

# House Bill 2014

Sponsored by Representatives KENY-GUYER, KOTEK

## 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 Health Plan Quality Metrics Committee to develop quality measures to gauge coordinated care organization's compliance with requirement to provide members with access to traditional health workers. Prohibits renewal or extension of contract between Oregon Health Authority and coordinated care organization that fails to achieve quality measures.

Requires office or division of Oregon Health Authority that is responsible for promoting health equity and inclusion to develop criteria and descriptions of community health workers, personal health navigators, peer wellness specialists, douglas and community organizations that employ them.

## A BILL FOR AN ACT

1  
2 Relating to individuals who provide culturally specific services to members of coordinated care or-  
3 ganizations; creating new provisions; and amending ORS 414.665.

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

5 **SECTION 1. Section 2 of this 2017 Act is added to and made a part of ORS chapter 413.**

6 **SECTION 2. (1) The Health Plan Quality Metrics Committee established by the Oregon**  
7 **Health Policy Board under ORS 413.017 shall develop quality measures to gauge whether a**  
8 **coordinated care organization has invested the resources necessary to fully satisfy the re-**  
9 **quirements of ORS 414.625 (2)(e) and 414.635 (1)(c) with respect to the availability of tradi-**  
10 **tional health workers to members of a coordinated care organization. The measures may**  
11 **include:**

12 (a) **A specified ratio of members to community health workers employed by the coordi-**  
13 **nated care organization to work with individual members and in the community; and**

14 (b) **The extent to which a coordinated care organization has entered into long term con-**  
15 **tracts with community organizations to provide community health workers for the members**  
16 **of the coordinated care organization.**

17 (2) **The committee shall consult with the Traditional Health Workers Commission in de-**  
18 **veloping the quality measures described in subsection (1) of this section. The committee may**  
19 **not adopt or modify the quality measures without the approval of the commission.**

20 (3) **Notwithstanding ORS 414.638, the Oregon Health Authority shall incorporate the**  
21 **quality measures adopted under this section into each coordinated care organization con-**  
22 **tract. The authority may not renew or extend a contract with a coordinated care organiza-**  
23 **tion if the organization has failed to achieve the quality measures during the previous**  
24 **contract period.**

25 **SECTION 3. ORS 414.665 is amended to read:**

26 414.665. (1) **In consultation with the Traditional Health Workers Commission, the Oregon Health**  
27 **Authority, for purposes related to the regulation of community health workers, personal health**  
28 **navigators, peer wellness specialists and douglas, shall adopt by rule:**

**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 (a) The criteria and descriptions of such individuals, **and community organizations that em-**  
2 **ploy such individuals**, that may be utilized by coordinated care organizations;

3 (b) Education and training requirements for such individuals;

4 (c) Appropriate professional designations for supervisors of such individuals; and

5 (d) Processes by which other occupational classifications may be approved to supervise such  
6 individuals.

7 (2) The criteria and requirements established under subsection (1) of this section:

8 (a) Must be broad enough to encompass the potential unique needs of any coordinated care or-  
9 ganization;

10 (b) Must meet requirements of the Centers for Medicare and Medicaid Services to qualify for  
11 federal financial participation; and

12 (c) May not require certification by the Home Care Commission.

13 **(3) The office or division of the Oregon Health Authority that is responsible for promot-**  
14 **ing health equity and inclusion shall develop the criteria adopted under subsection (1)(a) of**  
15 **this section.**

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