

SB 134-A2
(LC 1400)
5/10/19 (SCT/ps)

Requested by HOUSE COMMITTEE ON HEALTH CARE (at the request of Representative Andrea Salinas)

**PROPOSED AMENDMENTS TO
A-ENGROSSED SENATE BILL 134**

1 On page 1 of the printed A-engrossed bill, line 2, after “ORS” insert
2 “413.032.”.

3 On page 8, delete lines 12 through 20 and insert:

4 **“SECTION 4.** ORS 413.032 is amended to read:

5 “413.032. (1) The Oregon Health Authority is established. The authority
6 shall:

7 “(a) Carry out policies adopted by the Oregon Health Policy Board;

8 “(b) Administer the Oregon Integrated and Coordinated Health Care De-
9 livery System established in ORS 414.620;

10 “(c) Administer the Oregon Prescription Drug Program;

11 “(d) Develop the policies for and the provision of publicly funded medical
12 care and medical assistance in this state;

13 “(e) Develop the policies for and the provision of mental health treatment
14 and treatment of addictions;

15 “(f) Assess, promote and protect the health of the public as specified by
16 state and federal law;

17 “(g) Provide regular reports to the board with respect to the performance
18 of health services contractors serving recipients of medical assistance, in-
19 cluding reports of trends in health services and enrollee satisfaction;

20 “(h) Guide and support, with the authorization of the board, community-
21 centered health initiatives designed to address critical risk factors, especially

1 those that contribute to chronic disease;

2 “(i) Be the state Medicaid agency for the administration of funds from
3 Titles XIX and XXI of the Social Security Act and administer medical as-
4 sistance under ORS chapter 414;

5 “(j) In consultation with the Director of the Department of Consumer and
6 Business Services, periodically review and recommend standards and meth-
7 odologies to the Legislative Assembly for:

8 “(A) Review of administrative expenses of health insurers;

9 “(B) Approval of rates; and

10 “(C) Enforcement of rating rules adopted by the Department of Consumer
11 and Business Services;

12 “(k) Structure reimbursement rates for providers that serve recipients of
13 medical assistance to reward comprehensive management of diseases, quality
14 outcomes and the efficient use of resources and to promote cost-effective
15 procedures, services and programs including, without limitation, preventive
16 health, dental and primary care services, web-based office visits, telephone
17 consultations and telemedicine consultations;

18 “(L) Guide and support community three-share agreements in which an
19 employer, state or local government and an individual all contribute a por-
20 tion of a premium for a community-centered health initiative or for insur-
21 ance coverage;

22 “(m) Develop, in consultation with the Department of Consumer and
23 Business Services, one or more products designed to provide more affordable
24 options for the small group market;

25 “(n) Implement policies and programs to expand the skilled, diverse
26 workforce as described in ORS 414.018 (4); and

27 “(o) Implement a process for collecting the health outcome and quality
28 measure data identified by the Health Plan Quality Metrics Committee and
29 report the data to the Oregon Health Policy Board.

30 “(2) The Oregon Health Authority is authorized to:

1 “(a) Create an all-claims, all-payer database to collect health care data
2 and monitor and evaluate health care reform in Oregon and to provide
3 comparative cost and quality information to consumers, providers and pur-
4 chasers of health care about Oregon’s health care systems and health plan
5 networks in order to provide comparative information to consumers.

6 “(b) Develop uniform contracting standards for the purchase of health
7 care, including the following:

8 “(A) Uniform quality standards and performance measures;

9 “(B) Evidence-based guidelines for major chronic disease management and
10 health care services with unexplained variations in frequency or cost;

11 “(C) Evidence-based effectiveness guidelines for select new technologies
12 and medical equipment; *[and]*

13 “(D) A statewide drug formulary that may be used by publicly funded
14 health benefit plans; **and**

15 **“(E) Standards that accept and consider tribal-based practices for**
16 **mental health and substance abuse prevention, counseling and treat-**
17 **ment for persons who are Native American or Alaska Native as**
18 **equivalent to evidence-based practices.**

19 “(3) The enumeration of duties, functions and powers in this section is
20 not intended to be exclusive nor to limit the duties, functions and powers
21 imposed on or vested in the Oregon Health Authority by ORS 413.006 to
22 413.042 and 741.340 or by other statutes.

23 **“SECTION 5. Section 6 of this 2019 Act is added to and made a part**
24 **of ORS chapter 414.**

25 **“SECTION 6. A medical assistance program shall consider tribal-**
26 **based practices for mental health and substance abuse prevention,**
27 **counseling and treatment services for members who are Native**
28 **American or Alaska Native as equivalent to evidence-based practices**
29 **for purposes of meeting standards of care and shall reimburse for**
30 **those tribal-based practices.**

1 **“SECTION 7. Section 6 of this 2019 Act applies to services provided**
2 **on or after the operative date specified in section 8 of this 2019 Act.**

3 **“SECTION 8. (1) Section 6 of this 2019 Act and the amendments to**
4 **ORS 413.032, 414.625 and 414.635 by sections 1 to 4 of this 2019 Act be-**
5 **come operative on January 1, 2020.**

6 **“(2) The Oregon Health Authority may take any action before the**
7 **operative date specified in subsection (1) of this section that is neces-**
8 **sary to enable the authority to exercise, on and after the operative**
9 **date specified in subsection (1) of this section, all of the duties, func-**
10 **tions and powers conferred on the authority by section 6 of this 2019**
11 **Act and the amendments to ORS 413.032, 414.625 and 414.635 by sections**
12 **1 to 4 of this 2019 Act.**

13 **“SECTION 9. This 2019 Act takes effect on the 91st day after the**
14 **date on which the 2019 regular session of the Eightieth Legislative**
15 **Assembly adjourns sine die.”.**

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