House Bill 2891

Sponsored by Representative EVANS; Representatives LEWIS, MEEK, NOBLE, POST, WILLIAMS (at the request of former Representative Carla Piluso) (Presession filed.)

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.

Requires health care facilities, health care providers, local public health authorities and public and private safety agencies to maintain capacity, including sufficient amounts of certain supplies, to continue in normal operation for 120 days at 25 percent mortality rate. Defines “25 percent mortality rate.” Directs Oregon Health Authority and health professional regulatory boards to report to Office of Emergency Management. Directs office to report annually to interim committee of Legislative Assembly related to emergency preparedness.

Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT

Relating to emergency preparedness; and prescribing an effective date.

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

SECTION 1. As used in sections 2 to 6 of this 2021 Act:

(1) “25 percent mortality rate” means the death of 25 percent of the total population of this state due to a pandemic, natural disaster or other similar emergency.

(2) “Essential service” has the meaning given that term by the Oregon Health Authority by rule.

(3) “Health care facility” has the meaning given that term in ORS 442.015.

(4) “Health care provider” means a person who operates an independent practice location and who is:

(a) An acupuncturist licensed under ORS 677.759;
(b) A chiropractic physician licensed under ORS chapter 684;
(c) A dentist licensed under ORS chapter 679;
(d) A massage therapist licensed under ORS 687.011 to 687.250;
(e) A naturopathic physician licensed under ORS chapter 685;
(f) A physician licensed under ORS chapter 677; and
(g) A physical therapist licensed under ORS 688.010 to 688.201.

(5) “Health professional regulatory board” means:

(a) The Oregon Board of Dentistry;
(b) The Oregon Board of Naturopathic Medicine;
(c) The Oregon Board of Physical Therapy;
(d) The Oregon Medical Board;
(e) The State Board of Chiropractic Examiners; and
(f) The State Board of Massage Therapists.

(6) “Holding room” has the meaning given that term in ORS 692.010.

(7) “Local public health authority” has the meaning given that term in ORS 431.003.

(8) “Public or private safety agency” has the meaning given that term in ORS 181A.355.

NOTE: Matter in boldfaced type in an amended section is new; matter in italic and bracketed is existing law to be omitted.
New sections are in boldfaced type.

LC 270
SECTION 2. (1) A health care facility shall maintain capacity, including sufficient amounts of the following, to continue in normal operation for 120 days at a 25 percent mortality rate:

(a) Generators;
(b) Personal protective equipment for staff; and
(c) Ventilators.

(2)(a) A health care facility shall report annually to the Oregon Health Authority, not later than the date established by the authority by rule, regarding the health care facility’s ability to comply with the requirements of subsection (1) of this section.
(b) The authority shall compile the information received under paragraph (a) of this subsection and shall report annually to the Office of Emergency Management pursuant to rules adopted by the office.

(3) The authority may adopt rules to carry out this section.

SECTION 3. (1) A local public health authority shall:

(a) Maintain the capacity to continue the following in normal operation for 120 days at 25 percent mortality rate:
(A) Essential services; and
(B) Holding rooms and mortuary refrigeration.
(d) Other private businesses as determined by the Oregon Health Authority.
(b) Consult with private businesses and housing providers within the jurisdiction of the local public health authority regarding the private businesses' and housing providers' ability to maintain capacity to continue in normal operation for 120 days at 25 percent mortality rate and assist the private businesses and housing providers as needed.

(2)(a) A local public health authority shall report annually to the Oregon Health Authority, not later than the date established by the Oregon Health Authority by rule, regarding the local public health authority’s ability to comply with the requirements of subsection (1) of this section.
(b) The Oregon Health Authority shall compile the information received under paragraph (a) of this subsection and shall report annually to the Office of Emergency Management pursuant to rules adopted by the office.

(3) The Oregon Health Authority may adopt rules to carry out this section.

SECTION 4. (1) A health care provider shall maintain sufficient amounts of necessary supplies, including personal protective equipment for staff, to continue in normal operation for 120 days at a 25 percent mortality rate.

(2)(a) A health care provider shall report annually to the health care provider's health professional regulatory board, not later than the date established by the health professional regulatory board by rule, regarding the health care provider's ability to comply with subsection (1) of this section.
(b) A health professional regulatory board shall compile the information received under paragraph (a) of this subsection and shall report annually to the Office of Emergency Management pursuant to rules adopted by the office.

(3) A health professional regulatory board may adopt rules to carry out this section.

SECTION 5. (1) A public or private safety agency shall maintain sufficient amounts of necessary supplies, including personal protective equipment for staff, to continue in normal operation for 120 days at a 25 percent mortality rate.
(2)(a) A public or private safety agency shall report annually to the Oregon Health Authority, not later than the date established by the authority by rule, regarding the public or private safety agency's ability to comply with subsection (1) of this section.

(b) The authority shall compile the information received under paragraph (a) of this subsection and shall report annually to the Office of Emergency Management pursuant to rules adopted by the office.

(3) The authority may adopt rules to carry out this section.

SECTION 6. (1) The Office of Emergency Management shall annually submit a report in the manner provided in ORS 192.245 to an interim committee of the Legislative Assembly related to emergency preparedness. The office may include in the report recommendations for legislation.

(2) The office shall adopt rules to carry out sections 2 to 6 of this 2021 Act.

SECTION 7. (1) Sections 2 and 6 of this 2021 Act become operative on January 1, 2022.

(2) Sections 3 to 5 of this 2021 Act become operative on January 1, 2023.

(3) The Oregon Health Authority and the Office of Emergency Management may take any action before the operative date specified in subsection (1) of this section that is necessary to enable the authority and the office to exercise, on and after the operative date specified in subsection (1) of this section, all of the duties, functions and powers conferred on the authority and the office by sections 2 and 6 of this 2021 Act.

(4) The Oregon Health Authority, the Office of Emergency Management and the health professional regulatory boards may take any action before the operative date specified in subsection (2) of this section that is necessary to enable the authority, the boards and the office to exercise, on and after the operative date specified in subsection (2) of this section, all of the duties, functions and powers conferred on the authority, the boards and the office by sections 3 to 5 of this 2021 Act.

SECTION 8. This 2021 Act takes effect on the 91st day after the date on which the 2021 regular session of the Eighty-first Legislative Assembly adjourns sine die.