## **OREGON MEDICAL ASSOCIATION**



## **MEMORANDUM**

To: Sen. Steiner Hayward, Co-Chair, Joint Ways and Means Subcommittee on Human Services

Rep. Rayfield, Co-Chair, Joint Ways and Means Subcommittee on Human Services

Members of the Joint Ways and Means Subcommittee on Human Services

From: Courtni Dresser, OMA Government Relations

Trevor Beltz, OMA Government Relations

Date: June 28, 2017

Re: Support for the HB 3261-13 Amendments

In Oregon, the provision of health care in rural areas has been challenged by low numbers of providers as well as insufficient employment opportunities for spouses and partners of health care providers. As more Oregonians become insured and seek access to health care services, the need for an adequate and robust workforce becomes increasingly critical.

The Oregon Medical Association supports the continuation and improvement of the health care provider incentive programs currently available in Oregon, and believes that HB 3261, with the -13 amendments, will continue to encourage providers to practice in rural and underserved parts of our state.

Building from the passage of HB 3396 (2015), which created the Health Care Provider Incentive Fund, the -13 amendments to HB 3261 seek to continue and adequately fund critical incentive programs to our provider community in a flexible way. In addition, the -13 amendments would allow for a grant program to be established for health care workforce training programs.

In the past, a shortcoming of these provider incentive programs has been the lack of data and analysis to properly assess their impact and effectiveness; the OMA supports the use of needs assessments and enhanced data reporting in this legislation to increase access and provide the best possible care to areas that need it most.

The OMA appreciates the work of the legislature on this bill and its -13 amendments and urges your support.