waiver amendment.

ISSUES DISCUSSED:

- Fiscal impact
- Expectations of workgroup

EFFECT OF COMMITTEE AMENDMENT:

No amendment.

BACKGROUND:

Oregon's Emergency Medical Services (EMS) system is made up of public sector EMS providers (fire departments/districts) and private sector ambulance companies. The Oregon Health Authority has reported that since the Medicaid enrollment expansion in January 2014, approximately 436,000 Oregonians have obtained coverage which is a 71 percent increase since 2013.

Currently, the reimbursement rate for the care and transport of Medicaid patients is far below the cost of providing EMS, while the demand for these services continue to grow.