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Measure Description:

Modifies terms "venereal disease" and "sexually transmitted disease" to "sexually transmitted infection." Clarifies hearings procedure for certificates of need for certain health care facilities.

Government Unit(s) Affected:

Oregon Health Authority (OHA), Oregon Judicial Department (OJD), Employment Department (OED), Oregon State Police (OSP), Oregon Liquor Control Commission (OLCC), local county health authorities

Summary of Fiscal Impact:

Costs related to the measure are indeterminate but anticipated to be minimal - See explanatory analysis.

Analysis:

HB 29 with the -A4 amendment updates statutes relating to public pools and increases the required fee for a pool plan review. The fiscal impact of this measure to the Oregon Health Authority (OHA) and local county health authorities is indeterminate, but anticipated to be minimal, depending on the likelihood and frequency that a local county public health authority would transfer licensing and inspection authority to OHA. Although most inspections are performed by local county health authorities, OHA conducts inspections when a county transfers public health authority to OHA. In the event of such transfers, this fee increase would adequately cover OHA's costs of implementing regulatory programs directly or through contractors. This increase is based on an analysis of state-wide average costs related to inspections and licensing services currently charged by counties. In addition, the A-4 amendment resolves conflicts between this bill and Enrolled SB 142.

In addition, the measure makes clarifying and technical changes including:

- Replacing statutory references to "venereal disease" with "sexually transmitted infection" and revises other language.
- Clarifying the hearing process for obtaining certificates of need from OHA and the fee schedule for home health licenses.
- Revising the legal environment governing OHA's enforcement practices for tobacco and inhalant delivery systems wholesalers and retailers; allowing OHA to enter into agreements with Federal, State, and Local government entities to assist OHA with inspecting tobacco retailers and lounges; restricting the ability of OHA to use retired State Police for monitoring and compliance of tobacco laws; abolishing the State Police Tobacco Law Enforcement Fund; authorizing OHA to revoke or refuse to issue a certification to a smoke shop for certain violations and directing OHA not to issue a new certification to a smoke shop whose certification was revoked or renewal denied.
- Designating certain reports received by the Health Licensing Office and investigatory information as "confidential" and limits disclosure; requiring the Health Licensing Office to investigate all complaints received related to boards, commissions and professions under its purview; adding Music Therapy to the Health Licensing Office's purview and allowing the Health Licensing Office to regulate the profession, issue and revoke licenses; amending credentialing requirements for art therapy, respiratory care, and environmental health specialist trainee applicants.
- Making changes to the operation and makeup of trauma advisory boards.

- Allowing OHA to contract with third parties to operate or maintain the statewide diseases and infections registry.
- Clarifying Cannabis Tracking Requirements for individuals who prepare cannabis for medical marijuana registry card holders.
- Modifying definitions relating to the State Emergency Medical Service Committee and the makeup of the committee.
- Allowing a person to apply to OHA for a variance from rules regarding food sanitation.

These changes are anticipated to have minimal impact on the Oregon Health Authority, Oregon Judicial Department (OJD), Employment Department (OED), Oregon State Police (OSP), Oregon Liquor Control Commission (OLCC).