

D R A F T

SUMMARY

Requires Oregon Health Authority to report specified information on a quarterly basis about processing of applications for medical assistance and for renewals of medical assistance.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to medical assistance eligibility determinations; and declaring an
3 emergency.

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

SECTION 1. (1) As used in this section:

5
6 (a) **“Applicant” means an individual on whose behalf an application**
7 **for medical assistance has been submitted to the Oregon Health Au-**
8 **thority or on whose behalf a request to renew medical assistance has**
9 **been submitted to the authority.**

10 (b) **“Application” means an application for medical assistance or a**
11 **request to renew medical assistance.**

12 (c) **“Medical assistance” has the meaning given that term in ORS**
13 **414.025.**

14 (2) **Beginning October 1, 2017, and following the end of each calen-**
15 **dar quarter thereafter, the Oregon Health Authority shall report to**
16 **the Legislative Assembly, and certify to be accurate, complete and**
17 **truthful, the information described in subsection (3) of this section**
18 **broken down by applicants for medical assistance, applicants request-**
19 **ing to renew medical assistance and aggregate demographic informa-**
20 **tion including age, sex, race, ethnicity and county of residence.**

1 **(3) For the most recent 12-month period and for each calendar**
2 **quarter within the 12-month period, the Oregon Health Authority shall**
3 **report in the manner described in subsection (2) of this section the**
4 **following information:**

5 **(a) The number of applications received by the authority and the**
6 **number of applicants for whom an application was submitted to the**
7 **authority;**

8 **(b) The number and the percentage of applications and applicants**
9 **that the authority approved for medical assistance;**

10 **(c) The number and the percentage of applications and applicants**
11 **that were not approved for medical assistance along with a general**
12 **explanation of the reasons that medical assistance was denied;**

13 **(d) The average number of days, from the date an application was**
14 **submitted to the authority to the date that eligibility was approved**
15 **or denied, for the authority to determine eligibility for medical as-**
16 **sistance;**

17 **(e) The number of applicants whose eligibility for medical assist-**
18 **ance was effective prior to the date that the authority determined the**
19 **applicants to be eligible for medical assistance;**

20 **(f) The number of applications and applicants for which the au-**
21 **thority had not determined eligibility by the date of the report and the**
22 **average number of days that the applications had been pending;**

23 **(g) The number of applications pending for more than 30 days as**
24 **of the date of the report, and the number of applicants represented**
25 **by the applications;**

26 **(h) The number and the percentage of applicants who applied for**
27 **medical assistance, were found eligible for medical assistance and were**
28 **enrolled in a coordinated care organization and, with respect to those**
29 **individuals:**

30 **(A) The average number of days that elapsed from the date that**
31 **eligibility for medical assistance was determined by the authority to**

1 **the date of enrollment in a coordinated care organization; and**

2 **(B) The number of applicants that the authority enrolled in a co-**
3 **ordinated care organization more than 15 days after the date of the**
4 **eligibility determination;**

5 **(i) The number and types of corrections that the authority made**
6 **to eligibility and enrollment information after applicants were deter-**
7 **mined eligible for medical assistance;**

8 **(j) For applicants requesting renewal of medical assistance:**

9 **(A) The number and percentage to whom the authority sent a no-**
10 **tice to renew coverage; and**

11 **(B) The number and percentage who responded to a notice to renew**
12 **coverage by requesting to renew medical assistance; and**

13 **(k) Information collected by the authority on the customer experi-**
14 **ence of applicants.**

15 **SECTION 2. This 2017 Act being necessary for the immediate pres-**
16 **ervation of the public peace, health and safety, an emergency is de-**
17 **clared to exist, and this 2017 Act takes effect on its passage.**

18