# HB 2882 A -A6 STAFF MEASURE SUMMARY

### Senate Committee On Health Care

**Prepared By:** Oliver Droppers, LPRO Analyst **Meeting Dates:** 5/11, 5/30

### WHAT THE MEASURE DOES:

Requires a coordinated care organization (CCO) governing body to include a representative from at least one dental care organization that serves the members of that CCO. Provides that individuals be nominated by a dental care organization and that the representative be selected by the CCO. Declares an emergency, effective on passage.

REVENUE: No revenue impact. FISCAL: Minimal impact.

### **ISSUES DISCUSSED:**

## **EFFECT OF AMENDMENT:**

-A6 Removes the nomination process.

#### **BACKGROUND:**

A coordinated care organization (CCO) is a network of health care providers (physical health care, addictions and mental health care and sometimes dental care providers) that work together in their local communities to serve people who receive health care coverage under the Oregon Health Plan (OHP) (i.e., Medicaid). CCOs focus on prevention and helping people manage chronic conditions, such as diabetes. Currently, there are 16 CCOs operating in communities throughout the state. CCOs have the flexibility to support new models of care that are patient-centered and team-focused, and to help reduce health disparities.

Oregon law (ORS 414.625) specifies the membership composition of a CCO's governing board. All CCOs must include: (1) majority of persons that share in the financial risk of the organization, (2) major components of the health care delivery system, (3) at least two members from the community at large, and (4) at least one member of the community advisory council (CAC). Currently, CCOs are not required to have a dental care organization (DCO) on the governing board.

House Bill 2882-A requires a representative of a dental care organization serve as a member of the CCO governing body.