#### SB 770 A STAFF MEASURE SUMMARY

### **Senate Committee On Health Care**

**Action Date:** 04/08/19

Action: Do pass with amendments. Refer to Ways and Means by prior reference. (Printed A-Eng).

**Vote:** 3-2-0-0

**Yeas:** 3 - Beyer, Fagan, Monnes Anderson

Nays: 2 - Knopp, Linthicum Fiscal: Fiscal impact issued Revenue: No revenue impact

Prepared By: Brian Nieubuurt, LPRO Analyst

**Meeting Dates:** 4/1, 4/3, 4/8

# WHAT THE MEASURE DOES:

Establishes the Universal Health Care Commission (Commission) to recommend the design of the Health Care for All Oregon Plan to provide high quality, publicly funded health care available to every individual residing in Oregon. Specifies membership of the Commission. Requires the Commission to produce findings and recommendations for a well-functioning universal health care system that is responsive to the needs and expectations of the residents of the state. Specifies values and principles the Commission must consider in making recommendations. Requires the Commission to provide an interim report to the Legislative Assembly no later than March 15, 2020. Requires the Commission to submit final findings and recommendations to the Legislative Assembly no later than February 1, 2021. Declares emergency, effective on passage.

### **ISSUES DISCUSSED:**

- Current connection between employment and health care coverage
- Broad impacts of access to health care coverage
- 2017 RAND study

# **EFFECT OF AMENDMENT:**

Replaces the measure.

# **BACKGROUND:**

Health insurance coverage currently represents a mix of public programs (Medicare, Medicaid, TRICARE), employer-sponsored, and individual insurance options. According to the 2017 Oregon Health Insurance Survey, 93.8 percent of Oregonians had health insurance coverage; 47.5 percent were covered through private group health insurance, 26 percent were covered through Medicaid, 15.1 percent were covered through Medicare, and 5.2 percent were covered through private individual insurance. Although state reforms and the federal Affordable Care Act have reduced the number of uninsured individuals in Oregon, the coverage gaps that remain disproportionately affect minorities, low-income residents, and young adults. Individuals who have insurance coverage through their employers or the individual insurance market also experience continued increases in premiums and deductibles.

House Bill 3260 (2013) required the Oregon Health Authority to contract with a third party to examine four options for financing health care delivery in the state. These options included: (1) single payer; (2) a health care ingenuity plan; (3) a public option in the health insurance marketplace; and (4) the status quo. Conducted by the RAND Corporation, the study found that of the four options, the single payer and health care ingenuity plan options offered the biggest potential to make substantial changes to insurance coverage and health care delivery in Oregon.

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