House Bill 2082

Introduced and printed pursuant to House Rule 12.00. Presession filed (at the request of Governor Kate Brown for Oregon Health Authority)

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.

Creates Value-Based Payments Advisory Subcommittee of Oregon Health Policy Board to develop recommendation for road map for statewide implementation of value-based payments to health care providers in state medical assistance program, health insurance exchange plans and health plans offered on commercial insurance market and to public employees.

Sunsets January 2, 2032.

A BILL FOR AN ACT

Relating to reimbursement of health care providers.

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

SECTION 1. (1) The Oregon Health Policy Board shall convene a Value-Based Payments Advisory Subcommittee with broad, statewide stakeholder representation of health plans, health care providers, health care payment experts and consumers. The board may establish additional criteria for membership on the subcommittee.

(2) The subcommittee shall develop and recommend to the board, in accordance with timelines established by the board, an Oregon Value-Based Payments Road Map to:

(a) Move this state from a predominantly fee-for-service payment system to a predominantly value-based payment system; and

(b) Ensure meaningful adoption and alignment of value-based payments across all markets.

(3) The road map must include:

(a) Statewide targets for the adoption of value-based payments.

(b) Specific models for the statewide adoption of value-based payments for the alignment of value-based payments for all providers of health care.

(c) Infrastructure needed to support successful adoption and alignment of value-based payments and recommendations for funding the infrastructure.

(d) Statewide, data-driven technical assistance for those paying for health care and for providers of health care.

(e) A process to evaluate the implementation of statewide adoption and alignment of value-based payments including, specifically, the impact on health equity as a distinct component of the road map.

(4) The subcommittee shall consult with the primary care payment reform collaborative convened in accordance with section 2, chapter 575, Oregon Laws 2015, and representatives of populations and communities that have historically suffered disproportionately negative health outcomes. The board may also establish any advisory and technical subcommittees the board considers necessary to assist the Value-Based Payments Advisory Subcommittee in the
subcommittee's work.

(5) Consistent with state and federal laws, the board may adopt by rule value-based payment strategies recommended in the road map and requirements for health care providers to be reimbursed using the strategies by:

(a) The state medical assistance program;

(b) Qualified health plans offered through the health insurance exchange;

(c) Insurers with certificates to transact insurance in this state in health benefit plans, as defined in ORS 743B.005;

(d) The Public Employees' Benefit Board in health benefit plans offered under ORS 243.135; and

(e) The Oregon Educators Benefit Board in health benefit plans offered under ORS 243.866.

(6) Members of the subcommittee are not entitled to compensation or reimbursement for expenses and serve as volunteers on the subcommittee.

SECTION 2. Section 3 of this 2021 Act is added to and made a part of the Insurance Code.

SECTION 3. An insurer offering a health benefit plan, as defined in ORS 743B.005, in this state shall comply with the value-based payment requirements adopted by rule by the Oregon Health Policy Board under section 1 (5) of this 2021 Act.

SECTION 4. Sections 1 and 3 of this 2021 Act are repealed on January 2, 2032.