Oliver Droppers, LPRO Analyst Brian Nieubuurt, LPRO Analyst Adrienne Cooke, Committee Assistant



#### Members:

Rep. Rachel Prusak, Chair Rep. Cedric Hayden, Vice-Chair Rep. Andrea Salinas, Vice-Chair Rep. Teresa Alonso Leon Rep. Winsvey Campos Rep. Maxine Dexter

Rep. Christine Drazan Rep. Raquel Moore-Green Rep. Ron Noble Rep. Sheri Schouten

## HOUSE COMMITTEE ON HEALTH CARE

Oregon State Capitol 900 Court Street NE, Room 453, Salem, Oregon 97301 Phone: 503-986-1520

Email: https://olis.oregonlegislature.gov/liz/2021R1/Testimony/HHC

## **AGENDA**

Revision 8 Posted: APR 06 06:01 PM

## **THURSDAY**

Date: April 8, 2021 Time: 3:15 P.M. Room: Remote F

Entry to the Capitol Building is currently limited to authorized personnel only. All committee meetings are taking place remotely.

## To view a live stream of the meeting:

https://olis.oregonlegislature.gov/liz/2021R1/Committees/HHC/Overview

A viewing station is also available outside of the Capitol Building.

Instructions on how to submit written testimony and how to register to testify appear at the bottom of the agenda.

Times below reflect tentative start times for each item. Committee chairs may, at their discretion, reschedule or alter agendas to accommodate committee business.

## **Public Hearing**

HB 3159

Requires health care provider and health insurer to collect from patient, client or member data on race, ethnicity, preferred spoken and written languages, disability status, sexual orientation and gender identity.

Please note: HB 3159 is scheduled solely for the purpose of hearing testimony from the people who previously signed up to testify at the meeting on 4-6-2021.

# AGENDA (cont.) April 8, 2021

### **Work Session**

#### HB 2362

CARRIED OVER FROM THE 4-6-2021 MEETING: Requires health care entities to obtain approval from Oregon Health Authority before any mergers, acquisitions or affiliations of entities that had \$25 million or more in net patient revenue in preceding three fiscal years or before mergers, acquisitions or affiliations that will result in one entity having increase in net patient revenue of \$1 million or more.

#### HB 2517

CARRIED OVER FROM THE 4-6-2021 MEETING: Requires coordinated care organizations to report specified information to Oregon Health Authority regarding requests for prior authorization.

### HB 2464

CARRIED OVER FROM THE 4-6-2021 MEETING: Allows person employed by health care facility to practice surgical technology if person is enrolled in or has completed specified apprenticeship program.

### HB 2623

CARRIED OVER FROM THE 4-6-2021 MEETING: Limits cost-sharing for health benefit plan coverage of insulin prescribed for treatment of diabetes.

#### HB 2541

CARRIED OVER FROM THE 4-6-2021 MEETING: Provides that licensed optometrist may perform specified ophthalmic surgery procedures.

## HB 2622

CARRIED OVER FROM THE 4-6-2021 MEETING: Requires hospitals and ambulatory surgical centers to use smoke evacuation system during surgical procedures likely to generate surgical smoke.

### HB 2648

CARRIED OVER FROM THE 4-6-2021 MEETING: Allows pharmacist or pharmacy technician to transfer drug containing pseudoephedrine without prescription to person who is at least 18 years of age and presents person's valid government-issued photo identification.

## HB 3108

CARRIED OVER FROM THE 4-6-2021 MEETING: Requires individual and group health insurance policies, health care service contractors, multiple employer welfare arrangements and state medical assistance program to provide reimbursement for at least three primary care visits annually.

## HB 2076 \*\*

\*\*Subsequent Referral(s) to Ways and Means

CARRIED OVER FROM THE 4-6-2021 MEETING: Establishes Emergency Health Care Systems Program and Emergency Health Care System Advisory Board within Oregon Health Authority.

# AGENDA (cont.) April 8, 2021

#### HB 2164

Directs office of the Governor to study laws related to health and provide results to interim committees of Legislative Assembly no later than September 15, 2022.

#### HB 2046

Removes or modifies certain references to federal law in laws concerning health insurance.

#### HB 3352

Renames Health Care for All Oregon Children program as Health Care for All Oregon program and expands eligibility to adults who would qualify for Medicaid-funded state medical assistance program or for federal premium tax credits but for their immigration status.

### HB 2376

Requires health care provider who prescribes opioid to offer prescription for naloxone, or similar drug, and educational material under specified circumstances.

### HB 2958

Allows pharmacist to prescribe and dispense preexposure prophylactic antiretroviral drug to patient after completion of patient assessment.

## HB 2359

Requires health care providers to work with health care interpreters from health care interpreter registry operated by Oregon Health Authority to provide interpretation services.

#### HB 2528

Directs Oregon Board of Dentistry to issue dental therapist license to qualified applicant.

#### HB 2327

Requires Department of Human Services to study and make recommendations to interim committees of Legislative Assembly, no later than September 15, 2022, for legislative changes needed to increase access to long term care for all Oregonians.

#### HB 3036

Removes requirement that physician assistant practice under supervising physician.

## HB 2010 \*\*

\*\*Subsequent Referral(s) to Ways and Means

Creates public option to allow consumers to enroll in state-designed health plans through health insurance exchange.

## HB 3381 \*\*

\*\*Subsequent Referral(s) to Ways and Means

Directs Oregon Health Authority, in collaboration with Department of Consumer and Business Services, Public Employees' Benefit Board and Oregon Educators Benefit Board, to design health benefit plans to offer to public employees in 2023 plan year.

## AGENDA (cont.) April 8, 2021

HB 3353

Requires Oregon Health Authority to seek federal approval of amendment to state Medicaid demonstration project to permit coordinated care organizations to use portion of global budgets to improve health equity, improve overall health of community or enhance payments to providers who advance health equity or provide services improving overall health of community and to allow such expenditures to be counted as medical expenses for purposes of required medical loss ratio.

Note change: A public hearing for HB 3159 has been added solely for the purpose of hearing testimony from the people who previously signed up to testify at the meeting on 4-6-2021. Work session for HB 3159 and HB 3231 have been removed.

Unless otherwise noted on the agenda, testimony is only accepted by committees for bills or topics scheduled for a public hearing. See the Oregon Legislature's website for information on contacting individual legislators directly on bills or topics not scheduled for a public hearing.