House Bill 3159

Sponsored by Representative NOSSE

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 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. Requires Oregon Health Authority to establish data system for receipt and storage of specified data.

Takes effect on 91st day following adjournment sine die.

A BILL FOR AN ACT 1 Relating to data collection; creating new provisions; amending ORS 413.161; repealing sections 40, 2 41 and 43, chapter 12, Oregon Laws 2020 (first special session); and prescribing an effective date. 3 Be It Enacted by the People of the State of Oregon: 4 SECTION 1. (1) As used in sections 1 and 2 of this 2021 Act: 5 (a) "Board" means the: 6 (A) State Board of Examiners for Speech-Language Pathology and Audiology; (B) State Board of Chiropractic Examiners; 8 (C) State Board of Licensed Social Workers: 9 10 (D) Oregon Board of Licensed Professional Counselors and Therapists; (E) Oregon Board of Dentistry; 11 12 (F) State Board of Massage Therapists; 13 (G) Oregon Board of Naturopathic Medicine; (H) Oregon State Board of Nursing; 14 (I) Oregon Board of Optometry; 15 (J) State Board of Pharmacy; 16 (K) Oregon Medical Board; 17 (L) Occupational Therapy Licensing Board; 18 (M) Oregon Board of Physical Therapy; 19 20 (N) Oregon Board of Psychology; (O) Board of Medical Imaging; 21 (P) Long Term Care Administrators Board; 22 (Q) State Board of Direct Entry Midwifery; 23 24 (R) State Board of Denture Technology; (S) Respiratory Therapist and Polysomnographic Technologist Licensing Board; 25 (T) Board of Licensed Dietitians; and 26 27 (U) Oregon Health Authority, to the extent that the authority: (i) Licenses emergency medical services providers under ORS 682.216; and 28 (ii) Regulates traditional health workers under ORS 414.665. 29

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

(b) "Health care provider" means an individual licensed, certified, registered or otherwise

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authorized to practice by a board.

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- (c) "Health insurer" has the meaning given that term in ORS 746.600.
- (2) At least once each calendar year, a health care provider and a health insurer shall collect data on race, ethnicity, preferred spoken and written languages, disability status, sexual orientation and gender identity from the health care provider's or health insurer's patients, clients and members, in accordance with standards adopted by the authority pursuant to ORS 413.161. A health care provider and health insurer shall submit the data to the authority in the manner prescribed by the authority by rule.
 - (3)(a) The authority shall adopt rules, including but not limited to rules:
- (A) Establishing standards for reporting the data described in subsection (2) of this section; and
- (B) Establishing a process to review requests for exemption from the requirements of subsection (2) of this section.
- (b) In adopting rules under this section, the authority may consult with a board as the authority determines necessary.
- (4) Data collected under this section is confidential and not subject to disclosure under ORS 192.311 to 192.478. The authority may release the data collected under this section only if the data to be released is anonymized and aggregated.
- (5) A health insurer transacting insurance in this state may not consider any data collected under subsection (2) of this section:
- (a) In determining whether to deny, limit, cancel, rescind or refuse to renew an insurance policy;
 - (b) To establish premium rates for an insurance policy; or
 - (c) To establish the terms and conditions of an insurance policy.
- (6) The authority may provide incentives to health care providers and health insurers to assist in deferring the costs of making changes to electronic health records systems or similar systems to facilitate the collection of data described in subsection (2) of this section.
- (7) The authority may impose on a health care provider or health insurer a civil penalty not to exceed \$1,000 per violation per day for a violation of the requirements of this section or rules adopted under this section.
- SECTION 2. The Oregon Health Authority shall establish a data system for data on race, ethnicity, preferred spoken and written languages, disability status, sexual orientation and gender identity collected under section 1 of this 2021 Act. The data system established under this section must include:
- (1) A data registry to receive and store the data described in this section from health care providers and health insurers, patients, clients and members of health care providers and health insurers, the authority and the Department of Human Services. The registry must allow for health care providers and health insurers to:
 - (a) Electronically submit data collected under section 1 of this 2021 Act; and
- (b) Query the data registry to determine whether the registry contains current data for a patient, member or client.
- 42 (2) Functionality that allows a patient, member or client to directly submit to the data 43 system their data described in this section.
 - **SECTION 3.** ORS 413.161 is amended to read:
- 45 413.161. (1) The Oregon Health Authority, in collaboration with the Department of Human Ser-

- vices, shall adopt by rule uniform standards, based on local, statewide and national best practices, for the collection of data on race, ethnicity, preferred spoken and written languages [and], disability status, sexual orientation and gender identity. The authority and the department shall use the standards, to the greatest extent practicable, in surveys conducted and in all programs in which the authority or the department collects, records or reports [such] the data described in this subsection. The authority and the department shall review and update the standards at least once every two years to ensure that the standards are efficient, uniform and consistent with best practices.
- (2) The authority shall appoint an advisory committee in accordance with ORS 183.333 composed of individuals likely to be affected by the standards and advocates for individuals likely to be affected by the standards.
- SECTION 4. Sections 40, 41 and 43, chapter 12, Oregon Laws 2020 (first special session), are repealed on January 1, 2022.
 - SECTION 5. (1) Sections 1 and 2 of this 2021 Act become operative on January 1, 2022.
- (2) The amendments to ORS 413.161 by section 3 of this 2021 Act become operative on July 1, 2022.
- (3) The Oregon Health Authority may take any action before the operative date specified in subsection (1) of this section that is necessary to enable the authority 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 by sections 1 and 2 of this 2021 Act and the amendments to ORS 413.161 by section 3 of this 2021 Act.
- SECTION 6. 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.