HB 2838 A STAFF MEASURE SUMMARY

House Committee On Health Care

Action Date: 04/14/17

Action: Do pass with amendments. (Printed A-Eng.)

Vote: 9-0-0-0

Yeas: 9 - Alonso Leon, Buehler, Greenlick, Hack, Hayden, Kennemer, Keny-Guyer, Malstrom,

Nosse

Fiscal: Fiscal impact issued

Revenue: Has minimal revenue impact **Prepared By:** Sandy Thiele-Cirka, LPRO Analyst

WHAT THE MEASURE DOES:

Requires the Oregon Health Authority (OHA) to provide grants to independent nonprofit organizations to give application assistance to medical assistance recipients. Specifies that at least one representative be available for every 1,000 medical assistance recipients. Establishes the Oregon Health Authority Assister Fund (Fund) in the State Treasury. Specifies that coordinated care organizations (CCOs) may voluntarily contribute to the Fund. Requires OHA to update and provide specific information to the CCOs monthly.

ISSUES DISCUSSED:

- Current difficulties with the enrollment and re-enrollment process
- Inadequate access to medical assistance representatives
- Disruptions in care and the ability to refill necessary prescriptions
- Difficulties for clients who have language and/or cognitive barriers
- Role of the application assisters per medical assistance recipient
- Review of the paper application form and process
- Proposed amendment

EFFECT OF AMENDMENT:

Specifies that Oregon Health Authority (OHA) provide grants to independent nonprofit organizations providing application assistance for assister training. Establishes that the CCOs are not required to contribute to the Fund in regions where there are multiple CCOs. Directs OHA to establish a training program to allow CCOs to train employees on how to update clients' information.

BACKGROUND:

Most Oregonians can enroll in either private health insurance or free or low-cost coverage through the Oregon Health Plan (OHP), which is Oregon's Medicaid program. OHP is available to people who meet requirements for income, residency and other factors. Oregonians may also qualify based on age and disability status. Adults and children who qualify are enrolled in OHP; coverage includes doctor visits, hospital care, mental health services, dental, some vision care and more. Proponents state that individuals who are trying to enroll or re-enroll into OHP have experienced multiple challenges and difficulties, such as: long delays on the OHP phone line, long delays between submitting applications and eligibility determination, disruption in care, different enrollment processes from year to year (which creates confusion for the applicant) and changing CCO assignments to other plans from the previous provider.

Carrier: Rep. Keny-Guyer