

House Bill 4030

Sponsored by Representatives DOHERTY, BUCKLEY, WHISNANT; Representatives MCLAIN, NATHANSON, Senators DEVLIN, STEINER HAYWARD (at the request of Tualatin Valley Fire and Rescue) (Presession filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires Oregon Health Authority to amend Medicaid state plan to implement programs to increase medical assistance reimbursement paid to public providers of emergency medical services. Specifies requirements of programs.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to medical assistance reimbursement of emergency medical services; and declaring an
3 emergency.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1. Sections 2 and 3 of this 2016 Act are added to and made a part of ORS**
6 **chapter 413.**

7 **SECTION 2. (1) As used in sections 2 and 3 of this 2016 Act:**

8 (a) **“Emergency medical services” means the services provided by emergency medical**
9 **services providers to an individual experiencing a medical emergency in order to:**

10 (A) **Assess, treat and stabilize the individual’s medical condition; or**

11 (B) **Prepare and transport the individual by ground to a medical facility.**

12 (b) **“Emergency medical services provider” or “provider” means an entity, owned or op-**
13 **erated by a local government, a state agency or a federally recognized Indian tribe, that**
14 **employs or contracts with individuals who are licensed by the Oregon Health Authority un-**
15 **der ORS chapter 682 to provide emergency medical services.**

16 (c) **“Federal financial participation” means the portion of medical assistance expenditures**
17 **for emergency medical services that are paid or reimbursed by the Centers for Medicare and**
18 **Medicaid Services in accordance with the Medicaid state plan.**

19 (2) **Upon request, an emergency medical services provider that has entered into a pro-**
20 **vider agreement with the authority is eligible to receive Medicaid supplemental reimburse-**
21 **ment from the authority for the cost of providing emergency medical services to a medical**
22 **assistance recipient. The Medicaid supplemental reimbursement shall be added to the pay-**
23 **ment for the emergency medical services established by the authority in accordance with**
24 **ORS 414.065.**

25 (3)(a) **Except as provided in paragraph (b) of this subsection, the Medicaid supplemental**
26 **reimbursement paid to an emergency medical services provider shall be equal to the amount**
27 **of federal financial participation received by the authority for the provider’s cost for the**
28 **emergency medical services.**

29 (b) **The Medicaid supplemental reimbursement paid to a provider under this section may**
30 **not exceed the provider’s actual costs for the emergency medical services, determined in**

NOTE: Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 accordance with standards established by the authority, less the amount of reimbursement
2 that the provider is eligible to receive from all sources, including the payment amount for
3 emergency medical services established by the authority in accordance with ORS 414.065.

4 (4) An emergency medical services provider shall make readily available to the authority
5 documentation, data and certifications, as prescribed by the authority, necessary to establish
6 that the emergency medical services expenditures qualify for federal financial participation
7 and to calculate the amount of Medicaid supplemental reimbursement that is due.

8 (5)(a) Except as provided in paragraph (b) of this subsection, the authority shall modify
9 the method for calculating or paying the Medicaid supplemental reimbursement if modifica-
10 tion is necessary to ensure that emergency medical services expenditures qualify for federal
11 financial participation.

12 (b) This section does not authorize the payment of Medicaid supplemental reimbursement
13 to an emergency medical services provider if the provider has not entered into a provider
14 agreement, with the authority, to serve medical assistance recipients.

15 (c) If the Centers for Medicare and Medicaid Services approves the implementation of
16 this section and later revokes its approval or expresses its intent to revoke or refuse to re-
17 new its approval, the authority shall report the fact at the next convening of the interim or
18 regular session committees of the Legislative Assembly related to health care.

19 (6) General Fund moneys may not be used to implement this section. As a condition of
20 receiving Medicaid supplemental reimbursement, an emergency medical services provider
21 must enter into and comply with an agreement with the authority to reimburse the authority
22 for the costs of administering this section.

23 (7) This section applies only to emergency medical services providers that are reimbursed
24 by the authority on a fee-for-service basis.

25 **SECTION 3.** (1) The Oregon Health Authority shall develop and implement an intergov-
26 ernmental transfer program to provide for the transfer of funds from an emergency medical
27 services provider to the authority to pay the costs of providing emergency medical services
28 to members of a coordinated care organization. The authority shall pay any federal financial
29 participation received by the authority as a result of the transfer of funds to the coordinated
30 care organization. The coordinated care organization shall increase, by the same amount, the
31 amount of reimbursement paid to the emergency medical services provider for the costs of
32 the emergency medical services.

33 (2) The increased reimbursement paid under subsection (1) of this section shall be at
34 least actuarially equivalent to the Medicaid supplemental reimbursement for the emergency
35 medical services paid under section 2 of this 2016 Act.

36 (3) General Fund moneys may not be used to implement this section. As a condition of
37 participation in the intergovernmental transfer program described in subsection (1) of this
38 section, an emergency medical services provider must agree to pay a fee to reimburse the
39 authority for the costs of administering the program. The fee may not exceed 20 percent of
40 the cost of the emergency medical services provided. The authority shall allow up to 120
41 percent of the fee to be counted as an operating cost for providers.

42 (4) An emergency medical services provider shall make readily available to the authority
43 documentation, data and certifications, as prescribed by the authority, necessary to establish
44 that the emergency medical services expenditures qualify for federal financial participation
45 and to calculate the amount due to a coordinated care organization for the expenditures.

1 **(5) If the authority determines that any expenditure made by an emergency medical**
2 **services provider does not qualify for federal financial participation, the authority shall re-**
3 **turn the funds associated with the expenditure to the provider or refuse to accept the**
4 **transfer of funds associated with the expenditure.**

5 **(6) Participation by any coordinated care organization or emergency medical services**
6 **provider in the program must be voluntary.**

7 **(7) The authority shall consult with emergency medical services providers in the devel-**
8 **opment, implementation and operation of the intergovernmental transfer program.**

9 **SECTION 4. (1) No later than 60 days after the effective date of this 2016 Act, the Oregon**
10 **Health Authority shall submit to the Centers for Medicare and Medicaid Services amend-**
11 **ments to the Medicaid state plan that are necessary to implement sections 2 and 3 of this**
12 **2016 Act.**

13 **(2) Sections 2 and 3 of this 2016 Act become operative on the date that the Medicaid state**
14 **plan amendments necessary to implement each section are approved.**

15 **(3) The authority shall immediately notify the Legislative Counsel if the Centers for**
16 **Medicare and Medicaid Services approves or disapproves, in whole or in part, the implemen-**
17 **tation of sections 2 or 3 of this 2016 Act.**

18 **SECTION 5. This 2016 Act being necessary for the immediate preservation of the public**
19 **peace, health and safety, an emergency is declared to exist, and this 2016 Act takes effect**
20 **on its passage.**

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